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2020

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

E 0 =	calor	adar year 2020 or tay year beginning 01 01 20	120	.d	ding 12 21	2020	
		ndar year 2020, or tax year beginning 01-01-20 Indation	, ar	ıu er	ding 12-31-	ZUZU entification number	-
HΑ	LE FAM	ILY FOUNDATION INC D JACKSON			82-0865495	entification number	
		l street (or P.O. box number if mail is not delivered to street address) /OODFIELD ROAD 300	Room/suite		B Telephone nu	mber (see instruction	s)
1.	300 E W	COUPLELD ROAD 300			(847) 397-3000	l	
		, state or province, country, and ZIP or foreign postal code RG, IL 60173	1		C If exemption	application is pending	g, check here
G Ch	neck al	I that apply:	former public charity		D 1. Foreign ord	ganizations, check he	re
		Final return Amended return	recently pages ename,			ganizations meeting	▶ ⊔
		Address change Name change			test, chec	k here and attach cor	nputation 🕨 🔲
H Ch	neck ty	pe of organization: Section 501(c)(3) exempt private	foundation			indation status was to n 507(b)(1)(A), checl	
	Section	· · · · · · · · · · · · · · · · · · ·	e private foundation		ander section	1 307 (3)(1)(1), check	Chere
of '	year (f	tet value of all assets at end rom Part II, col. (c), \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	✓ Cash ☐ Accru	al		ition is in a 60-month n 507(b)(1)(B), check	
Pa	rt I	Analysis of Revenue and Expenses (The total	I				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,811,186				
	2	Check \blacktriangleright \square if the foundation is not required to attach					
	_	Sch. B	105		105	105	
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	195	<u> </u>	195 103,563	195 103,563	
	5a	Gross rents	103,303		103,303	103,303	
	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10	522,674				
Revenue	ь	Gross sales price for all assets on line 6a 3,905,027					
\aleph	7	Capital gain net income (from Part IV, line 2)			522,674		
	8	Net short-term capital gain				128,562	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	2,437,618		626,432	232,320	
	13	Compensation of officers, directors, trustees, etc.	14,580				
	14	Other employee salaries and wages					
es Ses	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
d X	b	Accounting fees (attach schedule)	4,500		450		4,050
Je.	С	Other professional fees (attach schedule)	42,212		42,212		
atì	17	Interest	m.1				
<u>s</u>	18	Taxes (attach schedule) (see instructions)	15,712		3,694		15
Ξ	19	Depreciation (attach schedule) and depletion					
ΑĠ	20	Occupancy	12,130				
פַ	21	Travel, conferences, and meetings	170				
ਰ	22	Printing and publications	2,737	-			1,970
Operating and Administrative Expenses	23	Total operating and administrative expenses.	2,/3/				1,970
era	24	Add lines 13 through 23	92,050		46,356		6,035
o	25	Contributions, gifts, grants paid	233,900	_	40,530		233,900
	26	Total expenses and disbursements. Add lines 24 and	233,300				233,300
		25	325,950		46,356		239,935
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	2,111,668				
	ь	Net investment income (if negative, enter -0-)			580,076		
	С	Adjusted net income (if negative, enter -0-)				232,320	
For	Daner	work Reduction Act Notice, see instructions.	i		Cat No. 11280V		~ 000-DE (2020)

1 Cash—non-interest-bearing Should be for end-of-year amounts only. (See instructions.) S1,805 3,85	Form 9	990-P	PF (2020)					Page 2
1 Cash—non-interest-bearing	Part	Ш		-	Beginning of year	/L\		
2 Savings and temporary cash investments	1			+		(D)		
A Accounts receivable ► Less: allowance for doubtful accounts ► A Pledges receivable ► Less: allowance for doubtful accounts ► 5 Grants receivable . 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) \ Less: allowance for doubtful accounts ► 5 Grants receivable (attach schedule) ► Less: allowance for doubtful accounts ► 8 Inventioner's for sale or or use . 9 Prepaic expenses and deferred charges . 10a Investments—corporate stock (attach schedule) ► Less: accumulated depreciation (attach schedule) . 10 Investments—corporate stock (attach schedule) . 11 Investments—corporate stock (attach schedule) . 12 Investments—corporate stock (attach schedule) . 13 Investments—orbor (attach schedule) . 14 Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) . 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, tem 1) 17 Accounts payable and accrued expenses. 18 Grants payable . 19 Deferred revenue . 20 Lears from officers, directors, trustees, and other disqualified persons and complete lines 24 (25, 29 and 30. 21 Mortgages and other notes payable (attach schedule) . 22 Other fabilities (describe ► 23 Total lassets without donor restrictions . 24 Pad-in or capital surplus, or land, bidgs, and equipment fund and complete lines 24 (55, 26 and 30. 25 Net assets with donor restrictions . 27 Pad-in or capital surplus, or land, bidgs, and equipment fund and complete lines 24 (55, 26 and 30. 28 Retained sarnings, accumulated income, endowment, or other funds . 29 Pad-in or capital surplus, or land, bidgs, and equipment fund . 29 Retained arrings, accumulated income, endowment, or other funds . 20 Pad-in or capital surplus, or land, bidgs, and equipment fund . 20 Retained stock, trust principal, or current funds . 21 Pad-in or capital surplus, or land, bidgs, and equipment fund . 22 Pad-in or capital surplus contact returns . 23 Total less story fund b			-	\vdash				
Less: allowance for doubtful accounts P Servator receivable Servator		_	-	\vdash	374,002		070,223	030,223
Less: allowance for doubtful accounts ▶ 5. Grants receivable. 6. Receivables due from officers, directors, trustees, and other disqualified persons (stacks schedule) be established persons (stacks s	ا ا	•						
Less: allowance for doubtful accounts	١,			\vdash				
S Grants receivable 6 Receivable 7 Receivabl	4	٠						
8 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)		_		\vdash				
200 200				<u> </u>				
7 Other notes and loans receivable (attach schedule)	6	•	· · · · · · · · · · · · · · · · · · ·					
Less: allowance for doubtful accounts								
Solution Prepaid expenses and deferred charges Prepaid expenses Prep	7	,						
9 Prepaid expenses and deferred charges . 10 Investments—Corporate bonds (attach schedule) . 11 Investments—Corporate bonds (attach schedule) . 12 Investments—Corporate bonds (attach schedule) . 13 Investments—Corporate bonds (attach schedule) . 14 Land, buildings, and equipment: basis ▶ . 15 Other assets (describe ▶ . 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1) . 17 Accounts payable and accrued expenses . 18 Grants payable and accrued expenses . 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons that follow FASB ASC 958, check here ▶ . 21 Total liabilities (describe ▶			Less: allowance for doubtful accounts ▶					
b Investments—corporate stock (attach schedule)	ऽ 8	3	Inventories for sale or use	L				
b Investments—corporate stock (attach schedule)	Se)	Prepaid expenses and deferred charges	L				
C Investments—corporate bonds (attach schedule) 1 Investments—land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 1 1 Investments—mortgage loans 1 1 Investments—mortgage loans 1 1 Investments—other (attach schedule) 1 Lend, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 1 Lend, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 1 Less: accumulated depreciation (attach schedule) 2 Less: accumulated incess and other disqualified persons 2 Less: accumulated incess and other disqualified p	₹ 10)a	$Investments-U.S.\ and\ state\ government\ obligations\ (attach\ schedule)$					
11 Investments—land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) Size		b	$Investments-corporate \ stock \ (attach \ schedule) \ \ . \ \ . \ \ . \ \ . \ \ . \ \ .$		4,317,991	% ∫	6,060,614	7,778,203
Less: accumulated depreciation (attach schedule) ▶		C	Investments—corporate bonds (attach schedule)					
12	1:	1	Investments—land, buildings, and equipment: basis ▶	_ _				
13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶			Less: accumulated depreciation (attach schedule) ▶					
13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶	12	2	Investments—mortgage loans					
Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses . 18 Grants payable . 20 Leans from officers, directors, trustees, and other disqualified persons 2. 19 Deferred revenue . 20 Lotans from officers, directors, trustees, and other disqualified persons 2. 11 Mortgages and other notes payable (attach schedule) . 22 Other liabilities (describe ▶	1:	3	Investments—other (attach schedule)					
Less: accumulated depreciation (attach schedule) 15 Other assets (describe)	1	4	Land, buildings, and equipment: basis ▶	\vdash				
15 Other assets (describe								
Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses	1	5		99,	J 850	₩ ,	850	% 850
Instructions. Also, see page 1, item 1) 5,375,448 6,755,542 8,473,13				F				
17 Accounts payable and accrued expenses	1	•			5 375 448		6 755 542	8 473 131
18 Grants payable	+			+	5,2,5,1,5			5, 1,202
19 Deferred revenue				\vdash				
Total liabilities (describe				-				
Total liabilities (describe	<u>.</u> 13			<u> </u>				
Total liabilities (describe	<u> </u>			-				
Total liabilities (add lines 17 through 22)	ے <u>ت</u>		,	\vdash				
Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29 and 30. 24 Net assets without donor restrictions								
and complete lines 24, 25, 29 and 30. 24 Net assets without donor restrictions	2:	3	Total liabilities(add lines 17 through 22)	\perp			0	
and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds	ces							
and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds	틸	4	•		5 375 448		6 755 542	
and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds	8 2			\vdash	3,373,110		0,733,312	
and complete lines 26 through 30. 26 Capital stock, trust principal, or current funds	힏	,	The dasets with donor restrictions	,⊢				
Total net assets or fund balances (see instructions)			•	-				
Total net assets or fund balances (see instructions)	0 20	6	Capital stock, trust principal, or current funds					
Total net assets or fund balances (see instructions)	to 2	7	Paid-in or capital surplus, or land, bldg., and equipment fund	F				
Total net assets or fund balances (see instructions)	ر انځ	8	Retained earnings, accumulated income, endowment, or other funds	\vdash				
Total Habilities and net assets/fund balances (see Instructions) .		9	Total net assets or fund balances (see instructions)	\vdash	5,375,448		6,755,542	
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 29 (must agree with endof-year figure reported on prior year's return) 1 5,375,448 2 Enter amount from Part I, line 27a 2 2,111,668 3 Other increases not included in line 2 (itemize) 3 925 4 Add lines 1, 2, and 3 4 7,488,041 5 Decreases not included in line 2 (itemize) 5 732,499	$\tilde{\mathbf{z}} _{3}$			\vdash	5,375,448		6,755,542	
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)		_						
of-year figure reported on prior year's return)			•	ine 2	9 (must agree with	end-		
3 925 4 Add lines 1, 2, and 3							1	5,375,448
4 Add lines 1, 2, and 3	2	Enter	r amount from Part I, line 27a			. [2	2,111,668
5 Decreases not included in line 2 (itemize) ►	3	Othe	r increases not included in line 2 (itemize) >			Ĺ	3	925
					_	· L		
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 . 6 6,755,542						Ļ	5	
	6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II	, col	umn (b), line 29		6	6,755,542

Page **3**

		nd(s) of property sold (e.g., e; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	PUBLICLY TRADED SECURITIES	(2149)	D	2020-01-01	2020-12-31	
b	PUBLICLY TRADED SECURITIES ((8635)		Р		2020-12-31
с						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain ò	h) r (loss)) minus (g)
a	525,614			397,052		128,562
b	3,360,841			2,985,30	l l	375,540
С						
d						
е						
	·					
	Complete only for assets showin	g gain in column (h) and ow	ned by the foundation	on 12/31/69		1)
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	Gains (Col. (col. (k), but not	h) gain minus less than -0-) or om col.(h))
a						128,562
b						375,540
						<u> </u>
d						
e						
2 3 Pari		loss) as defined in sections 8, column (c) (see instructi	ons). If (loss), enter -0	Part I, line 7	2 3	522,674 128,562
	ION 4940(e) REPEALED O	N DECEMBER 20, 2019	- DO NOT COMPL	<u> </u>		
	Reserved	(b)	(a)		(d)	
	(a) Reserved	Reserved	(c) Reserved		(a) Reserved	
2	Reserved			2		
	Reserved					
3	Reserved			3		
3 4	Reserved			4		
3 4 5	Reserved			3 4 5		
3 4 5	Reserved			3 4 5		
3 4 5 6	Reserved			3 4 5 6		
3 4 5 6 7	Reserved			3 4 5 6		

Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form	990-PF (20)20)							F	Page 6
(1) Carry on propagation, or otherwise attempt to influence legislation (section 945(e))?	Pai	rt VII-B	Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continued)				
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, situly, or other similar purposes? (4) Provide a grant to an individual for travel, situly, or other similar purposes? (5) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(A)(A)? See instructions. (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) If any answer is "Yes" to success for 13,4945 or in a current notice regarding disaster assistance "See instructions." Organizations relying on a current notice regarding disaster assistance "See instructions." Organizations relying on a current notice regarding disaster assistance "See instructions." Organizations relying on a current notice regarding disaster assistance "See instructions." Organizations relying on a current notice regarding disaster assistance "See instructions." If "Yes" in the foundation selection S404 of the Gundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes" in the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" in the foundation, during the year, pay premiums, directly or indirectly, to a personal benefit contract? Is at the foundation subject to the section 4960 the section 4960 the grant? If "Yes" in the foundation receive any premiums, directly or indirectly, to pay premiums on a personal benefit contract? Is at the foundation subject to the section 4960 the sec	5a	During the	year did the foundation	рау о	r incur any amount to:					Yes	No
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration driver. (3) Frovide a grant to an individual for travel, study, or other similar purposes? (4) Frovide a grant to an organization other than a charitable, etc., organization described in section 4954(d)4(3)(3)? See instructions. (5) Frovide or any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Frovide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Frovide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Frovide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) If any stream or a current notice regarding disaster assistance? See instructions. (7) Frovide or stream or str		(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?									
(3) Provide a grant to an individual for travel, study, or other similar purposes?		(2) Influence the outcome of any spec			c public election (see sect	tion 4955); or to carry	L les L				
(3) Provide a grant to an individual for travel, study, or other similar purposes?		on, di	rectly or indirectly, any v	oter re	egistration drive?		· · □ ves □	/ No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(3) See instructions. (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to Sq(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. C If the answer is "Yes" to question Sq(1), closs the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. C If the answer is "Yes" to question Sq(1), closs the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. C If Yes," attach the statement required by Regulations section 53.4945-5(d). B Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? A tray time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If "Yes" to 5b, Rie Form 8870. A tray time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If "Yes", did the foundation receive any proceeds or have any ret income attributable to the transaction? If If If If I I I I I I I I I I I I I		(3) Provid	le a grant to an individua	l for t	ravel, study, or other sim	ilar purposes?		7 No.			
(s) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to 5x(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance fock here. c If the answer is "Yes" to question 53.(4), does the foundation claim exemption from the tax because it maintained expenditure respecting disaster assistance fock here. c If the answer is "Yes" to question 53.(4), does the foundation claim exemption from the tax because it maintained expenditure respecting the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). Gai Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? versonal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? versonal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? versonal benefit contract? b Did 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? List all officers, directors, trustees, foundation managers and their compensation. See Instructions (a) Name and address (b) Title, and average devoted to position c) Title, and average devoted to position c) Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." C) DAND HALE versonal personal personal personal enter than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee paid employees (other than those included on line 1—see instruct		(4) Provid	le a grant to an organiza	tion ot	her than a charitable, etc	, organization described					
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, of for the prevention of cruety to children or animals?. b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4955 or in a current notice regarding disaster assistance check here. Crganizations relying on a current notice regarding disaster assistance check here. Crganizations relying on a current notice regarding disaster assistance check here. Creative answer is "Yes" to question \$3.4(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation claim exemption from the tax because it maintained sexpenditure responsibility for the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation of the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation sexponsibility for the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation of the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation of the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation of the grant?. Creative answer is "Yes" to question \$3.4(4), does the foundation and party to a prohibited tax shelter transaction? Yes \(\text{No} \) No B is the foundation, during the year, receive any proceeds or have any net income attributable to the transaction? The provide the grant of the grant o		in sec	tion 4945(d)(4)(A)? See	instru	ctions		· · □ Yes □	/ No			
b If any answer is "Set" 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. Organizations relying on a current notice regarding disaster assistance check here. If the answer is "Set" to question 5a(4), does the foundation claim exemption from the tax because the maintained expenditure responsibility for the grant?. If "Yes," attach the statement required by Regulations section 53.4945-5(d). But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? Tax Are ys time during the tex year, was the foundation a party to a prohibited tax shelter transaction? The if "Yes," of the foundation receive any proceads or have any net income attributable to the transaction? The if "Yes to difference of the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractute payment during the year? The if "Yes to difference of the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractute payment during the year? List all officers, directors, trustees, foundation managers and their compensation. See instructions (a) Name and address (b) Title, and average devoted to position AND The instructions to purpose the problems of the		(5) Provid	le for any purpose other	than r	eligious, charitable, scien	tific, literary, or					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		educa	tional purposes, or for th	e prev	ention of cruelty to childr	en or animals?	· · 🔲 Yes 🖸	Z No			
Conganizations relying on a current notice regarding disaster assistance check here. 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?. If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?. b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. b Did the foundation during the tear, pay premiums, directly or indirectly, on a personal benefit contract?. b Did the foundation foundation aparty to a prohibited tax shelter transaction? 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes", did 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? 1 List all officers, directors, trustees, foundation managers and their compensation. See instructions and contractors 1 List all officers, directors, trustees, foundation managers and their compensation. See instructions of the paid, enter devoted to position 1 DAVID HALE PRESIDENT 1 OND 2000.00 And Contributions to employee benefit plans and deferred compensation of the allowances of the paid, enter devoted to position of the paid enter domination o	b				= =		ceptions described in				
c If the answer is "ves" to question 5s.(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?		=							5b		
tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d). B) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? c) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? To B) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? To B) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? To B) If "Yes," did the foundation a party to a prohibited tax shelter transaction? To B) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? To B) If "Yes," did the foundation at year, pay premiums, directly or indirectly, on a personal benefit contractor. To B) If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, to not paid, on the transaction? To B) If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, to not paid, enter divided to position or excess parachute payment during the year, pay premiums, directly or indirectly, to not paid, enter divided to position or excess parachute payment during the year? To B) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? To B) If "Yes," did the foundation or every proceeds or have any net income attributable to the transaction? To B) If "Yes," did the foundation, directly any net income attributable to the transaction? To B) If "Yes,"		-	· -				• [
If "Yes," attach the statement required by Regulations section 53.4945-5(d). 40 b) Id the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. 50 b) Id the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 51 If "Yes" to 6b, file Form 8870. 52 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 53 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 54 If "Yes", idid the foundation receive any proceeds or have any net income attributable to the transaction? 55 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? 56 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? 57 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? 57 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? 58 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? 59 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? 60 Expense account, other allowances of excess parachute payment during the year? 60 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." 61 Expense account, other allowances of each employee paid (b) Title, and average hours per week devoted to position in the payment of the employees paid over \$50,000.	С		•			•					
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. John Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No 1f "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No 1f "Yes" (d) the foundation receive any proceeds or have any net income attributable to the transaction? No 1f yes No 1f Ye			•				· · Yes	□No			
a personal benefit contract?. b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		If "Yes," a	ttach the statement requ	iired b	y Regulations section 53.	4945-5(d).					
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Test No 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No 15 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 16 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 17 fives", did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration? Yes No 18 fives No 1	6a	Did the fo	undation, during the yea	r, rece	ive any funds, directly or	indirectly, to pay premiu	ıms on				
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?							I I Yes IN	Z No			
Total number of other employees paid over \$50,000.	b			r, pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			·								
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?		-	-				⊥ res ∟	Z No	l		
Total number of other employees paid of the remployees paid over \$50,000.		•			•				7b		
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 00.00 00 00 00 00 00 00 00 00 00 00 00	8		•					_			
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NONE Total number of other employees paid over \$50,000		mo	ore than \$50,000			(c) Compensation		0	ther al	lowanc	es
Total number of other employees paid over \$50,000	NON	=					compensation				
	NON	=									
	T-4:	I married	Fother organization ! !	V07 *F	0.000						
	rota	i Humber of	outer employees paid o	ver \$5	0,000				rm OO	0-PE	(2020)

Form 990-PF (2020)		Page 7
Part VIII Information About Officers, Directors, Training and Contractors (continued)	ustees, Foundation Managers, Highly Paid	l Employees,
3 Five highest-paid independent contractors for profession	IONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
Total number of others receiving over \$50,000 for professional service	ces	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. 1	Include relevant statistical information such as the number of	:
organizations and other beneficiaries served, conferences convened, research pa	apers produced, etc.	Expenses
1		
		4
2		
-		-
-		-
3		
4		_
		4
Part IX-B Summary of Program-Related Investmen	ite (egg instructions)	
Describe the two largest program-related investments made by the foundation		Amount
1 N/A	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		P
		5 000 PF (3030)

1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

2

За 3h

4

5

239,935

239.935

Form 990-PF (2020)

2

3

4

5

178,335

124,912

Form **990-PF** (2020)

Page 9

Pa	rt	Χı	• •	

Undistrib

Form	990-PF (2	020)

1 Distributa

2

Undistributed Income (see instructions)

able amount for 2020 from Part XI, line 7
uted income, if any, as of the end of 2020:
nount for 2019 only

- a Enter am **b** Total for prior years: 20______, 20______ Excess distributions carryover, if any, to 2020:
- a From 2015. **b** From 2016. . . .
- c From 2017. . .
- d From 2018.
- e From 2019.
- f Total of lines 3a through e.
- 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$
- a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years
 - (Election required—see instructions).

 - required—see instructions).

same amount must be shown in column (a).)

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

6 Enter the net total of each column as

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 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9: a Excess from 2016. . . **b** Excess from 2017. . c Excess from 2018. . . . d Excess from 2019. . . e Excess from 2020. .

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract 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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

indicated below:

- **d** Applied to 2020 distributable amount. . . .
- c Treated as distributions out of corpus (Election

(a)

Corpus

(b)

Years prior to 2019

(c)

2019

61,600

61,600

For	m 990-PF (2020)					Page 10
	Part XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or defoundation, and the ruling is effective for 20					
b	Check box to indicate whether the organization	on is a private oper	ating foundation des	scribed in section $ {\sf f \Box} $	☐ 4942(j)(3) or ☐] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
Ь						
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а						
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
D.	Supplementary Information			foundation had	\$5,000 or more i	in
1	assets at any time during th Information Regarding Foundation Mana- List any managers of the foundation who have before the close of any tax year (but only if DAVID HALE	agers: re contributed more	than 2% of the tota			n
b	List any managers of the foundation who own ownership of a partnership or other entity) of	n 10% or more of th of which the founda	ne stock of a corpora tion has a 10% or g	ation (or an equally l reater interest.	arge portion of the	
2	Information Regarding Contribution, Gr		• • • • •	-		
	Check here ► ☑ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gr	ants, etc. to individu	le organizations and uals or organizations	l does not accept under	
a	The name, address, and telephone number of	or email address of	the person to whom	applications should	be addressed:	
b	The form in which applications should be sul	omitted and informa	ation and materials t	hey should include:		
c	: Any submission deadlines:					
d	Any restrictions or limitations on awards, su factors:	ch as by geographic	al areas, charitable	fields, kinds of instit	cutions, or other	

Form 990-PF (2020)	-			Page 11						
Part XV Supplementary Informa	ation (continued)									
3 Grants and Contributions Paid	Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount						
a <i>Paid during the year</i> See Additional Data Table										
Total			▶ 3a	233,900						
b Approved for future payment										
	+									
		1								
		1								
		1								
Total			▶ 3h							

Form **990-PF** (2020)

nter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp
1 Progran	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.
a						
-	and contracts from government agencies					
_	ership dues and assessments					
	t on savings and temporary cash					
investn				14	195	
	nds and interest from securities			14	103,563	
	ntal income or (loss) from real estate:					
	financed property lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	(loss) from sales of assets other than					
invento	ory			14	522,674	
	ome or (loss) from special events:					
	profit or (loss) from sales of inventory					
	revenue: a					
2 Subtot	al. Add columns (b), (d), and (e)				626,432	
	Add line 12, columns (b), (d), and (e)			1	3	626,432
Ozet VV	orksheet in line 13 instructions to verify calcu	lations.)	mont of Evon	nt Burnococ		
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art XVI	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the founda	e Accomplish	ed in column (e) o	of Part XVI-A contribu		
art XVI	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the founda	e Accomplish	ed in column (e) o	of Part XVI-A contribu		
art XVI	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the founda	e Accomplish	ed in column (e) o	of Part XVI-A contribu		
Part XV. Line No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the founda	e Accomplish	ed in column (e) o	of Part XVI-A contribu		

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitab Exempt Organizations	ole	
Did the same	-institute discrete, and institute discrete in any of the following with any other constitute described in a stitute FOI		

Ш	air VAT	Exempt Organi	zations										
		rganization directly or in than section 501(c)(3)								on 501		Yes	No
а	Transfers	from the reporting foun	rom the reporting foundation to a noncharitable exempt organization of:										
	(1) Cash	1								. [1a(1)		No
	(2) Othe	er assets	assets							.	1a(2)		No
b	Other tra	nsactions:											
	(1) Sale	Sales of assets to a noncharitable exempt organization								1b(1)		No	
	(2) Purc	hases of assets from a r	noncharitable	exempt or	rganiz	zation					1b(2)		No
		tal of facilities, equipmen	•				•				1b(3)		No
	` '	nbursement arrangemer					٠				1b(4)		No
	. ,	ns or loan guarantees.								- 1	1b(5)		No
		rmance of services or m	•		-					•	1b(6)		No
	-	of facilities, equipment, r swer to any of the above								• [1c		No
	of the go	ods, other assets, or ser ansaction or sharing arra (b) Amount involved	vices given by ingement, sho	the repor	rting mn (c	foundation. If the	e fou ne go	undation received oods, other asset	d less than fair mar	ket value ved.	e	ngemen	ts
(4)	Line No.	(b) Amount involved	(c) Nume of t	TOTICHATICADI	ic cxc	mpt organization		(d) Description of	dransiers, transactions	, and snar	ing arrai	igennen	
		ındation directly or indire	•			•					ī		
		l in section 501(c) (othe		501(c)(3))) or i	in section 527? .	•		⊔∀	es 🛂	No		
b	If "Yes," o	complete the following s							() 5	6 1 11	1.1		
		(a) Name of organization	on		(1	b) Type of organizat	tion		(c) Description	n of relatio	nship		
~: .	of r whi	der penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co							ased on a	all infor	mation	n of
	gn ere	*****				2021-04-19		*****		return	e IRS dis e prepar		
		Signature of officer or t	Signature of officer or trustee			Date		Title		(see in	str.)] _{Yes} □] No
		Print/Type preparer's	s name	Preparer's	s Sigr	nature	D	ate	Check if self-	PTIN			
D۶	id	THOMAS F LENZ						2021-04-20	employed ▶ □		P01879	885	
Pr	epare	I II III O II GIII C F	SSET TAX SEF	RVICES LL	.C					Firm's EI	N ▶83-	-34496	81
US	e Only		300 E WOODF	IEI D DD C	TF 24	00							
			CHAUMBURG,							Phone no	o. (312)) 429-2	2482
		I											

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
PURDUE RESEARCH FOUNDATION 1281 WIN HENTSCHEL BLVD WEST LAFAYETTE, IN 47906	NONE	PUBLIC	GENERAL	200,000

WEST LAFAYETTE, IN 47906				
ALASKA WHALE FOUNDATION PO BOX 1927 PETERSBURG, AK 99833	NONE	PUBLIC	GENERAL	5,000

PO BOX 1927 PETERSBURG, AK 99833				
COSLEY ZOO1356 N GARY AVE WHEATON, IL 60187	NONE	PUBLIC	GENERAL	1,000

COSLEY ZOO1356 N GARY AVE WHEATON, IL 60187	NONE	PUBLIC	GENERAL	1,000

Total .

233,900

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year

a Falu during the year				
DEPAUL UNIVERSITY1 E JACKSON BLVD CHICAGO, IL 60604	NONE	PUBLIC	GENERAL	3,000
DOCTORS WITHOUT BORDERS	NONE	PUBLIC	GENERAL	1,000

0.110,100,11				
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	NONE	PUBLIC	GENERAL	1,000
DUPAGE COUNTY HISTORICAL MUSEUM FOU	NONE	PUBLIC	GENERAL	1,000

NEW YORK, NY 10006				
DUPAGE COUNTY HISTORICAL MUSEUM FOU 102 E WESLEY ST WHEATON, IL 60187	NONE	PUBLIC	GENERAL	1,000
				1

			1	
DUPAGE COUNTY HISTORICAL MUSEUM FOU 102 E WESLEY ST WHEATON, IL 60187	NONE	PUBLIC	GENERAL	1,000
Total			▶ 3a	233,900

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

THE NATURE CONSERVANCY 400 N MICHIGAN AVE STE 100 CHICAGO, IL 60611	NONE	PUBLIC	GENERAL	500
NORTHWESTERN MEMORIAL FOUNDATION	NONE	PUBLIC	GENERAL	100

NORTHWESTERN MEMORIAL FOUNDATION 541 NORTH FAIRBANKS COURT SUITE 800 CHICAGO, IL 60611	NONE	PUBLIC	GENERAL	100
ROBERT MCCORMICK FOUNDATION	NONE	PUBLIC	GENERAL	300

SUITE 800 CHICAGO, IL 60611				
ROBERT MCCORMICK FOUNDATION 205 N MICHIGAN AVENUE	NONE	PUBLIC	GENERAL	300

SUITE 800 CHICAGO, IL 60611				
ROBERT MCCORMICK FOUNDATION 205 N MICHIGAN AVENUE SUITE 4300	NONE	PUBLIC	GENERAL	30

CHICAGO, IL 60601			
Total	 	> 3a	233,900

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

			1	1
SIGMA KAPPA FOUNDATION 696 PRO-MED LANE SUITE 300 CARMEL, IN 46032	NONE	PUBLIC	GENERAL	500
UNITED WAY OF METRO CHICAGO	NONE	PUBLIC	GENERAL	100

CARTILL, IN 40032				
UNITED WAY OF METRO CHICAGO 333 S WABASH AVE 30TH FL CHICAGO, IL 60604	NONE	PUBLIC	GENERAL	100
WOUNDED WARRIOR PROJECT 230 W MONROE ST	NONE	PUBLIC	GENERAL	100

CHICAGO, IL 60604				
WOUNDED WARRIOR PROJECT 230 W MONROE ST SUITE 200 CHICAGO, IL 60606	NONE	PUBLIC	GENERAL	100

233,900

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL MULTIPLE SCLEROSIS NONE PUBLIC GENERAL 500

SOCIETY

525 WEST MONROE ST SUITE 1510 CHICAGO, IL 60661				
THE SUMMIT FOUNDATION 103 S HARRIS STREET	NONE	PUBLIC	GENERAL	500

103 S HARRIS STREET BRECKENRIDGE, CO 80424	NONE	POBLIC	GENERAL	500
RONALD MCDONALD HOUSE CHARITIES 1301 W 22ND ST SUITE 905	NONE	PUBLIC	GENERAL	400

			▶ 3a	233,900
SUITE 905 OAKBROOK, IL 60523				
RONALD MCDONALD HOUSE CHARITIES 1301 W 22ND ST	NONE	PUBLIC	GENERAL	400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR RESTON, VA 20190	NONE	PUBLIC	GENERAL	400

, =				
GUARDIAN OF THE WILD 11100 WILDLIFE CENTER DR RESTON, VA 20190	NONE	PUBLIC	GENERAL	400
HABITAT FOR HUMANITY	NONE	PUBLIC	GENERAL	100

11100 WILDLIFE CENTER DR RESTON, VA 20190				
HABITAT FOR HUMANITY 1100 W CERMAK RD SUITE 404 CHICAGO, IL 60608	NONE	PUBLIC	GENERAL	100

Total			▶ 3a	233,900
HABITAT FOR HUMANITY 1100 W CERMAK RD SUITE 404 CHICAGO, IL 60608	NONE	PUBLIC	GENERAL	100
11100 WILDLIFE CENTER DR RESTON, VA 20190				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
NATIONAL PARKS CONSERVATION ASSOCIA 777 6TH STREET NW SUITE 700 WASHINGTON, DC 20001	NONE	PUBLIC	GENERAL	50

SUITE 700 WASHINGTON, DC 20001				
THE LEUKEMIA & LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	NONE	PUBLIC	GENERAL	100

THE LEUKEMIA & LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	NONE	PUBLIC	GENERAL	100
THE FIELD MUSEUM	NONE	PUBLIC	GENERAL	250

3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573				
THE FIELD MUSEUM 1400 S LAKESHORE DRIVE	NONE	PUBLIC	GENERAL	250

RYE BROOK, NY 10573				
THE FIELD MUSEUM 1400 S LAKESHORE DRIVE CHICAGO, IL 60605	NONE	PUBLIC	GENERAL	250

▶ 3a

233,900

THE FIELD MUSEUM	NONE	PUBLIC	GENERAL	
1400 S LAKESHORE DRIVE CHICAGO, IL 60605				

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
THE WILDERNESS SOCIETY	NONE	PUBLIC	GENERAL	100

1615 M STREET NW WASHINGTON, DC 20036				
EARTH WATCH INSTITUTE 1380 SOLDIERS FIELD RD	NONE	PUBLIC	GENERAL	400

'				
EARTH WATCH INSTITUTE 1380 SOLDIERS FIELD RD STE 2700	NONE	PUBLIC	GENERAL	400
BOSTON, MA 02135				

1380 SOLDIERS FIELD RD STE 2700 BOSTON, MA 02135				
OCEANITES INC3292 ARCADIA PL NW WASHINGTON, DC 20015	NONE	PUBLIC	GENERAL	500

BOSTON, MA 02135				
OCEANITES INC3292 ARCADIA PL NW WASHINGTON, DC 20015	NONE	PUBLIC	GENERAL	500

OCEANITES INC3292 ARCADIA PL NW WASHINGTON, DC 20015	NONE	PUBLIC	GENERAL	5
Total			▶ 3a	233,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a Faid duffing the year				
TAU BETA PI ASSOCIATION PO BOX 2697 KNOXVILLE, TN 37901	NONE	PUBLIC	GENERAL	500
		1		I

KNOXVILLE, TN 37901				
WTTW5400 N SAINT LOUIS AVE CHICAGO,IL 60625	NONE	PUBLIC	GENERAL	500
THE CONSERVATION FOUNDATION	NONE	PUBLIC	GENERAL	1,000

CHICAGO, IL 60625				
THE CONSERVATION FOUNDATION 10S404 KNOCK KNOLLS RD	NONE	PUBLIC	GENERAL	1,000
NAPERVILLE, IL 60565				

THE CONSERVATION FOUNDATION 10S404 KNOCK KNOLLS RD NAPERVILLE, IL 60565	NONE	PUBLIC	GENERAL	1,00
Total			▶ 3a	233,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF SOUTH GEORGIA ISLAND NONE PUBLIC: **GENERAL** 500 25 DAKOTA MEADOWS DR

CARBONDALE, CO 80623				
INTERNATIONAL MUSEUM OF SURGICAL SC 1524 N LAKESHORE DR CHICAGO, IL 60610	NONE	PUBLIC	GENERAL	1,000
MIKE ROWE WORKS FOUNDATION	NONE	PUBLIC	GENERAL	300

CHICAGO, IL 60610				
MIKE ROWE WORKS FOUNDATION 1207 4TH ST PH 3 SANTA MONICA, CA 90401	NONE	PUBLIC	GENERAL	300

Total .

За

233,900

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or husiness)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
THE MORTON ARBORETUM 4100 ILLINOIS RTE 53	NONE	PUBLIC	GENERAL	200

4100 ILLINOIS RTE 53 LISLE, IL 60532				
THE LIGHTHOUSE SHELTER 1101 N MADISON ST	NONE	PUBLIC	GENERAL	1,0
MARDION II COOFO	l .			

	1		1	
THE LIGHTHOUSE SHELTER 1101 N MADISON ST MARION, IL 62959	NONE	PUBLIC	GENERAL	1,000
MARCH OF DIMES1550 CRYSTAL DR SUITE 1300	NONE	PUBLIC	GENERAL	100

MARION, IL 62959				
MARCH OF DIMES1550 CRYSTAL DR SUITE 1300 ARLINGTON, VA 22202	NONE	PUBLIC	GENERAL	100

233,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO, IL 60632	NONE	PUBLIC	GENERAL	1,000
HOWE ALUMNI ASSOCIATION GENERAL FUN	NONE	PUBLIC	GENERAL	1,000

C1110/100/12 00002				
HOWE ALUMNI ASSOCIATION GENERAL FUN PO BOX 140 SADORUS, IL 61872	NONE	PUBLIC	GENERAL	1,000
THE NATIONAL GEOGRAPHIC SOCIETY	NONE	DUBLIC	CENEDAL	10.000

PO BOX 140 SADORUS, IL 61872				
THE NATIONAL GEOGRAPHIC SOCIETY 1145 17TH ST NW WASHINGTON, DC 20036	NONE	PUBLIC	GENERAL	10,000

233,900

THE NATIONAL GEOGRAPHIC SOCIETY 1145 17TH ST NW WASHINGTON, DC 20036 PUBLIC GENERAL 10,000	SADORUS, IL 61872				
	1145 17TH ST NW	NONE	PUBLIC	GENERAL	10,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	, ,	
a Paid during the year			

MULTIPLE SCLEROSIS FOUNDATION	NONE	PUBLIC	GENERAL	
520 N ANDREWS AVE				
ORT LAUDERDALE, FL 33309				

MULTIPLE SCLEROSIS FOUNDATION 6520 N ANDREWS AVE FORT LAUDERDALE, FL 33309	NONE	PUBLIC	GENERAL	500
Total			▶ 3a	233,900

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491129003551							
TY 2020 Accounting Fees Se	chedule						
Nam	e: HALE FA	MILY FOUNDATION	INC				
C/O DAVID JACKSON							
EI	EIN: 82-0865495						
Category	Amount	Net Investment	Adjusted Net	Disbursements			
		Income	Income	for Charitable Purposes			
ACCOUNT FEES	4,500	450		4,050			

TY 2020 Investments Corporate Stock Schedule

Name: HALE FAMILY FOUNDATION INC

C/O DAVID JACKSON

EIN: 82-0865495

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
MISC.				
SCHX - SCHWAB US LARGE CAP				
VTW - VANGUARD VALUE ETF				
IJR - ISHARES TR S&P SM CAP				
IEFA - ISHARES CORE MSCI EAFE				
LZIEX - LAZARED INTL EQUITY				
OUSIX - PEAR TREE POLARIS FOREIGN				
GOGIX - GQC PTRS EMERG MARKETS				
RWCIX - RWC GLOBAL EMG MARKETS	470,252	673,617		
BEAM THERAPEUTICS INC	42,243	40,820		
FREEPORT-MCMORAN INC	58,551	130,100		
SIRIUS XM HOLDINGS INC	36,485	38,220		
SITIME CORP	57,166	55,965		
WHEATON PRECIOUS METAL	52,680	83,480		
INVESCO DYNAMIC	33,889	140,262		
INVESCO QQQ TRUST	14,899	43,924		
ISHARES NASDAQ	52,480	75,745		
GNRC GENERAC HOLDINGS	114,113	503,258		
EMLP FIRST TRUST NORTH	342,389	352,820		
SCHX SCHWAB US LARGE CAP	1,099,891	1,456,655		
AKRIX AKRE FOCUS INSTL	668,174	689,324		
BLACKSTONE ALTERNATIVE	527,184	538,013		
GQG PARTNERS EMERGING MKTS	422,546	572,013		
HARBOR SMALL CAP VALUE I	335,797	396,249		
HLMIX HARDING LOEVNER	861,841	959,880		
JSMTX JACKSON SQUARE SMID-CAP	354,258	416,517		
LLINX LONGLEAF PARTNERS INTERN	515,776	611,341		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN	93491129003551
TY 2020 Investments - Other	Schedule		
Name:	HALE FAMILY FOUNDATION	INC	
	C/O DAVID JACKSON		
EIN:	82-0865495		
nvestments Other Schedule 2			
Category/ Item	Listed at Cost of FMV	r Book Value	End of Year Fair Market Value

AT COST

OTHER

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491129003551
TY 2020 Other Assets Schedule		

Name: HALE FAMILY FOUNDATION INC.

C/O DAVID JACKSON

	_	_	_	_	_

SECURITY DEPOSITS

Description			Beginning of Year -	
Other Assets Schedule				
	EIN:	82-0865495		

Book Value

850

End of Year - Book

850

End of Year - Fair

850

Market Value

Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129003551			
TY 2020 Other Decreases Schedule						
Name:	HALE FAMILY FO	OUNDATION INC				
	C/O DAVID JACI	KSON				
EIN:	82-0865495					
D	escription		Amount			
FMV ADJ			732,499			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491129003551
TY 2020 Other Expenses Sche	dule			
Name:	HALE FAMILY FO	OUNDATION INC		
	C/O DAVID JAC	KSON		
EIN:	82-0865495			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
OUTSIDE SERVICES	1,970			1,970

767

DUES AND SUBSCRIPTIONS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 9349112900	03551
TY 2020 Other Increases Sche	dule			
Name:	HALE FAMILY	FOUNDATION INC		
	C/O DAVID JA	CKSON		
EIN:	82-0865495			
Other Increases Schedule				
De	escription		Amount	
INV INCOME TIMING DIFFERENCE				925

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data -	<u>-1</u>	DLI	N: 93491129003551
TY 2020 Other Professiona	I Fees Schedu'	le		
Nan	ne: HALE FAMIL`	Y FOUNDATION IN	IC	!
	C/O DAVID J	JACKSON		
E	IN: 82-0865495			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

42,212

42,212

INV MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	<u>-</u> T	DI	LN: 93491129003551
TY 2020 Taxes Schedule				
Name:	HALE FAMIL	Y FOUNDATION INC	С	
	C/O DAVID J	JACKSON		
EIN:	82-0865495	j		
Taxes Schedule		<u> </u>		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAX	12,003			
IL CHARITY BUREAU FUND	15			15
FOREIGN TAX	3,694	3,694		

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491129003551
Schedule B		Schedu	ule of Contribute	ors	-	OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	•		Form 990, 990-EZ, or 990 o <u>v/Form990</u> for the latest			2020
Name of the organization HALE FAMILY FOUNDATION	N INC				Employer id	entification number
C/O DAVID JACKSON Organization type (che	ck one).				82-0865495	
organization type (one	ok one).					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)()((enter number) o	organization			
	☐ 4947(a)(1)	nonexempt char	ritable trust not treated a	as a private founda	tion	
	☐ 527 politica	l organization				
Form 990-PF	✓ 501(c)(3) e	xempt private fo	undation			
	☐ 4947(a)(1)	nonexempt char	itable trust treated as a	private foundation		
	☐ 501(c)(3) ta	axable private fo	undation			
			PF that received, during omplete Parts I and II. S			
Special Rules						
under sections 5 received from an	09(a)(1) and 170(b)(1)(A)(vi), that che ing the year, tota	g Form 990 or 990-EZ tl cked Schedule A (Form al contributions of the gr plete Parts I and II.	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year,	total contributions of n	nore than \$1,000	or (10) filing Form 990 Dexclusively for religious animals. Complete Par	s, charitable, scient		
during the year, If this box is chec purpose. Don't c	contributions <i>exclusive</i> cked, enter here the to omplete any of the pa	ely for religious, otal contributions rts unless the G e	or (10) filing Form 990 charitable, etc., purpose that were received dur eneral Rule applies to t or more during the year	es, but no such con ing the year for an o his organization be	tributions total exclusively rel cause it receiv	led more than \$1,000. ligious, charitable, etc., ved <i>nonexclusively</i>
Caution: An organizatio 990-EZ, or 990-PF), but or on its Form 990PF, P 990-EZ, or 990-PF).	it must answer "No" o	on Part IV, line 2	, of its Form 990; or che	eck the box on line l	H of its Form 9	n 990, 990-EZ
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ctions	Cat. No. 30613X	Schedu	ıle B (Form 990,	990-EZ, or 990-PF) (2020)

Employer identification number 82-0865495

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	DAVID HALE 25W670 COVENTRY ST	\$ 1,811,186	Person Payroll
	WHEATON, IL 601873002		Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Schedule B /F	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Page 3 Name of organization **Employer identification** HALE FAMILY FOUNDATION INC number C/O DAVID JACKSON 82-0865495 Part II Noncash Property (see Instructions). Use duplicate copies of Part II if additional space is needed. (c) (a) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) See Additional Data Table \$ (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions)

		_\$	
(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
		_\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2020)			Page 4
Name of or HALE FAMII C/O DAVID	LY FOUNDATION INC			mployer identification number 2-0865495
Part III	than \$1,000 for the year from any one contr	ibutor. Complete colu total of exclusively re nstructions.) ► \$_	ımns (a) thr ougl	n section 501(c)(7), (8), or (10) that total more h (e) and the following line entry. For sle, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
-	Transferee's name, address, and Z	(e) Transf IP 4	•	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (c) Use	of gift	(d) Description of how gift is held
-	Transferee's name, address, and Z	(e) Transf		nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transference name address and 7	(e) Transf		nship of transferor to transferee
	Transferee's name, address, and Z		Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (c) Use	of gift	(d) Description of how gift is held
-	Transferee's name, address, and Z	(e) Transf IP 4		nship of transferor to transferee
			Sch	edule B (Form 990, 990-EZ, or 990-PF) (2020)

Additional Data

Software ID:

Software Version:

EIN: 82-0865495

Name: HALE FAMILY FOUNDATION INC

C/O DAVID JACKSON

(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	300 SHS ABT	\$ 32,526	2020-11-24
<u>1</u>	500 SHS IBB	\$ 69,418	2020-11-24
<u>1</u>	2000 SHS WPM	\$ 77,410	2020-11-24
<u>1</u>	200 SHS ANET	<u>\$ 54,163</u>	2020-11-24
1	2000 SHS SLV	\$ 43,100	2020-11-24
1	3807 SHS INTC	<u>\$ 256,363</u>	2020-02-14
<u>1</u>	1000 SHS BA	\$ 219,355	2020-11-24
<u>1</u>	200 SHS PAYC	<u>\$ 80,341</u>	2020-11-24
<u>1</u>	1199 SHS CP	\$ 326,188	2020-02-14
<u>1</u>	5000 SHS FCX	<u>\$ 113,625</u>	2020-11-24

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 6000 SHS SIRI \$ 39,600 2020-11-24 2020-02-14 2213 SHS GNRC \$ 254,174 2020-11-24 2000 SHS PBE \$ 123,730 2020-11-24 200 SHS CEF \$ 35,320 140 SHS QQQ \$ 40,923 2020-11-24 2020-11-24

\$ 44,950

1000 SHS TWTR