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

#### EXTENDED TO NOVEMBER 16, 2020 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.



For ca	len	dar year 2019 or tax year beginning		, and ending		
Name	e of	foundation			A Employer identification	number
HE	A	LTHY COMMUNITIES FOUNDA	LION		36-4324067	
		nd street (or P.O. box number if mail is not delivered to street a		Room/suite	<b>B</b> Telephone number	
_19	]	RIVERSIDE ROAD		6	708-443-56	74
		own, state or province, country, and ZIP or foreign p ERSIDE , IL 60546–2606	ostal code		<b>C</b> If exemption application is pe	ending, check here
		all that apply: Initial return	Initial return of a fo	ormer public charity	<b>D</b> 1. Foreign organizations	check here
u on		Final return	Amended return			
		Address change	Name change		<ol><li>Foreign organizations means check here and attach control</li></ol>	eting the 85% test,
H Che	eck	type of organization: $\mathbf{X}$ Section 501(c)(3) ex	V		E If private foundation stat	
			Other taxable private founda		under section 507(b)(1)	
		Irket value of all assets at end of year J Accounti		X Accrual	<b>F</b> If the foundation is in a (	
			ther (specify)		under section 507(b)(1)	
▶\$		129,933,086. (Part I, colum		S.)		
Par	t I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				
	2	Check $\mathbf{E}$ if the foundation is not required to attach Sch. B Interest on savings and temporary				
	3	cash investments	64,116.	64,116.		STATEMENT 1
	4	Dividends and interest from securities	2,442,268.	2,442,268.		STATEMENT 2
		Gross rents				
		Net rental income or (loss)	1 854 015			
e	6a	Net gain or (loss) from sale of assets not on line 10         Gross sales price for all assets on line 6a         53,931,373.	1,754,215.			
		assets on line 6a <b>53,951,575</b> .		1,754,215.		
Rev	7	Capital gain net income (from Part IV, line 2)		1,754,215.	N/A	
	8	Net short-term capital gain			N/A	
	9	Income modifications Gross sales less returns				
'		and allowances				
	0	Less: Cost of goods sold				
	1	Gross profit or (loss) Other income	-187,660.	-63,987.	0.	STATEMENT 3
	2	Total. Add lines 1 through 11	4,072,939.	4,196,612.	0.	DINILIMI J
	3	Compensation of officers, directors, trustees, etc.	197,877.	29,682.	0.	168,195.
	4	Other employee salaries and wages	472,365.	19,788.	0.	452,577.
		Pension plans, employee benefits	206,729.	41,948.	0.	164,780.
<b>φ</b> 1	6a	Legal fees STMT 4	2,576.	0.	0.	2,324.
SUS	b	Accounting fees STMT 5	39,749.	29,812.	0.	9,937.
Expense -	C	Other professional fees <b>STMT</b> 6	473,246.	330,091.	0.	143,155.
ш е 1	7		17,698.	17,698.	0.	0.
Administrative E	8	Interest	2,153.	2,153.	0.	0.
1 ist	9	Depreciation and depletion	3,083.	3,083.	0.	
2 <mark>الل</mark> ا	0	Оссирапсу	72,489.	10,873.	0.	61,616.
PA 2	1	Travel, conferences, and meetings	119,631.	12,865.	0.	106,766.
	2	Printing and publications	429.	0.	0.	429.
	3	Other expenses STMT 8	353,193.	268,364.	0.	84,831.
Operating c c c	4	Total operating and administrative			_	
bei		expenses. Add lines 13 through 23	1,961,218.	766,357.	0.	1,194,610. 5,043,484.
14		Contributions, gifts, grants paid	5,082,642.			5,043,484.
2	6	Total expenses and disbursements.				
		Add lines 24 and 25	7,043,860.	766,357.	0.	6,238,094.
2		Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	-2,970,921.			
		Net investment income (if negative, enter -0-)		3,430,255.		
	C	Adjusted net income (if negative, enter -0-)			0.	

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

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Foi	m 99	0-PF (2019) HEALTHY COMMUNITIES FOUR	NDATION	36-	4324067 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	· · · · · · · · · · · · · · · · · · ·
•	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	2,206,204.	232,447.	
	2	Savings and temporary cash investments	436,535.	1,282,391.	1,282,391.
	3	Accounts receivable ► 691,174.			
		Less: allowance for doubtful accounts 🕨	80,000.	691,174.	691,174.
	4	Pledges receivable 🕨			
		Less: allowance for doubtful accounts 🕨			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts 🕨			
ş	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	11,605.	7,405.	7,405.
Ř		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds	-		
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	114,971,983.	127,690,331.	127,690,331.
	14	Land, buildings, and equipment: basis $\blacktriangleright$ 77, 648.			
		Less: accumulated depreciation STMT 10 71,694.	9,037.	5,954.	<u>5,954</u> . 23,384.
		Other assets (describe STATEMENT 11)	3,557,059.	23,384.	23,384.
	16	Total assets (to be completed by all filers - see the	101 000 400	100 000 000	100 000 000
		instructions. Also, see page 1, item I)		129,933,086.	129,933,086.
		Accounts payable and accrued expenses	123,346.		
		Grants payable	337,500.	376,658.	
es		Deferred revenue			
iliti		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable		12 001	
_	22	Other liabilities (describe  ACCRUED INCOME TAX)	569,639.	13,881.	
			1 020 495	460 127	
	23	Total liabilities (add lines 17 through 22)	1,030,485.	460,127.	
		Foundations that follow FASB ASC 958, check here			
Ses		and complete lines 24, 25, 29, and 30. Net assets without donor restrictions	120,241,938.	129,472,959.	
anc	24	Net assets without donor restrictions	120,241,930.	149,474,959.	
Bal	25	Foundations that do not follow FASB ASC 958, check here			
Fund Balances		and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds			
sor	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
E As	29	Total net assets or fund balances	120,241,938.	129,472,959.	
Nei			,,		
	30	Total liabilities and net assets/fund balances	121,272,423.	129,933,086.	
P	art				
1		net assets or fund balances at beginning of year - Part II, column (a), line st agree with end-of-year figure reported on prior year's return)		1	120,241,938.
2					-2,970,921.
2	Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize) <b>▶ CHANGE IN UI</b>	NREALTZED GATN	I (LOSS) 3	12,487,347.
		lines 1, 2, and 3			129,758,364.
		eases not included in line 2 (itemize) <b>TIMING DIFFEREI</b>	NCE	5	285,405.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 ...

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	THY COMMUNITIES		-				6-432		Page <b>3</b>
Part IV Capital Gains a	Ind Losses for Tax on In	vestment	Income		E ATTAC	HED S	TATEMI	ENTS	
	he kind(s) of property sold (for exar rehouse; or common stock, 200 shs		te,	( <b>b</b> )     P	łow acquired - Purchase - Donation		acquired lay, yr.)	<b>(d)</b> Da <sup>-</sup> (mo., d	te sold ay, yr.)
1a		,			Donation				
b									
 c									
d									
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus (		
a									
b									
c									
d									
e 53,931,373.		5	2,177,15	8.				1,754	,215.
	g gain in column (h) and owned by t					(I) Gains ((	Col. (h) gain		<u></u>
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	ccess of col. (i) col. (j), if any		C	ol. (k), but	not less that (from col. (	1 -0-) <b>or</b>	
а									
b									
C									
d									
e								1,754	,215.
2 Capital gain net income or (net cap	bital loss)	r in Part I, line - in Part I, line	7 7	}	2			1,754	
3 Net short-term capital gain or (los	<ul> <li></li> </ul>			·				-	
If gain, also enter in Part I, line 8,	, , , , , , , , , , , , , , , , , , , ,	u (0).							
If (loss), enter -0- in Part I, line 8				₿.	3			10	,192.
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net I	Inve	stment Inc	come			<u></u>
(For optional use by domestic private	foundations subject to the section A	1040(a) tax on	net investment in	come	)				
(i of optional also by domostic private					)				
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the sect If "Yes," the foundation doesn't qualify		,,,		iod?				Yes	X No
	ach column for each year; see the in			ntries.					
(a)	(b)							(d)	
Base periód years Calendar year (or tax year beginnin		tributions	Net value of no	(C) nchar		s	Distrib (col. (b) div	(d) oution ratio	(c)
	9/	9,766.			,854,31				40573
2018		0,838.			,040,18				63040
2017	0,20	0,838.			, 945, 94				74025
2016		0,875. 5,846.			,945,94 ,799,83				55018
2015									
2014	4,04	3,527.		91	,259,31	3.	1	• 0	50883
2 Total of line 1, column (d)						2		.2	83539
<b>3</b> Average distribution ratio for the 5									
the foundation has been in existen	ce if less than 5 years					3		. 0	<u>56708</u>
4 Enter the net value of noncharitabl	e-use assets for 2019 from Part X, I	ine 5				4	12	7,428	,962.
5 Multiply line 4 by line 3						. 5		7,226	,242.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		34	,303.
7 Add lines 5 and 6						7		7,260	<u>,545.</u>
	Part XII, line 4 line 7, check the box in Part VI, line					8		6,238	<u>,094.</u>
See the Part VI instructions.								000	

	990-PF (2019) HEALTHY COMMUNITIES FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<u>36-</u> 48-	432406 see instru	/ iction	Page <b>4</b> <b>S)</b>
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.				-,
Ia	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		58,6	05.
5	of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			Ο.
	Add lines 1 and 2	3		58,6	-
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
	<b>Tax based on investment income</b> . Subtract line 4 from line 3. If zero or less, enter -0-	5	(	58,6	
	Credits/Payments:				
	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 110,000.				
	Exempt foreign organizations - tax withheld at source6b0.				
	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d	7	1:	L0,0	00.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here i if Form 2220 is attached	. 8		1,1	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10		40,2	86.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax  40, 286. Refunded	11		<u>,                                   </u>	0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in		Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	tion	1b	-	X
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		10		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. $\triangleright$ \$ 0. (2) On foundation managers. $\triangleright$ \$ 0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$ 0 .				
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			Х	
	If "Yes," has it filed a tax return on Form 990-T for this year?			Х	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				X
	If "Yes," attach the statement required by General Instruction T.				
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	• By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			
	remain in the governing instrument?		6	Х	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	IL				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation			Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale				
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV				X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
			Form <b>99</b>	)0-PF	(2019)

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Pa	art VII-A Statements Regarding Activities (continued)			. ago e
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
12		<u> </u>		
12	If IN fee II where the statement of the	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
10	Website address  MCFDN.ORG		- 23	
14		3-5	674	
14	Located at $\blacktriangleright$ 19 RIVERSIDE ROAD SUITE 6, RIVERSIDE, IL ZIP+4 $\blacktriangleright$ 60	546	-26	06
15				
10	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10		16		X
	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			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10	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? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
t	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
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 2019?	1c		Х
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 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶,,,,			
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach			
	statement - see instructions.)N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	during the year? Yes X No			
t	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
-	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		37
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			37
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х

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# Form 990-PF (2019) HEALTHY COMMUNITIES FOUNDATION

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Part VII	B Statements Regarding Activities for which F	orm 4720 May Be Re	equirea <sub>(contine</sub>	ued)			
5a During	the year, did the foundation pay or incur any amount to:					Yes	No
(1) Ca	rry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Υε	es X No			
	luence the outcome of any specific public election (see section 4955); o						
ar	y voter registration drive?		Υε	es X No			
	ovide a grant to an individual for travel, study, or other similar purposes			es X No			
	ovide a grant to an organization other than a charitable, etc., organizatio						
49	45(d)(4)(A)? See instructions		Υε	es X No			
<b>(5)</b> Pr	ovide for any purpose other than religious, charitable, scientific, literary,						
th	e prevention of cruelty to children or animals?		Υε	es X No			
	nswer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un						
sectior	53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b		
Organi	zations relying on a current notice regarding disaster assistance, check l	nere		►□ [			
c If the a	nswer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintair	ned				
expend	iture responsibility for the grant?	N	/A 🗌 Ye	es 🗌 No 📗			
	attach the statement required by Regulations section 53.4945-5(d).						
6a Did the	foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a perso	nal benefit contract?		Υε	es X No			
	foundation, during the year, pay premiums, directly or indirectly, on a p				6b		Х
If "Yes'	to 6b, file Form 8870.						
7a At any	time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Υε	es 🛛 No			
	did the foundation receive any proceeds or have any net income attribute				7b		
8 Is the f	oundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration or					
excess	parachute payment(s) during the year?		Υε	es X No			
Part VII	Information About Officers, Directors, Truste	ees, Foundation Man	agers, Highly				
	Paid Employees, and Contractors						
1 List all	officers, directors, trustees, and foundation managers and t	-					
	(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred		e) Expe count,	ense other
	(a) Natio and address	to position	enter -0-)	compensation		allowan	
					1		

(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
SEE STATEMENT 13		207,627.	29,250.	0.
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, e	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other

(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	account, other allowances
ELVA GONZALEZ - 19 RIVERSIDE ROAD	DIRECTOR OF F	INANCE		
#6, RIVERSIDE, IL 60546	40.00	116,507.	16,500.	0.
NORA GARCIA - 19 RIVERSIDE ROAD #6,	DIRECTOR OF P	ROGRAMS		
RIVERSIDE, IL 60546	40.00	105,695.	15,000.	0.
CHRISTINE RAMIREZ - 19 RIVERSIDE	PROGRAM OFFIC	ER		
ROAD #6, RIVERSIDE, IL 60546	40.00	85,826.	12,608.	0.
JACQUELINE RODRIGUEZ - 19 RIVERSIDE	COMMUNICATION	S OFFICER		
ROAD #6, RIVERSIDE, IL 60546	40.00	74,455.	11,125.	0.
CLAUDIA PEREZ - 19 RIVERSIDE ROAD	GRANTS AND OP	ERATIONS 1	IANAGER	
#6, RIVERSIDE, IL 60546	40.00	67,904.	10,238.	0.
Total number of other employees paid over \$50,000			<b>&gt;</b>	0

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Form 990-PF (2019) HEALTHY COMMUNITIES FOUNDATION	36-432	4067 Page
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensatio
DIMEO SCHNEIDER & ASSOCIATES, LLC - 500 W.	INVESTMENT ADVISORY	
MADISON STREET, SUITE 1700, CHICAGO, IL 60661		124,214
,,,		/
		_
	_	
	-	
		►
otal 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 statist	ical information such as the	Evpapaga
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc.	Expenses
N/A		
·		
3		
·		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2	Amount
N/A		Amount
·		
All other program-related investments. See instructions.		
An other program-related investments. See instructions.		
Total. Add lines 1 through 3	►	0
	F	orm 990-PF (201

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Ρ	art X Minimum Investment Return (All domestic foundations m	ust cor	nplete this pa	art. Foreign foun	dations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	etc n	urposes.			
•	Average monthly fair market value of securities				1a	124,883,983.
	Average of monthly cash balances				1b	3,506,312.
	Fair market value of all other assets				10	979,210.
	Total (add lines 1a, b, and c)				1d	129,369,505.
	Reduction claimed for blockage or other factors reported on lines 1a and					
-	1c (attach detailed explanation)	1e		0.		
2	Acquisition indebtedness applicable to line 1 assets				2	0.
3	Subtract line 2 from line 1d				3	129,369,505.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see inst	ructions)		4	1,940,543.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on				5	127,428,962.
6	Minimum investment return. Enter 5% of line 5			r	6	6,371,448.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and				d certain	, ,
	foreign organizations, check here 🕨 🦳 and do not complete this part.)			5		
1	Minimum investment return from Part X, line 6				1	6,371,448.
2a	Tax on investment income for 2019 from Part VI, line 5			68,605.		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b				
	Add lines 2a and 2b				2c	68,605.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	6,302,843.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	6,302,843.
6	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part 2				7	6,302,843.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses:				
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	<u>6,238,094.</u> 0.
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 charitabl				2	
3	Amounts set aside for specific charitable projects that satisfy the:					
a	Suitability test (prior IRS approval required)				3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and				4	6,238,094.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest	tment				
	income. Enter 1% of Part I, line 27b				5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4				6	6,238,094.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years we 4940(e) reduction of tax in those years.				ualifies fo	or the section

Form **990-PF** (2019)

#### Form 990-PF (2019)

#### Part XIII Undistributed Income (see instructions)

i				
	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from Part XI,	Corpus		Long	2010
line 7				6,302,843.
2 Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only			5,102,441.	
<b>b</b> Total for prior years:				
, <u></u> _,,		0.		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018 f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from	0.			
Part XII, line 4: $\triangleright$ \$ 6,238,094.				
<b>a</b> Applied to 2018, but not more than line 2a			5,102,441.	
<b>b</b> Applied to undistributed income of prior			5/102/1110	
years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2019 distributable amount				1,135,653.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019				
(If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
<b>c</b> 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		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			0	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				5,167,190.
be distributed in 20207 Amounts treated as distributions out of				5,107,190.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
<b>b</b> Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				Form <b>990-PF</b> (2019)
923581 12-17-19				Form <b>MMU-FF</b> (2010)

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Form **990-PF** (2019)

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	COMMUNITIES			36-432	24067 Page 10
Part XIV Private Operating Fo	oundations (see insti	ructions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that it	is a private operating			
foundation, and the ruling is effective for	2019, enter the date of the	ruling			
<b>b</b> Check box to indicate whether the found	ation is a private operating	foundation described ir	section	4942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	( <b>a</b> ) 2019	<b>(b)</b> 2018	(c) 2017	( <b>d</b> ) 2016	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e 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:					
<b>a</b> "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
<ul> <li>(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ul>					
(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	mation (Complete	this part only if	the foundation	had \$5,000 or more	e in assets
at any time during th					
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who year (but only if they have contributed m			butions received by the	foundation before the close	of any tax
NONE					
<b>b</b> List any managers of the foundation who other entity) of which the foundation has		stock of a corporation (	or an equally large portic	on of the ownership of a par	tnership or
NONE					
NONE	n Orant Oitt Laan O	ahalavahin ata Du			

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

Check here F is 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.

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

SEE STATEMENT 15

#### SEE STATEMENT 14

**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:

ADLER UNIVERSITY	ŀ		GENERAL OPERATING	
17 N. DEARBORN ST., 15TH FLOOR				
CHICAGO, IL 60602				25,000.
AGING CARE CONNECTIONS		°C	CAPACITY BUILDING	
111 W. HARRIS AVE			GRANT	
LA GRANGE, IL 60525				5,000.
IN GRANGE, III 00525				5,000.
AGING CARE CONNECTIONS	F	PC .	GENERAL OPERATING	
111 W. HARRIS AVE				
LA GRANGE, IL 60525				50,000.
AGING CARE CONNECTIONS		PC .	HEALTHCARE GRANT	
111 W. HARRIS AVE				
LA GRANGE, IL 60525				27,500.
	TINUATION SHEET	(S)	► 3a	5,043,484.
			► Sa	5,015,101.
<b>b</b> Approved for future payment				
AGING CARE CONNECTIONS	l F	2C	HEALTHCARE GRANT	
111 W. HARRIS AVE				
LA GRANGE, IL 60525				25,650.
ALIVIO MEDICAL CENTER		PC	HEALTHCARE GRANT	
966 W. 21ST ST				
CHICAGO, IL 60608				40,000.
····· , ··· ,				
BEDS PLUS CARE	*	2°C	HEALTHCARE GRANT	
9601 E. OGDEN AVE.				
LAGRANGE, IL 60525				27,500.
Total SEE CON	TINUATION SHEET	'(S)	► 3b	376,658.
			Fo	orm <b>990-PF</b> (2019)
923611 12-17-19				
	11			

Form 990-PF (2019) HEALTHY COMMUNITIES FOUNDATION

If recipient is an individual,

show any relationship to

any foundation manager

or substantial contributor

Foundation status of

recipient

PC

РC

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

Supplementary Information (continued)

Recipient

Name and address (home or business)

Part XV

a Paid during the year

CHICAGO, IL 60661

ADLER UNIVERSITY

ACCESS COMMUNITY HEALTH NETWORK

600 W. FULTON ST., SUITE 200

3

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Amount

100,000.

Purpose of grant or contribution

GENERAL OPERATING

GENERAL OPERATING

Part XVI-A

#### -A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated (a) Business	d business income (b)	(C) Exclu-	ed by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	64,116.	
4 Dividends and interest from securities			14	2,442,268.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	1,754,215.	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:		100 680		C2 000	
a <u>SEE STATEMENT 16</u>		-123,673.		-63,987.	
b					
C					
d					
e 12 Subtotal. Add columns (b), (d), and (e)		102 672		4,196,612.	0.
<b>13 Total.</b> Add line 12, columns (b), (d), and (e)					4,072,939.
				_	
Part XVI-B Relationship of Activities to	the Accor	mplishment of Exe	empt F	Purposes	
Line No. Explain below how each activity for which incon	ne is reported in	n column (a) of Part X\/I_A	contribu	ted importantly to the accomp	lishment of
the foundation's exempt purposes (other than b			CONTINU	ted importantly to the accomp	
· · · · · · · · · · · · · · · · · · ·	51 5	11,			

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Form 990-PF (2019)

		4324067	Pa	ige <b>13</b>
Pa	art XVII Information Regarding Transfers to and Transactions and Relationships With Nonc Exempt Organizations	haritable		
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees			X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
C				X
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 g	oods, other ass	ets,	

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	D.	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Descriptio	n of transfers, transactio	ns, and sharing arrangements
				N/A				
	_							
	_							
	_							
in s	ection	-	n 501(c)(3)) or in see		or more tax-exempt organ			Yes X No
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship
		N/A						
Sign Here	and be	lief, it is true, correct, and com	plete. Declaration of pre		accompanying schedules and s taxpayer) is based on all informa		nas any knowledge.	May the IRS discuss this return with the preparer shown below? See instr.
	Sigr	nature of officer or trustee			Date	Title		
		Print/Type preparer's na	ime	Preparer's si	gnature	Date	Check if	PTIN
Paid		GREGORY F.	KASH	GREGOR <sup>.</sup>	Y F. KASH	11/13/20	self- employed	P00161547
Prepa Use C		Firm's name ► MUE				· · · · ·	Firm's EIN ► 3	6-2658780
		Firm's address ► 17		NDALL I	RD, STE 200			
		EL	GIN, IL 6	0123			Phone no. 84	7-888-8600

# CONTINUATION FOR 990-PF, PART IV 36-4324067 PAGE 1 OF 2

	IES FOUNDATION	36-4	3240	67 E	PAGE 1	OF
Part IV Capital Gains and Los	sses for Tax on Investment Income					
(a) List and	d describe the kind(s) of property sole	d, e.g., real estate,		(b) How acquired	(c) Date acquired	(d) Date sol
2-story b	rick warehouse; or common stock, 20	00 shs. MLC Co.		P - Purchase D - Donation	`(mo., day, yr.)	(mó., day, yr
a PUBLICLY TRADE	D SECURITIES					
	D INVESTORS FUND	(26-0634745)		P		
	AL TODAY CHINA GF		)571	P		
			<u>,,,,</u>	P		
	SIAN/PANGAEA TWO					
	POLITAN RE PARTNE	•		P		
f FROM K-1 PIMCO			7-37	P		
g FROM K-1 PIMCO			/-37	P		
h FROM K-1 PIMCO	BRAVO AIV II (98	3-1070170)		P		
; FROM K-1 PIMCO	BRAVO AIV III (9	98-1079634)		P		
; FROM K-1 QUEST	A CAPITAL PARTNER	RS I LP (81-3840	)225	P		
		LLC		P		
			264	Р		
m FROM K-1 Q-BLK		II LP	201	P		
n FROM K-1 Q-BLK		II LP		P		
0 FROM K-1 LITTL			-	P		
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis			) Gain or (loss)	
(0) 21000 02100 priod	(or allowable)	plus expense of sale		(e)	plus (f) minus (g)	
52,835,472.		51,909,194	•			926,278
24,533.						24,533
35,375.						35,375
8,754.			-			8,754
•		256,184				256,184
4.		250,104	•			
4.			_			4
12,779.			_			12,779
		9,886				-9,886
		1,868	•			<u>-1,868</u>
70,575.						70,575
25,806.						25,806
		26				-26
<b>8,838</b> .		-				8,838
424,124.						424,124
1 2 5 0						1,350
· · ·	a gain in column (b) and owned by t	he foundation on 10/01/00				т, ээс
Complete only for assets showing	ng gain in column (h) and owned by t		_		sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)			of col. (h) gain over 1ot less than "-0-")	COI. (K),
(1) 1.10.1. as of 12/51/05	as of 12/31/69	over col. (j), if any		buti	·	
L						926,278
						24,533
						35,375
			1			8,754
			+			256,184
	·		**			
			<u> </u>			10 770
			_			12,779
						-9,886
						-1,868
						70,575
						25,806
						-26
]			**			8,838
	·		<u> </u>			424,124
			**			
	1		**	1		1,350
Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-C	r in Part I, line 7 }	. 2			
Net short-term capital gain or (los	ss) as defined in sections 1222(5) an	2	_			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		r	<b>_</b>			
	<u>,</u>		3	1		
3591			* *	(SHORT-	᠃ᡎ᠋ᢑᠦᢂ᠋	
4-01-19				( PUOKI-	- 13771 /	

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04-01-19

\*\* (SHORT-TERM)

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2019.05000 HEALTHY COMMUNITIES FOUND 07217.24

HEALTHY	COMMUNITIES	FOUNDATION

Part IV	Capital Gains and Los	sses for Tax on Investment Income					
	(a) List and	describe the kind(s) of property sold	, e.g., real estate,	(	P - Pulchase	(c) Date acquired	(d) Date sold
		ick warehouse; or common stock, 20	U SNS. MLC CO.		D - Donation	(mo., day, yr.)	(mó., day, yr.)
	ITAL GAIN D	ISTRIBUTIONS			Р		
<u>b</u>							
d							
i							
0							
(e) (	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		<b>(h)</b> (e) p	Gain or (loss) lus (f) minus (g)	
а	483,763.						483,763.
b							
d							
,							
h							
i							
j							
k							
<u>n</u> 0							
	te only for assets showin	g gain in column (h) and owned by th	ne foundation on 12/31/69		(1)   os	ses (from col. (h))	
	-	(j) Adjusted basis	(k) Excess of col. (i)	1	Gains (excess o	f col. (h) gain over	col. (k),
(I) ⊦.№	1.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		but no	ot less than "-0-")	
а							483,763.
b							
<u>c</u>							
d							
e f							
g							
<u>h</u>							
i							
j							
<u>k</u>							
<u> </u>							
<u>m</u> n							
0							
		I					
		pital loss) { If gain, also enter If (loss), enter "-0-		2		1,	754,215.
3 Net shor	t-term capital gain or (los Iso enter in Part I, line 8,	ss) as defined in sections 1222(5) and column (c)	(6):				
	enter "-0-" in Part I, line 8			3			10,192.
002501					_		
923591 04-01-19			15	* *	(SHORT-	TERM)	

13471113 758883 07217.200

2019.05000 HEALTHY COMMUNITIES FOUND 07217.24

36-4324067

Part XVSupplementary Information3Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ALIVIO MEDICAL CENTER		PC	HEALTHCARE	
966 W. 21ST ST				40.00
CHICAGO, IL 60608				40,000
ALIVIO MEDICAL CENTER		PC	GENERAL OPERATING	
966 W. 21ST ST				
CHICAGO, IL 60608				100,000
ALIVIO MEDICAL CENTER		PC	UNRESTRICTED USE OF CHARITABLE RECIPIENT	
966 W. 21ST CHICAGO, IL 60608			CHARITABLE RECIPIENT	2,600
				,
ALL OUR CHILDREN'S ADVOCACY CENTER		PC	GENERAL OPERATING	
8651 S. 79TH AVE.				
JUSTICE, IL 60458				25,000
ALLIANCE TO END HOMELESSNESS IN		PC	CAPACITY BUILDING	
SUBURBAN COOK COUNTY			GRANT	
4415 HARRISON ST., SUITE 228 HILLSIDE, IL 60162				5,000
ALLIANCE TO END HOMELESSNESS IN		PC	GENERAL OPERATING	
SUBURBAN COOK COUNTY 4415 HARRISON ST., SUITE 228				
HILLSIDE, IL 60162				25,000
ARAB AMERICAN FAMILY SERVICES 7000 W 111TH ST		PC	GENERAL OPERATING	
WORTH, IL 60482				100,000
AUSTIN COMING TOGETHER		PC	GENERAL OPERATING	
5049 W. HARRISON ST CHICAGO, IL 60644				25,000
				25,000
BEDS PLUS CARE		PC	CAPACITY BUILDING	
9601 E. OGDEN AVE.			GRANT	
LAGRANGE, IL 60525				5,000
		D.C.	CENERAL ODERATING	
BEDS PLUS CARE 9601 E. OGDEN AVE.		PC	GENERAL OPERATING	
LAGRANGE, IL 60525				60,000
Total from continuation sheets				4,835,984

36-4324067

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
BEDS PLUS CARE		PC	HEALTHCARE	
9601 E. OGDEN AVE.				
LAGRANGE, IL 60525				27,500
BEYOND HUNGER		PC	GENERAL OPERATING	
848 LAKE ST				05.000
DAK PARK, IL 60301				25,000
BRIGHTON PARK NEIGHBORHOOD COUNCIL		PC	GENERAL OPERATING	
4477 S. ARCHER AVE				
CHICAGO, IL 60632				50,000
BUILD		PC	GENERAL OPERATING	
5100 W. HARRISON ST CHICAGO, IL 60644				100,000
				100,000
CASA CENTRAL		PC	GENERAL OPERATING	
1343 N. CALIFORNIA AVE		FC	GENERAL OFERALING	
CHICAGO, IL 60622				50,000
CATHOLIC CHARITIES OF ARCHDIOCESE		₽C	GENERAL OPERATING	
CHICAGO				
721 N. LASALLE ST				25.000
CHICAGO, IL 60654				25,000
CENTER FOR INDEPENDENCE THROUGH		PC	GENERAL OPERATING	
CONDUCTIVE EDUCATION				
100 W PLAINFIELD RD, SUITE 100 COUNTRYSIDE, IL 60525				25,000
CHICAGO CITYWIDE LITERACY COALITION		PC	GENERAL OPERATING	
641 W. LAKE STREET, STE 200				
CHICAGO, IL 60661				20,000
COALITION FOR SPIRITUAL AND PUBLIC		PC	CAPACITY BUILDING	
LEADERSHIP (CSPL)			GRANT	
1701 S 1ST AVE., SUITE 406				
MAYWOOD, IL 60153				500
COALITION FOR SPIRITUAL AND PUBLIC		PC	CAPACITY BUILDING	
LEADERSHIP (CSPL)			GRANT	
1701 S 1ST AVE., SUITE 406				
MAYWOOD, IL 60153 Total from continuation sheets				10,000

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Part XV Supplementary Information	ו			-
3 Grants and Contributions Paid During the N	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
CONTENTON FOR ADTRIBUTAL AND DUDITA		PC	CENEDAL ODEDAMING	
COALITION FOR SPIRITUAL AND PUBLIC LEADERSHIP (CSPL)		PC	GENERAL OPERATING	
1701 S 1ST AVE., SUITE 406				
MAYWOOD, IL 60153				25,000.
COMMUNITYHEALTH		PC	GENERAL OPERATING	
2611 W. CHICAGO AVE				
CHICAGO, IL 60622				175,000.
DEVICES 4 THE DISABLED		PC	GENERAL OPERATING	
2743 W. 36TH PLACE, UNIT D		FC	GENERAL OFERATING	
CHICAGO, IL 60632				25,000.
ET VALOR CORRORATION		PC	CENEDAL ODEDAMING	
EL VALOR CORPORATION 1850 W. 21ST ST		PC	GENERAL OPERATING	
CHICAGO, IL 60608				50,000.
				, ,
ENLACE CHICAGO		PC	HEALTHCARE	
2756 S. HARDING AVENUE CHICAGO, IL 60623				1,000.
				1,000.
ENLACE CHICAGO		PC	GENERAL OPERATING	
2756 S. HARDING AVENUE CHICAGO, IL 60623				100,000.
				100,000.
ENLACE CHICAGO		PC	GENERAL OPERATING	
2756 S. HARDING AVENUE CHICAGO, IL 60623				75,000.
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
EQUAL HOPE (FORMERLY METROPOLITAN		PC	GENERAL OPERATING	
CHICAGO BREAST CANCER TASK FORCE)				
300 S. ASHLAND AVE, STE 202				100.000
CHICAGO, IL 60607				100,000.
ERIE FAMILY HEALTH FOUNDATION, INC		PC	GENERAL OPERATING	
1701 W. SUPERIOR 3RD FLOOR				100.000
CHICAGO, IL 60622				100,000.
ERIE NEIGHBORHOOD HOUSE		PC	GENERAL OPERATING	
1701 W. SUPERIOR 3RD FLOOR				
CHICAGO, IL 60622				100,000.
Total from continuation sheets				

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Part XV Supplementary Information				2007
3 Grants and Contributions Paid During the Ye		1		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ESPERANZA HEALTH CENTERS		PC	GENERAL OPERATING	
2001 SOUTH CALIFORNIA AVENUE NO 100				
CHICAGO, IL 60608				125,000.
FAMILY FOCUS		PC	GENERAL OPERATING	
310 S. PEORIA STE 301 CHICAGO, IL 60607				60,000.
FAMILY SERVICE & MENTAL HEALTH CENTER		PC	CAPACITY BUILDING	
OF CICERO			GRANT	
5341 W. CERMAK RD CICERO, IL 60804				10,000.
FAMILY SERVICE & MENTAL HEALTH CENTER		PC	GENERAL OPERATING	
OF CICERO 5341 W. CERMAK RD				
CICERO, IL 60804				75,000.
FOREFRONT		PC	GENERAL OPERATING	
200 W. MADISON ST, 2ND FLOOR				
CHICAGO, IL 60606				15,500.
FOREFRONT		PC	STRATEGIC INITIATIVE	
208 S. LASALLE, STE 1540				
CHICAGO, IL 60604				50,000.
FOREFRONT		PC	GENERAL OPERATING	
208 S. LASALLE, STE 1540 CHICAGO, IL 60604				10,000.
				10,000,
FREE WRITE ARTS & LITERACY 208 S. LASALLE, STE 1540		PC	CAPACITY BUILDING GRANT	
CHICAGO, IL 60604				1,000.
FRIENDS OF THE PARKS		PC	GENERAL OPERATING	
17 N. STATE ST, SUITE 1450				
CHICAGO, IL 60602				25,000.
GADS HILL CENTER		PC	GENERAL OPERATING	
1919 WEST CULLERTON ST				
CHICAGO, IL 60608				100,000.
Total from continuation sheets				

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36-4324067

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual,	Foundation	Burnoss of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
· · · · · ·	or substantial contributor	recipient		
GREATER CHICAGO FOOD DEPOSITORY		₽C	GENERAL OPERATING	
4100 W. ANN LURIE PL.				
CHICAGO, IL 60632				25,000
HEALTH AND MEDICINE POLICY RESEARCH		PC	HEALTHCARE GRANT	
GROUP				
29 E MADISON ST, SUITE 602				
CHICAGO, IL 60602				63,642
HEALTHCARE ALTERNATIVE SYSTEMS		PC	CAPACITY BUILDING	
1915-17 W. ROOSEVELT RD.			GRANT	
BROADVIEW, IL 60155				5,000
HEALTHCARE ALTERNATIVE SYSTEMS		PC	GENERAL OPERATING	
1915-17 W. ROOSEVELT RD.				
BROADVIEW, IL 60155				70,000
HEALTHCARE ALTERNATIVE SYSTEMS		PC	HEALTHCARE GRANT	
1915-17 W. ROOSEVELT RD.				
BROADVIEW, IL 60155				27,500
HELPING HAND CENTER		PC	CAPACITY BUILDING	
9649 W. 55TH ST			GRANT	
COUNTRYSIDE, IL 60525				5,000
HOUSING FORWARD		PC	GENERAL OPERATING	
1851 S. 9TH AVENUE				
MAYWOOD, IL 60153				25,000
ILLINOIS ASSOCIATION OF FREE AND		PC	CAPACITY BUILDING	
CHARITABLE CLINICS			GRANT	
42 STEPHEN ST, #416				
LEMONT, IL 60439				6,395
ILLINOIS COALITION FOR IMMIGRANT AND		PC	GENERAL OPERATING	
REFUGEE RIGHTS				
228 SOUTH WABASH, SUITE 800				
CHICAGO, IL 60604				125,000
ILLINOIS COALITION FOR IMMIGRANT AND		PC	STRATEGIC INITIATIVE	
REFUGEE RIGHTS			HEALTHCARE	
228 SOUTH WABASH, SUITE 800				
CHICAGO, IL 60604				50,000
Total from continuation sheets	•	•		·

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Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye		1		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ILLINOIS COALITION FOR IMMIGRANT AND		PC	CAPACITY BUILDING GRANT	
REFUGEE RIGHTS 228 SOUTH WABASH, SUITE 800			GRANI	
CHICAGO, IL 60604				5,000
ILLINOIS PARTNERS FOR HUMAN SERVICES		PC	HEALTH RESEARCH GRANT	
33 W. GRAND AVE., SUITE 300				
CHICAGO, IL 60654				50,000
ILLINOIS PARTNERS FOR HUMAN SERVICES		PC	UNRESTRICTED USE OF	
33 W. GRAND AVE., SUITE 300			CHARITABLE RECIPIENT	
CHICAGO, IL 60654				1,000
ILLINOIS PARTNERS FOR HUMAN SERVICES		PC	GENERAL OPERATING	
33 W. GRAND AVE., SUITE 300		PC	GENERAL OPERATING	
CHICAGO, IL 60654				25,000
				,
INDEPENDENT SECTOR		PC	CAPACITY BUILDING	
1602 L ST NW NO 900			GRANT	
WASHINGTON, DC 20036				10,000
INNER-CITY MUSLIM ACTION NETWORK		PC	GENERAL OPERATING	
2744 W. 63RD ST				
CHICAGO, IL 60629				165,000
INSTITUTO DEL PROGRESO LATINO		PC	GENERAL OPERATING	
2520 S. WESTERN AVENUE				
CHICAGO, IL 60608				75,000
INSTITUTO DEL PROGRESO LATINO		PC	UNRESTRICTED USE OF	
2520 S. WESTERN AVENUE		-	CHARITABLE RECIPIENT	
CHICAGO, IL 60608				622
LA BROCHA (TELPOCHCALLI COMMUNITY		PC	GENERAL OPERATING	
EDUCATION PROJECT)				
2824 W. 24TH BLVD				15 000
CHICAGO, IL 60623				15,000
LATINO POLICY FORUM		PC	GENERAL OPERATING	
180 N MICHIGAN AVE, STE 1250				
CHICAGO, IL 60601				25,000
Total from continuation sheets				

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Part XV         Supplementary Information           3         Grants and Contributions Paid During the N				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
LATINO POLICY FORUM		PC	CAPACITY BUILDING	
180 N. MICHIGAN AVE, STE 1250			GRANT	
CHICAGO, IL 60601				6,000
		Þa		
LATINOS PROGRESANDO 3047 W CERMAK ROAD		PC	GENERAL OPERATING	
CHICAGO, IL 60623				25,000
LAWNDALE CHRISTIAN HEALTH CENTER		PC	GENERAL OPERATING	
3860 W. OGDEN AVE				100.000
CHICAGO, IL 60623				100,000
LEGAL COUNCIL FOR HEALTH JUSTICE		PC	GENERAL OPERATING	
17 N. STATE ST., SUITE 900				
CHICAGO, IL 60602				50,000
LOYOLA UNIVERSITY OF CHICAGO		PC	GENERAL OPERATING	
820 N. MICHIGAN AVE CHICAGO, IL 60611				55,000
MACNEAL HOSPITAL		PC	GENERAL OPERATING	
3429 S. OAK PARK AVE.				
BERWYN, IL 60402				37,500
MAPSCORP		₽C	GENERAL OPERATING	
5307 S. HYDE PARK BLVD			GENERAL OFERATING	
CHICAGO, IL 60615				30,000
MOBILE CARE CHICAGO		PC	GENERAL OPERATING	
321 N. LOOMIS, STE 202 CHICAGO, IL 60607				50,000
				, ,
MUJERES LATINAS EN ACCION		₽C	HEALTHCARE	
2124 W. 21ST PL				
CHICAGO, IL 60608				40,000
MILIEDES LAWING EN ACCTON		PC	CENEDAL ODEDAMING	
MUJERES LATINAS EN ACCION 2124 W. 21ST PL		r C	GENERAL OPERATING	
CHICAGO, IL 60608				125,000
Total from continuation sheets				

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3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
NAMI METRO SUBURBAN		PC	GENERAL OPERATING	
816 HARRISON ST				
DAK PARK, IL 60304				85,000
NATIONAL MUSEUM MEXICAN ART		PC	HEALTHCARE	
1852 W 19TH ST				
CHICAGO, IL 60608				10,000
NEW MOMS, INC.		PC	CAPACITY BUILDING	
5317 W. CHICAGO AVE			GRANT	0.75
CHICAGO, IL 60651				8,750
NEW MOMS, INC.		PC	GENERAL OPERATING	
5317 W. CHICAGO AVE				
CHICAGO, IL 60651				50,000
DAK LEYDEN DEVELOPMENTAL SERVICES		PC	GENERAL OPERATING	
411 W. CHICAGO AVE				
DAK PARK, IL 60302				75,000
DAK PARK RIVER FOREST INFANT WELFARE		PC	GENERAL OPERATING	
SOCIETY				
320 LAKE ST				
DAK PARK, IL 60302				100,000
		PC	CAPACITY BUILDING	
PASO WEST SUBURBAN ACTION PROJECT 3415 W NORTH AVE, SUITE D		FC	GRANT	
MELROSE PARK, IL 60160				10,000
PASO WEST SUBURBAN ACTION PROJECT		PC	GENERAL OPERATING	
3415 W NORTH AVE, SUITE D				
MELROSE PARK, IL 60160				80,000
PCC COMMUNITY WELLNESS CENTER		₽C	GENERAL OPERATING	
14 LAKE ST				
DAK PARK, IL 60302				100,000
PILLARS COMMUNITY HEALTH		PC	GENERAL OPERATING	
23 CALENDAR AVE LA GRANGE, IL 60525				150,000
Total from continuation sheets		1		130,000

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Part XVSupplementary Information3Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
PILLARS COMMUNITY HEALTH		PC	CAPACITY BUILDING	
23 CALENDAR AVE			GRANT	F 0.0
LA GRANGE, IL 60525				5,000
PROVISO PARTNERS FOR HEALTH		PC	GENERAL OPERATING	
2160 S. 1ST AVE.		FC	GENERAL OFERALING	
MAYWOOD, IL 60153				40,000
QUINN CENTER OF ST. EULALIA		PC	GENERAL OPERATING	,
(ARCHDIOCESE OF CHICAGO FISCAL				
SPONSOR )				
1845 S. 9TH AVENUE				
MAYWOOD, IL 60153				25,000
SARAH'S INN		PC	GENERAL OPERATING	
309 HARRISON DAK PARK, IL 60304				50 000
SAR FARR, TH 00504				50,000
SARGENT SHRIVER NATIONAL CENTER ON		PC	CAPACITY BUILDING	
POVERTY LAW			GRANT	
67 E. MADISON ST, SUITE 2000				
CHICAGO, IL 60603				5,000
SARGENT SHRIVER NATIONAL CENTER ON		PC	STRATEGIC INITIATIVE	
POVERTY LAW		FC	HEALTHCARE	
67 E. MADISON ST, SUITE 2000				
CHICAGO, IL 60603				50,000
SARGENT SHRIVER NATIONAL CENTER ON		PC	GENERAL OPERATING	
POVERTY LAW				
67 E. MADISON ST, SUITE 2000				
CHICAGO, IL 60603				100,000
SINAI URBAN HEALTH INSTITUTE		PC	GENERAL OPERATING	
1500 S. FAIRFIELD AVE.				
CHICAGO, IL 60608				100,000
SISTERHOUSE		PC	GENERAL OPERATING	
27 WASHINGTON BLVD DAK PARK, IL 60302				20,000
				20,000
SOUTHWEST ORGANIZING PROJECT (SWOP)		PC	UNRESTRICTED USE OF	
2558 W. 63RD ST.		Ĩ	CHARITABLE RECIPIENT	
CHICAGO, IL 60629				250
Total from continuation sheets		1	- 1	

36-4324067

Part XVSupplementary Information3Grants and Contributions Paid During the Yes	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Anount
SOUTHWEST ORGANIZING PROJECT (SWOP)		PC	GENERAL OPERATING	
2558 W. 63RD ST.				
CHICAGO, IL 60629				30,000
SUBURBAN PRIMARY HEALTH CARE COUNCIL		PC	GENERAL OPERATING	
2225 ENTERPRISE DR, STE 2507				
VESTCHESTER, IL 60154				50,000
TALLER DE JOSE		PC	GENERAL OPERATING	
2831 W. 24TH BLVD CHICAGO, IL 60623				25,000
THE LATINO ALZEHIMER'S AND MEMORY		PC	GENERAL OPERATING	
DISORDERS ALLIANCE				
6112 W. CERMAK RD.				
CICERO, IL 60804				34,770
THE LEADERSHOP		PC	CAPACITY BUILDING	
4903 S. WILLOW SPRINGS			GRANT	
LA GRANGE, IL 60525				5,000
THE WAREHOUSE PROJECT & GALLERY 420 S. EDGEWOOD AVE		PC	CAPACITY BUILDING GRANT	
LA GRANGE, IL 60525				5,000
JCAN		PC	GENERAL OPERATING	
3605 W. FILLMORE ST. CHICAGO, IL 60624				90,000
JCP SEGUIN SERVICES		PC	GENERAL OPERATING	
3100 S. CENTRAL AVE.				
CICERO, IL 60804				75,000
WAY BACK INN		PC	CAPACITY BUILDING	
104 OAK ST			GRANT	
MAYWOOD, IL 60153				4,975
WAY BACK INN		PC	GENERAL OPERATING	
104 OAK ST		ľ	SEMERAL OF ERALING	
MAYWOOD, IL 60153				50,000
Total from continuation sheets		-		

36-4324067

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
VEST COOK YMCA		PC	GENERAL OPERATING	
255 W MARION ST				
DAK PARK, IL 60302				50,00
VEST COOK YMCA		PC	UNRESTRICTED USE OF	
255 W MARION ST			CHARITABLE RECIPIENT	
DAK PARK, IL 60302				1,48
YOGACARE		PC	GENERAL OPERATING	
1808 W. CHICAGO AVE, #2R				15 00
CHICAGO, IL 60622				15,00
YOUTH CROSSROADS, INC.		PC	GENERAL OPERATING	
3401 GUNDERSON				
BERWYN, IL 60402				100,00
Total from continuation sheets				

36-4324067

3 Grants and Contributions Approved for Fu				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CHICAGO COMMUNITY TRUST		PC	STRATEGIC INITIATIVE -	
225 N. MICHIGAN AVE #2200			COLLABORATIVE GRANT	F0 00
CHICAGO, IL 60601				50,00
CHICAGO COMMUNITY TRUST		₽C	STRATEGIC INITIATIVE -	
225 N. MICHIGAN AVE #2200			COLLABORATIVE GRANT	
CHICAGO, IL 60601				50,00
FOREFRONT		PC	STRATEGIC INITIATIVE -	
200 W. MADISON ST, 2ND FLOOR CHICAGO, IL 60606			COLLABORATIVE GRANT	10 00
				10,00
FOREFRONT		PC	STRATEGIC INITIATIVE -	
200 W. MADISON ST, 2ND FLOOR			COLLABORATIVE GRANT	
CHICAGO, IL 60606				50,00
HEALTHCARE ALTERNATIVE SYSTEMS 1915-17 W. ROOSEVELT RD.		PC	HEALTHCARE GRANT	
BROADVIEW, IL 60155				35,00
				,
MUJERES LATINAS EN ACCION		PC	HEALTHCARE GRANT	
2124 W. 21ST PL				
CHICAGO, IL 60608				52,50
PILLARS COMMUNITY HEALTH		PC	CAPACITY BUILDING	
23 CALENDAR AVE			GRANT	
LA GRANGE, IL 60525				36,00
Total from continuation sheets				283,50

Form	2220
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## **Underpayment of Estimated Tax by Corporations**

FORM 990-PF

OMB No. 1545-0123

Department of	the
Internal Reven	ue

Department of the Treasury Internal Revenue Service	Attach to the corporation's tax return. FOR Go to www.irs.gov/Form2220 for instructions and the latest information	0-PF	2019
Name		Employer ide	ntification number
HEALTHY	COMMUNITIES FOUNDATION	36-	4324067
bill the corporation. He	orporation is not required to file Form 2220 (see Part II below for exceptions) because owever, the corporation may still use Form 2220 to figure the penalty. If so, enter the line of the corporation's income tax return, but <b>do not</b> attach Form 2220.	•	
Part I Requir	ed Annual Payment		

1 Total tax (see instructions)	1	68,605.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1		
<b>b</b> Look-back interest included on line 1 under section 460(b)(2) for completed long-term       2b         contracts or section 167(g) for depreciation under the income forecast method       2b		
c Credit for federal tax paid on fuels (see instructions) 2c 2c 2c 2	2d	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty	3	68,605.
4 Enter the tax shown on the corporation's 2018 income tax return. See instructions. <b>Caution:</b> If the tax is zero		549,909.
or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	68,605.
Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.	)	

7 The corporation is using the annualized income installment method.

The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. 8

Part III Figuring the Underpayment

			(a)	(b)	(C)	(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/19	06/15/19	09/15/19	12/15/19
10	<b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If					
	the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked,		10 101			
	enter 25% (0.25) of line 5 above in each column	10	17,151.	17,152.	17,151.	17,151.
11	Estimated tax paid or credited for each period. For					
	column (a) only, enter the amount from line 11 on line 15.		10 000			
	See instructions	11	10,000.			
	Complete lines 12 through 18 of one column					
	before going to the next column.					
12	Enter amount, if any, from line 18 of the preceding column	12				
13	Add lines 11 and 12	13				
14	Add amounts on lines 16 and 17 of the preceding column	14		7,151.	24,303.	41,454.
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	10,000.	0.	0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		7,151.	24,303.	
17				-		
	subtract line 15 from line 10. Then go to line 12 of the next					
	column. Otherwise, go to line 18	17	7,151.	17,152.	17,151.	17,151.
18	Overpayment. If line 10 is less than line 15, subtract line 10					
	from line 15. Then go to line 12 of the next column	18				
Go	to Part IV on page 2 to figure the penalty. Do not go to Part IV	if th	ere are no entries on lin	e 17 - no penalty is owed	l.	

For Paperwork Reduction Act Notice, see separate instructions. LHA

Form 2220 (2019)

#### FORM 990-PF

Form 2220 (2019)

#### Part IV Figuring the Penalty

			(a)	(b)	(c)			(d)
9	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month							
	instead of 4th month.) See instructions	19						
D	Number of days from due date of installment on line 9 to the							
	date shown on line 19	20						
1	Number of days on line 20 after 4/15/2019 and before 7/1/2019	21						
2	Underpayment on line 17 x Number of days on line 21 x 6% (0.06) 365	22	\$	\$	\$		\$	
3	Number of days on line 20 after 06/30/2019 and before 10/1/2019	23						
4	Underpayment on line 17 x Number of days on line 23 x 5% (0.05) 365	24	\$	\$	\$		\$	
5	Number of days on line 20 after 9/30/2019 and before 1/1/2020	25						
6	Underpayment on line 17 x Number of days on line 25 x 5% (0.05) 365	26	\$	\$	\$		\$	
7	Number of days on line 20 after 12/31/2019 and before 4/1/2020	27	S	EE ATTACHEI	D WORKSHEE	Г		
8	Underpayment on line 17 x Number of days on line 27 x 5% (0.05) 366	28	\$	\$	\$		\$	
9	Number of days on line 20 after 3/31/2020 and before 7/1/2020	29						
0	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$		\$	
1	Number of days on line 20 after 6/30/2020 and before 10/1/2020	31						
2	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$		\$	
3	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33						
4	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$	
5	Number of days on line 20 after 12/31/2020 and before 3/16/2021	35						
3	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$	
7	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$	
}	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal he	ere and on Form 1120	), line 34; or the compa	rable	38	\$	1,109
_	se the penalty interest rate for each calendar quarter, which the				······	50	Ψ	

information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2019)

912802 01-14-20

#### FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Numb	er
HEALTHY CON	MUNITIES FOUR	NDATION		36-4324	067
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
05/15/19	17,151.	17,151.			
05/15/19	-10,000.	7,151.	31	.000164384	36
06/15/19	17,152.	24,303.	15	.000164384	60
06/30/19	0.	24,303.	77	.000136986	256
09/15/19	17,151.	41,454.	91	.000136986	517
12/15/19	17,151.	58,605.	16	.000136986	128
12/31/19	0.	58,605.	14	.000136612	112
01/14/20	-100,000.	-41,395.			
nalty Due (Sum of Colu	mn F).				1,109

\* Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF I	NTEREST (	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT 1	_
SOURCE				_	(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
US BANK			-		64,116.		64,116.	0.	•
TOTAL TO PART	I, LINE	3	-		64,116.		64,116.	0.	-

36-4324067

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES ST	ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ATTACHMENT MUTUAL FUND DIVIDENDS FROM K-1 ALLIED	2,325,982.	0.	2,325,982.	2,325,982.	0.
INVESTORS FUND, LLC 26-0634745 FROM K-1 BRIDGE MULTIFAMILY & COMMERCIAL OFFICE FUND II-B	580.	0.	580.	580.	0.
46-1366574 FROM K-1 CAPITAL TODAY CHINA GROWTH FUND, LP	159.	0.	159.	159.	0.
98-0571875 FROM K-1 KINGSWOOD CAPITAL OPPORTUNITIES FUND	76,087.	0.	76,087.	76,087.	0.
I-A 84-2161460 FROM K-1	1.	0.	1.	1.	0.
LITTLEJOHN FUND VI LP 82-5017620 FROM K-1 METROPOLITAN REAL ESTATE PARTNERS IV-A, LP	1,307.	0.	1,307.	1,307.	0.
65-1265800	5,726.	0.	5,726.	5,726.	0.
FROM K-1 PANGAEA TWO LP 27-2707204 FROM K-1 PIMCO BRAVO FUND ONSHORE FEEDER I LP	16,647.	0.	16,647.	16,647.	0.
27-3723234 FROM K-1 Q-BLK PRIVATE CAPITAL II	1.	0.	1.	1.	0.
LP 20-3111907 FROM K-1 QUESTA	14,877.	0.	14,877.	14,877.	0.
CAPITAL PARTNERS 1 LP 81-3840225 FROM K-1 RESOURCE	436.	0.	436.	436.	0.
LAND FUND IV, LLC 26-3903798	465.	0.	465.	465.	0.
TO PART I, LINE 4	2,442,268.	0.	2,442,268.	2,442,268.	0.

FORM 990-PF OTHER	INCOME		STATEMENT 3
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INCOME FROM K-1 ALLIED INVESTORS			
FUND, LLC INCOME FROM K-1 BRIDGE MULTIFAMILY	-108,934.	-108,934.	0
& COMMERCIAL OFFICE FUND II	C 101	C 404	0
46-1366574 INCOME FROM K-1 CANAAN NATURAL GAS	-6,404.	-6,404.	0
PARALLEL FUND K-1 IX LP	-7,658.	-7,658.	0
INCOME FROM K-1 CANAAN NATURAL GAS	7,050.	7,050.	0
PARALLEL FUND K-1 X LP	-3,947.	-3,947.	0
INCOME FROM K-1 CAPITAL CHINA	-,	-,	-
GROWTH	440.	440.	0
INCOME FROM K-1 LUMINATED CAPITAL			
PARTNERS II LP	-10,830.	-10,830.	0
INCOME FROM METROPOLITAN REAL			
ESTATE PARTNERS IV FUND LP	-19,060.	•	
INCOME FROM K-1 PANGEA TWO LP	-5,071.	-5,071.	0
INCOME FROM K-1 Q-BLK PRIVATE	11 201	11 7 1	0
CAPITAL II (20-2111907)	11,361.	11,361.	C
INCOME FROM K-1 RESOURCE LAND FUND	-78,303.	-78,303.	C
IV, LLC INCOME FROM K-1 LITTLEJOHN FUND VI	-70,505.	-70,303.	Ŭ
LP (82-5017620)	45.	45.	0
ROYALTY INCOME FROM K-1 RESOURCE			Ŭ
LAND FUND IV, LLC 26-3903798	695.	695.	C
ROYALTY INCOME FROM K-1 Q-BLK			-
PRIVATE CAPITAL II (20-2111907)	17.	17.	0
OTHER INCOME	163,662.	163,662.	0
JBTI CAP.GN.FROM K-1 LITTLEJOHN			
FUND VI LP (82-5017620)	1,350.	0.	0
JBTI CAP.GN.FROM K-1 RESOURCE LAND			
FUND IV, LLC	26,280.	0.	0
JBTI CAP.GN.FROM K-1 Q-BLK PRIVATE			
CAPITAL II (20-2111907)	449.	0.	C
JBTI FROM K-1 Q-BLK PRIVATE CAPITAL	-1,049.	٥	0
II (20-2111907) JBTI FROM K-1 RESOURCE LAND FUND	-1,049.	0.	C
IV, LLC	-121,657.	0.	C
JBTI FROM K-1 METROPOLITAN REAL	121,057.	0.	Ŭ
ESTATE PARTNERS IV FUND LP	-9,773.	0.	C
JBTI FROM K-1 LUMINATE CAPITAL	577760		
PARTNERS II LP (83-0739836)	-10,830.	0.	0
JBTI FROM K-1 CARTESIAN/PANGAEA TWO	,		-
LP (27-2707204)	-5,072.	0.	C
JBTI FROM K-1 LITTLEJOHN FUND VI LP	-		
(82-5017620)	-3,371.	0.	C
FOTAL TO FORM 990-PF, PART I, LINE 11	-187,660.	-63,987.	0

TO FORM 990-PF, PG 1, LN 16B

9,937.

FORM 990-PF	LEGAL	TATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	2,576.	0.	0.	2,324.	
TO FM 990-PF, PG 1, LN 16A	2,576.	0.	0.	2,324.	
FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING & TAX SERVICES	39,749.	29,812.	0.	9,937.	

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COMPUTER & PROGRAM CONSULTANTS INVESTMENT ADVISORY FEES INVESTMENT CONSULTANTS	143,155. 205,877. 124,214.	-	0. 0. 0.	143,155. 0. 0.	
TO FORM 990-PF, PG 1, LN 16C	473,246.	330,091.	0.	143,155.	

39,749.

29,812.

Ο.

FORM 990-PF	TAX	ES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAXES PAID ON FOREIGN DIVIDENDS	2,153.	2,153.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	2,153.	2,153.	0.	0.	

FORM 990-PF	OTHER E	XPENSES	STATEMENT 8			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INSURANCE OFFICE EXPENSE SOFTWARE LICENSING EQUIPMENT PURCHASES MEMBERSHIP DUES	20,754. 30,976. 20,977. 5,373. 21,719.	806.	0. 0. 0. 0. 0.	17,641. 26,330. 17,831. 4,567. 18,462.		
OTHER EXPENSES - PASSTHROUGH K-1S	253,394.	253,394.	0.	0.		
TO FORM 990-PF, PG 1, LN 23	353,193.	268,364.	0.	84,831.		

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME FROM LIMITED	COST		
PARTNERSHIPS REAL ASSET FOCUSED LIMITED	COST	41,684,349.	41,684,349.
PARTNERSHIPS	COST	3,403,649.	3,403,649.
EQUITY FOCUSED LIMITED PARTNERSHIP	S COST	82,602,333.	82,602,333.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	127,690,331.	127,690,331.

#### 36-4324067

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 10

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND FIXTURES OFFICE EQUIPMENT FURNITURE AND FIXTURES OFFICE	27,291.	27,291.	0.
EQUIPMENT	16,946.	16,946.	0.
ROUND TABLE	949.	475.	474.
FILE SERVER	4,664.	4,664.	0.
MAIL SERVER AND BACKUP	6,336.	6,336.	0.
COMPUTER EQUIPMENT TAH TOWER	875.	875.	0.
COMPUTER EQUIPMENT MK TOWER	875.	875.	0.
DELL LAPTOP VOSTRO 1710 MK	1,174.	1,174.	0.
WORKSTATIONS	8,137.	8,137.	0.
LAPTOPS HP X360	1,875.	938.	937.
LAPTOPS HP PAVILLION	3,087.	1,543.	1,544.
LAPTOP HP	700.	350.	350.
PHONE SYSTEMS	1,944.	972.	972.
MACBOOK	2,795.	1,118.	1,677.
TOTAL TO FM 990-PF, PART II, LN 14	77,648.	71,694.	5,954.

FORM 990-PF	OTHER ASSETS	STATEMENT 11		
DESCRIPTION	BEGINNING OF	END OF YEAR	FAIR MARKET	
	YR BOOK VALUE	BOOK VALUE	VALUE	
DEPOSITS	1,290,313.	23,384.	23,384.	
REDEMPTION PROCEEDS RECEIVABLE	2,266,661.	0.	0.	
EXCHANGE	85.	0.	0.	
TO FORM 990-PF, PART II, LINE 15	3,557,059.	23,384.	23,384.	

FORM 990-PF	OTHER LIABILITIES		STATEMENT 12
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
ACCRUED INCOME TAX PAYABLE	-	569,639.	13,881.
TOTAL TO FORM 990-PF, PART II,	LINE 22	569,639.	13,881.

	0-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS							
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB					
MARIA PESQUEIRA 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	PRESIDENT 40.00	207,627.	29,250.	0.				
GRACE HOU 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	CHAIR, BOARD MI 4.00	EMBER 0.	0.	0.				
AMALIA S. RIOJA 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	VICE CHAIR, BO 1.00	ARD MEMBER 0.	0.	0.				
JOSEPH W. MCINERNEY 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	TREASURER, BOAN 4.00	RD MEMBER 0.	0.	0.				
CARL BERGETZ 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	SECRETARY, BOAI 4.00	RD MEMBER 0.	0.	0.				
ELYSE FORKOSH CUTLER 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	BOARD MEMBER 1.00	0.	0.	0.				
CRAIG HUFFMAN 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	BOARD MEMBER 1.00	0.	0.	0.				
CHARLES W. MULANEY, JR. 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	BOARD MEMBER 1.00	0.	0.	0.				
ANNE MARIE MURPHY, PH.D. 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	BOARD MEMBER 1.00	0.	0.	0.				
DR. YESENIA YEPEZ 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	BOARD MEMBER 1.00	0.	0.	0.				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII	207,627.	29,250.	0.

36-4324067

HEALTHY COMMUNITIES FOUNDATION

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D STATEMENT 14

#### NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

HEALTHY COMMUNITIES FOUNDATION 19 RIVERSIDE ROAD SUITE #6 RIVERSIDE, IL 60546-2606

TELEPHONE NUMBER

708-443-5674

EMAIL ADDRESS

MPESQUEIRA@HCFDN.ORG

FORM AND CONTENT OF APPLICATIONS

ONLINE GRANTS PORTAL: TO APPLY FOR FUNDING IN THE 2019 GRANT CYCLE, THE LOI AND SUBSEQUENT FULL APPLICATION (IF APPLICABLE) SHOULD BE SUBMITTED VIA OUR ONLINE GRANTS PORTAL, WIZEHIVE. APPLICANTS WITH AN EXISTING WIZEHIVE ACCOUNT WILL SEE THE FUNDING OPPORTUNITY ON THE HOMEPAGE. NEW APPLICANTS MUST CREATE AN ORGANIZATIONAL PROFILE BEFORE HAVING ACCESS TO THE CURRENT GRANT CYCLE.

INSTRUCTIONS: SEE OUR WEBSITE AT HTTPS://HCFDN.ORG/INFO-REGARDING-OUR-2019-GRANT-CYCLE/

ATTACHMENTS (FOR ALL APPLICANTS): SEE OUR WEBSITE

#### ANY SUBMISSION DEADLINES

MAY 15, MAY 21; JULY 1; JULY 1; JULY 15; AUG.15; END OF AUG.-SEPT; DEC. DETAILS ON HTTPS://HCFDN.ORG

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANT ELIGIBILITY-WHO WE FUND: NONPROFIT ORGS. THAT ARE EXEMPT FROM FEDERAL INCOME TAX UNDER PROVISIONS OF SECTION 501(C)3 OF THE IRS CODE. ORGS. THAT ARE NOT TAX EXEMPT MAY APPLY WITH A FISCAL AGENT. FOR AN ORGANIZATION TO BE ELIGIBLE, AT LEAST 20% OF TOTAL INDIVIDUALS SERVED MUST LIVE IN OUR SERVICE REGION. FOR HOSPITALS AND UNIVERSITY SYSTEMS WITH OPERATING BUDGETS GREATER THAN \$10 MILLION, WE WILL ONLY AWARD PROJECT SUPPORT GRANTS FOR INITIATIVES LOCATED WITHIN OUR SERVICE REGION WHICH DEMONSTRATE A STRATEGIC PARTNERSHIP WITH AND STRONG COMMITMENT TO LOCAL COMMUNITY PARTNER(S). WHAT WE DO NOT FUND: BUSINESSES CAPITAL CAMPAIGNS\* GOVERNMENT ENTITIES INDIVIDUALS NATIONAL ORGANIZATIONS NOT FOCUSED ON OUR SERVICE REGION PARTISAN POLITICAL ACTIVITIES RELIGIOUS ACTIVITIES SCHOLARSHIPS SCHOOL DISTRICTS & INDIVIDUAL SCHOOLS (INCLUDING PTOS). FORM 990-PFGRANT APPLICATION SUBMISSION INFORMATIONSTATEMENT 15PART XV, LINES 2A - 2D (CONTINUATION)

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

GENERALLY, WE DO NOT FUND MORE THAN 10% OF AN ORGANIZATION'S OPERATING BUDGET.\*ONLY CAPITAL EXP. FOR MTLS. CONSIDERED FOR FUNDING.

36-4324067

FORM 990-PF	ΓΟ	STATEMENT 16			
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC TION INCOME
INCOME FROM K-1 ALLIED INVESTORS FUND, LLC INCOME FROM K-1 BRIDGE			14	-108,934.	
MULTIFAMILY & COMMERCIAL OFFICE FUND II 46-1366574 INCOME FROM K-1 CANAAN			14	-6,404.	
NATURAL GAS PARALLEL FUND K-1 IX LP INCOME FROM K-1 CANAAN NATURAL GAS PARALLEL FUND			14	-7,658.	
K-1 X LP INCOME FROM K-1 CAPITAL			14	-3,947.	
CHINA GROWTH INCOME FROM K-1 LUMINATED			14	440.	
CAPITAL PARTNERS II LP INCOME FROM METROPOLITAN REAL ESTATE PARTNERS IV			14	-10,830.	
FUND LP			14	-19,060.	
INCOME FROM K-1 PANGEA IWO LP INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II			14	-5,071.	
(20-2111907) INCOME FROM K-1 RESOURCE			14	11,361.	
LAND FUND IV, LLC INCOME FROM K-1 LITTLEJOHN FUND VI LP			14	-78,303.	
(82-5017620) ROYALTY INCOME FROM K-1 RESOURCE LAND FUND IV,			14	45.	
LLC 26-3903798 ROYALTY INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II			14	695.	
(20-2111907)			14	17.	
OTHER INCOME UBTI CAP.GN.FROM K-1	900099		14	163,662.	
LITTLEJOHN FUND VI LP					
(82-5017620) UBTI CAP.GN.FROM K-1 RESOURCE LAND FUND IV,	900099	1,350.	18		
LLC UBTI CAP.GN.FROM K-1 Q-BLK PRIVATE CAPITAL II	900099	26,280.	18		
(20-2111907) UBTI FROM K-1 Q-BLK	900099	449.	18		
PRIVATE CAPITAL II (20-2111907)	000000	-1,049.	14		
UBTI FROM K-1 RESOURCE LAND FUND IV, LLC	900099	-121,657.	14		

HEALTHY COMMUNITIES FOUNDA	TION				36-4324067
UBTI FROM K-1	900099				
METROPOLITAN REAL ESTATE PARTNERS IV FUND LP		-9,773.	14		
UBTI FROM K-1 LUMINATE	900099	5,775.	<b>T T</b>		
CAPITAL PARTNERS II LP		10 020	1 4		
(83-0739836) UBTI FROM K-1	900099	-10,830.	14		
CARTESIAN/PANGAEA TWO LP					
(27-2707204) UBTI FROM K-1 LITTLEJOHN	900099	-5,072.	14		
FUND VI LP $(82-5017620)$	000000	-3,371.	14		
TOTAL TO FORM 990-PF, PG 1	2, LN 11	-123,673.		-63,987.	

#### 2019 DEPRECIATION AND AMORTIZATION REPORT

#### FORM 990-PF PAGE 1

FORM 99	00-PF PAGE 1							990-PI	F						
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE AND FIXTURES														
1	OFFICE EQUIPMENT FURNITURE AND FIXTURES	01/01/07	SL	5.00		16	27,291.				27,291.	27,291.		0.	27,291.
2	OFFICE EQUIPMENT	03/31/07	SL	5.00		16	16,946.				16,946.	16,946.		0.	16,946.
-		,,.,					,							••	,
3	ROUND TABLE	10/13/17	SL	5.00		16	949.				949.	285.		190.	475.
4	FILE SERVER	11/08/07	SL	5.00		16	4,664.				4,664.	4,664.		0.	4,664.
5	MAIL SERVER AND BACKUP	11/29/07	SL	5.00		16	6,336.				6,336.	6,336.		0.	6,336.
6	COMPUTER EQUIPMENT TAH TOWER	01/26/09	SL	5.00		16	875.				875.	875.		0.	875.
7	COMPUTER EQUIPMENT MK TOWER	01/26/09	SL	5.00		16	875.				875.	875.		0.	875.
8	DELL LAPTOP VOSTRO 1710 MK	01/26/09	SL	5.00		16	1,174.				1,174.	1,174.		0.	1,174.
9	WORKSTATIONS	06/30/14	SL	5.00		16	8,137.				8,137.	7,324.		813.	8,137.
10	LAPTOPS HP X360	06/12/17	SL	5.00		16	1,875.				1,875.	563.		375.	938.
11	LAPTOPS HP PAVILLION	06/12/17	SL	5.00		16	3,087.				3,087.	926.		617.	1,543.
12	LAPTOP HP	10/26/17	SL	5.00		16	700.				700.	210.		140.	350.
13	PHONE SYSTEMS	07/10/17	SL	5.00		16	1,944.				1,944.	583.		389.	972.
14	MACBOOK	01/09/18	SL	5.00		16	2,795.				2,795.	559.		559.	1,118.
	* TOTAL 990-PF PG 1 DEPR						77,648.				77,648.	68,611.		3,083.	71,694.

928111 04-01-19

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone