

**Return of Private Foundation**

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

**2019**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2019 or tax year beginning , and ending

Name of foundation <b>HEALTHY COMMUNITIES FOUNDATION</b>		<b>A Employer identification number</b> 36-4324067
Number and street (or P.O. box number if mail is not delivered to street address) <b>19 RIVERSIDE ROAD</b>	Room/suite <b>6</b>	<b>B Telephone number</b> 708-443-5674
City or town, state or province, country, and ZIP or foreign postal code <b>RIVERSIDE, IL 60546-2606</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>129,933,086.</b>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	
<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>		

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....	64,116.	64,116.		STATEMENT 1
	<b>4</b> Dividends and interest from securities .....	2,442,268.	2,442,268.		STATEMENT 2
	<b>5a</b> Gross rents .....				
	<b>b</b> Net rental income or (loss) .....				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....	1,754,215.			
	<b>b</b> Gross sales price for all assets on line 6a .....	53,931,373.			
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		1,754,215.		
	<b>8</b> Net short-term capital gain .....			N/A	
	<b>9</b> Income modifications .....				
	<b>10a</b> Gross sales less returns and allowances .....				
<b>b</b> Less: Cost of goods sold .....					
<b>c</b> Gross profit or (loss) .....					
<b>11</b> Other income .....	-187,660.	-63,987.	0.	STATEMENT 3	
<b>12 Total.</b> Add lines 1 through 11 .....	4,072,939.	4,196,612.	0.		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	197,877.	29,682.	0.	168,195.
	<b>14</b> Other employee salaries and wages .....	472,365.	19,788.	0.	452,577.
	<b>15</b> Pension plans, employee benefits .....	206,729.	41,948.	0.	164,780.
	<b>16a</b> Legal fees ..... <b>STMT 4</b>	2,576.	0.	0.	2,324.
	<b>b</b> Accounting fees ..... <b>STMT 5</b>	39,749.	29,812.	0.	9,937.
	<b>c</b> Other professional fees ..... <b>STMT 6</b>	473,246.	330,091.	0.	143,155.
	<b>17</b> Interest .....	17,698.	17,698.	0.	0.
	<b>18</b> Taxes ..... <b>STMT 7</b>	2,153.	2,153.	0.	0.
	<b>19</b> Depreciation and depletion .....	3,083.	3,083.	0.	
	<b>20</b> Occupancy .....	72,489.	10,873.	0.	61,616.
	<b>21</b> Travel, conferences, and meetings .....	119,631.	12,865.	0.	106,766.
	<b>22</b> Printing and publications .....	429.	0.	0.	429.
	<b>23</b> Other expenses ..... <b>STMT 8</b>	353,193.	268,364.	0.	84,831.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	1,961,218.	766,357.	0.	1,194,610.
	<b>25</b> Contributions, gifts, grants paid .....	5,082,642.			5,043,484.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	7,043,860.	766,357.	0.	6,238,094.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements .....	-2,970,921.				
<b>b Net investment income</b> (if negative, enter -0-) .....		3,430,255.			
<b>c Adjusted net income</b> (if negative, enter -0-) .....			0.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	2,206,204.	232,447.	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			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	11,605.	7,405.	7,405.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c 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	77,648.			
Less: accumulated depreciation	STMT 10	9,037.	5,954.	5,954.
15 Other assets (describe)	STATEMENT 11	3,557,059.	23,384.	23,384.
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		121,272,423.	129,933,086.	129,933,086.
Liabilities	17 Accounts payable and accrued expenses	123,346.	69,588.	
	18 Grants payable	337,500.	376,658.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)	ACCRUED INCOME TAX	569,639.	13,881.
23 Total liabilities (add lines 17 through 22)		1,030,485.	460,127.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here	<input checked="" type="checkbox"/>		
	and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions		120,241,938.	129,472,959.
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here	<input type="checkbox"/>		
	and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
27 Paid-in or capital surplus, or land, bldg., and equipment fund				
28 Retained earnings, accumulated income, endowment, or other funds				
29 Total net assets or fund balances		120,241,938.	129,472,959.	
30 Total liabilities and net assets/fund balances		121,272,423.	129,933,086.	

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 end-of-year figure reported on prior year's return)	1	120,241,938.
2 Enter amount from Part I, line 27a	2	-2,970,921.
3 Other increases not included in line 2 (itemize)	3	CHANGE IN UNREALIZED GAIN (LOSS)
4 Add lines 1, 2, and 3	4	129,758,364.
5 Decreases not included in line 2 (itemize)	5	TIMING DIFFERENCE
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	129,472,959.

**Part IV Capital Gains and Losses for Tax on Investment Income** SEE ATTACHED STATEMENTS

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e	53,931,373.	52,177,158.	1,754,215.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			1,754,215.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			
2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 .....	2	1,754,215.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 .....	3	10,192.

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	5,349,766.	131,854,317.	.040573
2017	8,260,838.	131,040,181.	.063040
2016	8,360,875.	112,945,945.	.074025
2015	5,545,846.	100,799,834.	.055018
2014	4,643,527.	91,259,313.	.050883

2	Total of line 1, column (d) .....	2	.283539
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .....	3	.056708
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 .....	4	127,428,962.
5	Multiply line 4 by line 3 .....	5	7,226,242.
6	Enter 1% of net investment income (1% of Part I, line 27b) .....	6	34,303.
7	Add lines 5 and 6 .....	7	7,260,545.
8	Enter qualifying distributions from Part XII, line 4 .....	8	6,238,094.

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

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, credits/payments, and total tax due. Total tax due is 40,286.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, unrelated business income, and substantial contributors. Marked with 'X' for 'Yes' or 'No'.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, and interest in foreign countries.

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

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

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business interests.

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 13		207,627.	29,250.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ELVA GONZALEZ - 19 RIVERSIDE ROAD #6, RIVERSIDE, IL 60546	DIRECTOR OF FINANCE 40.00	116,507.	16,500.	0.
NORA GARCIA - 19 RIVERSIDE ROAD #6, RIVERSIDE, IL 60546	DIRECTOR OF PROGRAMS 40.00	105,695.	15,000.	0.
CHRISTINE RAMIREZ - 19 RIVERSIDE ROAD #6, RIVERSIDE, IL 60546	PROGRAM OFFICER 40.00	85,826.	12,608.	0.
JACQUELINE RODRIGUEZ - 19 RIVERSIDE ROAD #6, RIVERSIDE, IL 60546	COMMUNICATIONS OFFICER 40.00	74,455.	11,125.	0.
CLAUDIA PEREZ - 19 RIVERSIDE ROAD #6, RIVERSIDE, IL 60546	GRANTS AND OPERATIONS MANAGER 40.00	67,904.	10,238.	0.
<b>Total</b> number of other employees paid over \$50,000				0

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

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

Table with 3 columns: (a) Name and address of each person paid more than \$50,000; (b) Type of service; (c) Compensation. Row 1: DIMEO SCHNEIDER & ASSOCIATES, LLC - 500 W. MADISON STREET, SUITE 1700, CHICAGO, IL 60661; INVESTMENT ADVISORY FEES; 124,214.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity; Expenses. Row 1: 1 N/A

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investment; Amount. Row 1: 1 N/A

Total. Add lines 1 through 3 0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	124,883,983.
b	Average of monthly cash balances .....	1b	3,506,312.
c	Fair market value of all other assets .....	1c	979,210.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	129,369,505.
e	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 instructions) .....	4	1,940,543.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5	127,428,962.
6	<b>Minimum investment return.</b> Enter 5% of line 5 .....	6	6,371,448.

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

1	Minimum investment return from Part X, line 6 .....	1	6,371,448.
2a	Tax on investment income for 2019 from Part VI, line 5 .....	2a	68,605.
b	Income tax for 2019. (This does not include the tax from Part VI.) .....	2b	
c	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	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7	6,302,843.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	6,238,094.
b	Program-related investments - total from Part IX-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
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	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 .....	4	6,238,094.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b .....	5	0.
6	<b>Adjusted qualifying distributions.</b> 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 when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



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

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

Part XIV Private Operating Foundations (see instructions 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 Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2019, (b) 2018, (c) 2017, (d) 2016, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

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

1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here [ ] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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:

**Part XV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ACCESS COMMUNITY HEALTH NETWORK 600 W. FULTON ST., SUITE 200 CHICAGO, IL 60661		PC	GENERAL OPERATING	100,000.
ADLER UNIVERSITY 17 N. DEARBORN ST., 15TH FLOOR CHICAGO, IL 60602		PC	GENERAL OPERATING	25,000.
AGING CARE CONNECTIONS 111 W. HARRIS AVE LA GRANGE, IL 60525		PC	CAPACITY BUILDING GRANT	5,000.
AGING CARE CONNECTIONS 111 W. HARRIS AVE LA GRANGE, IL 60525		PC	GENERAL OPERATING	50,000.
AGING CARE CONNECTIONS 111 W. HARRIS AVE LA GRANGE, IL 60525		PC	HEALTHCARE GRANT	27,500.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>5,043,484.</b>
<b>b Approved for future payment</b>				
AGING CARE CONNECTIONS 111 W. HARRIS AVE LA GRANGE, IL 60525		PC	HEALTHCARE GRANT	25,650.
ALIVIO MEDICAL CENTER 966 W. 21ST ST CHICAGO, IL 60608		PC	HEALTHCARE GRANT	40,000.
BEDS PLUS CARE 9601 E. OGDEN AVE. LAGRANGE, IL 60525		PC	HEALTHCARE GRANT	27,500.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>376,658.</b>





HEALTHY COMMUNITIES FOUNDATION

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>			
b FROM K-1 ALLIED INVESTORS FUND (26-0634745)	P		
c FROM K-1 CAPITAL TODAY CHINA GROWTH FUND (98-0571)	P		
d FROM K-1 CARTESIAN/PANGAEA TWO LP (27-2707204)	P		
e FROM K-1 METROPOLITAN RE PARTNERS IV (65-1265800)	P		
f FROM K-1 PIMCO BRAVO FUND ONSHORE FEEDER I (27-37)	P		
g FROM K-1 PIMCO BRAVO FUND ONSHORE FEEDER I (27-37)	P		
h FROM K-1 PIMCO BRAVO AIV II (98-1070170)	P		
i FROM K-1 PIMCO BRAVO AIV III (98-1079634)	P		
j FROM K-1 QUESTA CAPITAL PARTNERS I LP (81-3840225)	P		
k FROM K-1 RESOURCE LAND FUND IV LLC	P		
l FROM K-1 TRUEBRIDGE CAPITAL PARTNERS FUND (84-264)	P		
m FROM K-1 Q-BLK PRIVATE CAPITAL II LP	P		
n FROM K-1 Q-BLK PRIVATE CAPITAL II LP	P		
o FROM K-1 LITTLEJOHN FUND VI, LP (82-5017620)	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 52,835,472.		51,909,194.	926,278.
b 24,533.			24,533.
c 35,375.			35,375.
d 8,754.			8,754.
e		256,184.	-256,184.
f 4.			4.
g 12,779.			12,779.
h		9,886.	-9,886.
i		1,868.	-1,868.
j 70,575.			70,575.
k 25,806.			25,806.
l		26.	-26.
m 8,838.			8,838.
n 424,124.			424,124.
o 1,350.			1,350.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			926,278.
b			24,533.
c			35,375.
d			8,754.
e			-256,184.
f			** 4.
g			12,779.
h			-9,886.
i			-1,868.
j			70,575.
k			25,806.
l			-26.
m			** 8,838.
n			424,124.
o			** 1,350.

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3

HEALTHY COMMUNITIES FOUNDATION

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a CAPITAL GAIN DISTRIBUTIONS</b>	<b>P</b>		
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a <b>483,763.</b>			<b>483,763.</b>
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			<b>483,763.</b>
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

<b>2</b> Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	<b>2</b>	<b>1,754,215.</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	<b>3</b>	<b>10,192.</b>

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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



**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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



**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WEST COOK YMCA 255 W MARION ST OAK PARK, IL 60302		PC	GENERAL OPERATING	50,000.
WEST COOK YMCA 255 W MARION ST OAK PARK, IL 60302		PC	UNRESTRICTED USE OF CHARITABLE RECIPIENT	1,480.
YOGACARE 1808 W. CHICAGO AVE, #2R CHICAGO, IL 60622		PC	GENERAL OPERATING	15,000.
YOUTH CROSSROADS, INC. 3401 GUNDERSON BERWYN, IL 60402		PC	GENERAL OPERATING	100,000.
<b>Total from continuation sheets</b> .....				

**Part XV** Supplementary Information**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CHICAGO COMMUNITY TRUST 225 N. MICHIGAN AVE #2200 CHICAGO, IL 60601		PC	STRATEGIC INITIATIVE - COLLABORATIVE GRANT	50,000.
CHICAGO COMMUNITY TRUST 225 N. MICHIGAN AVE #2200 CHICAGO, IL 60601		PC	STRATEGIC INITIATIVE - COLLABORATIVE GRANT	50,000.
FOREFRONT 200 W. MADISON ST, 2ND FLOOR CHICAGO, IL 60606		PC	STRATEGIC INITIATIVE - COLLABORATIVE GRANT	10,000.
FOREFRONT 200 W. MADISON ST, 2ND FLOOR CHICAGO, IL 60606		PC	STRATEGIC INITIATIVE - COLLABORATIVE GRANT	50,000.
HEALTHCARE ALTERNATIVE SYSTEMS 1915-17 W. ROOSEVELT RD. BROADVIEW, IL 60155		PC	HEALTHCARE GRANT	35,000.
MUJERES LATINAS EN ACCION 2124 W. 21ST PL CHICAGO, IL 60608		PC	HEALTHCARE GRANT	52,508.
PILLARS COMMUNITY HEALTH 23 CALENDAR AVE LA GRANGE, IL 60525		PC	CAPACITY BUILDING GRANT	36,000.
<b>Total from continuation sheets</b> .....				283,508.

Name **HEALTHY COMMUNITIES FOUNDATION** Employer identification number **36-4324067**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1	Total tax (see instructions) .....	1	68,605.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
2c	Credit for federal tax paid on fuels (see instructions) .....	2c	
2d	<b>Total.</b> Add lines 2a through 2c .....	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 or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....	4	549,909.
5	<b>Required annual payment.</b> Enter the <b>smaller</b> 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.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

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

<b>Part III Figuring the Underpayment</b>		(a)	(b)	(c)	(d)	
9	<b>Installment due dates.</b> 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, 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. See instructions .....	11	10,000.			
<b>Complete lines 12 through 18 of one column before going to the next column.</b>						
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	<b>Underpayment.</b> If line 15 is less than or equal to line 10, 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	<b>Overpayment.</b> 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 there are no entries on line 17 - no penalty is owed.**

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions ..... <b>19</b>				
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2019 and before 7/1/2019 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 06/30/2019 and before 10/1/2019 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2019 and before 1/1/2020 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2019 and before 4/1/2020 .....	<b>27</b>	<b>SEE ATTACHED WORKSHEET</b>		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2020 and before 7/1/2020 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2020 and before 10/1/2020 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2020 and before 1/1/2021 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2020 and before 3/16/2021 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b> \$			<b>1,109.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
US BANK	64,116.	64,116.	0.
TOTAL TO PART I, LINE 3	64,116.	64,116.	0.

## FORM 990-PF

## DIVIDENDS AND INTEREST FROM SECURITIES

## STATEMENT 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 INVESTORS FUND, LLC 26-0634745	2,325,982.	0.	2,325,982.	2,325,982.	0.
FROM K-1 BRIDGE MULTIFAMILY & COMMERCIAL OFFICE FUND II-B 46-1366574	580.	0.	580.	580.	0.
FROM K-1 CAPITAL TODAY CHINA GROWTH FUND, LP 98-0571875	159.	0.	159.	159.	0.
FROM K-1 KINGSWOOD CAPITAL OPPORTUNITIES FUND I-A 84-2161460	76,087.	0.	76,087.	76,087.	0.
FROM K-1 LITTLEJOHN FUND VI LP 82-5017620	1.	0.	1.	1.	0.
FROM K-1 METROPOLITAN REAL ESTATE PARTNERS IV-A, LP 65-1265800	1,307.	0.	1,307.	1,307.	0.
FROM K-1 PANGAEA TWO LP 27-2707204	5,726.	0.	5,726.	5,726.	0.
FROM K-1 PIMCO BRAVO FUND ONSHORE FEEDER I LP 27-3723234	16,647.	0.	16,647.	16,647.	0.
FROM K-1 Q-BLK PRIVATE CAPITAL II LP 20-3111907	1.	0.	1.	1.	0.
FROM K-1 QUESTA CAPITAL PARTNERS 1 LP 81-3840225	14,877.	0.	14,877.	14,877.	0.
FROM K-1 RESOURCE LAND FUND IV, LLC 26-3903798	436.	0.	436.	436.	0.
	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	-108,934.	-108,934.	0.
INCOME FROM K-1 BRIDGE MULTIFAMILY & COMMERCIAL OFFICE FUND II 46-1366574	-6,404.	-6,404.	0.
INCOME FROM K-1 CANAAN NATURAL GAS PARALLEL FUND K-1 IX LP	-7,658.	-7,658.	0.
INCOME FROM K-1 CANAAN NATURAL GAS 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.	-19,060.	0.
INCOME FROM K-1 PANGAEA TWO LP	-5,071.	-5,071.	0.
INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	11,361.	11,361.	0.
INCOME FROM K-1 RESOURCE LAND FUND IV, LLC	-78,303.	-78,303.	0.
INCOME FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)	45.	45.	0.
ROYALTY INCOME FROM K-1 RESOURCE LAND FUND IV, LLC 26-3903798	695.	695.	0.
ROYALTY INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	17.	17.	0.
OTHER INCOME	163,662.	163,662.	0.
UBTI CAP.GN.FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)	1,350.	0.	0.
UBTI CAP.GN.FROM K-1 RESOURCE LAND FUND IV, LLC	26,280.	0.	0.
UBTI CAP.GN.FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	449.	0.	0.
UBTI FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	-1,049.	0.	0.
UBTI FROM K-1 RESOURCE LAND FUND IV, LLC	-121,657.	0.	0.
UBTI FROM K-1 METROPOLITAN REAL ESTATE PARTNERS IV FUND LP	-9,773.	0.	0.
UBTI FROM K-1 LUMINATE CAPITAL PARTNERS II LP (83-0739836)	-10,830.	0.	0.
UBTI FROM K-1 CARTESIAN/PANGAEA TWO LP (27-2707204)	-5,072.	0.	0.
UBTI FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)	-3,371.	0.	0.
<b>TOTAL TO FORM 990-PF, PART I, LINE 11</b>	<b>-187,660.</b>	<b>-63,987.</b>	<b>0.</b>

## FORM 990-PF

## LEGAL FEES

## STATEMENT 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

## ACCOUNTING 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.
TO FORM 990-PF, PG 1, LN 16B	39,749.	29,812.	0.	9,937.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 6

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

## FORM 990-PF

## TAXES

## 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 EXPENSES

## STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	20,754.	3,113.	0.	17,641.
OFFICE EXPENSE	30,976.	4,646.	0.	26,330.
SOFTWARE LICENSING	20,977.	3,147.	0.	17,831.
EQUIPMENT PURCHASES	5,373.	806.	0.	4,567.
MEMBERSHIP DUES	21,719.	3,258.	0.	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

## OTHER INVESTMENTS

## STATEMENT 9

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

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


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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND FIXTURES OFFICE EQUIPMENT	27,291.	27,291.	0.
FURNITURE AND FIXTURES OFFICE 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 TOWER	875.	875.	0.
COMPUTER EQUIPMENT MK TOWER	875.	875.	0.
DELL LAPTOP VOSTRO 1710 MK WORKSTATIONS	1,174.	1,174.	0.
LAPTOPS HP X360	8,137.	8,137.	0.
LAPTOPS HP PAVILLION	1,875.	938.	937.
LAPTOP HP	3,087.	1,543.	1,544.
PHONE SYSTEMS	700.	350.	350.
MACBOOK	1,944.	972.	972.
	2,795.	1,118.	1,677.
<b>TOTAL TO FM 990-PF, PART II, LN 14</b>	<b>77,648.</b>	<b>71,694.</b>	<b>5,954.</b>

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**FORM 990-PF      OTHER ASSETS      STATEMENT 11**


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

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**FORM 990-PF      OTHER LIABILITIES      STATEMENT 12**


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DESCRIPTION	BOY AMOUNT	EOY AMOUNT
ACCRUED INCOME TAX PAYABLE	569,639.	13,881.
<b>TOTAL TO FORM 990-PF, PART II, LINE 22</b>	<b>569,639.</b>	<b>13,881.</b>

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
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 MEMBER 4.00	0.	0.	0.
AMALIA S. RIOJA 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	VICE CHAIR, BOARD MEMBER 1.00	0.	0.	0.
JOSEPH W. MCINERNEY 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	TREASURER, BOARD MEMBER 4.00	0.	0.	0.
CARL BERGETZ 19 RIVERSIDE ROAD #6 RIVERSIDE, IL 60546	SECRETARY, BOARD MEMBER 4.00	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

<u>207,627.</u>	<u>29,250.</u>	<u>0.</u>
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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 14

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

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

---

**TELEPHONE NUMBER**

---

708-443-5674

---

**EMAIL ADDRESS**

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MPESQUEIRA@HCFDN.ORG

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**FORM AND CONTENT OF APPLICATIONS**

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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/](https://hcfdn.org/info-regarding-our-2019-grant-cycle/)

ATTACHMENTS (FOR ALL APPLICANTS): SEE OUR WEBSITE

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**ANY SUBMISSION DEADLINES**

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MAY 15, MAY 21; JULY 1; JULY 1; JULY 15; AUG.15; END OF AUG.-SEPT; DEC.  
DETAILS ON [HTTPS://HCFDN.ORG](https://hcfdn.org)

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**RESTRICTIONS AND LIMITATIONS ON AWARDS**

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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).

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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.



## FORM 990-PF

## OTHER REVENUE

## 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			14	-108,934.	
INCOME FROM K-1 BRIDGE MULTIFAMILY & COMMERCIAL OFFICE FUND II 46-1366574			14	-6,404.	
INCOME FROM K-1 CANAAN NATURAL GAS PARALLEL FUND K-1 IX LP			14	-7,658.	
INCOME FROM K-1 CANAAN NATURAL GAS PARALLEL FUND K-1 X LP			14	-3,947.	
INCOME FROM K-1 CAPITAL CHINA GROWTH			14	440.	
INCOME FROM K-1 LUMINATED CAPITAL PARTNERS II LP			14	-10,830.	
INCOME FROM METROPOLITAN REAL ESTATE PARTNERS IV FUND LP			14	-19,060.	
INCOME FROM K-1 PANGAEA TWO LP			14	-5,071.	
INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)			14	11,361.	
INCOME FROM K-1 RESOURCE LAND FUND IV, LLC			14	-78,303.	
INCOME FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)			14	45.	
ROYALTY INCOME FROM K-1 RESOURCE LAND FUND IV, LLC 26-3903798			14	695.	
ROYALTY INCOME FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)			14	17.	
OTHER INCOME			14	163,662.	
UBTI CAP.GN.FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)	900099		18		1,350.
UBTI CAP.GN.FROM K-1 RESOURCE LAND FUND IV, LLC	900099		18		26,280.
UBTI CAP.GN.FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	900099		18		449.
UBTI FROM K-1 Q-BLK PRIVATE CAPITAL II (20-2111907)	900099		14		-1,049.
UBTI FROM K-1 RESOURCE LAND FUND IV, LLC	900099		14		-121,657.

HEALTHY COMMUNITIES FOUNDATION

36-4324067

UBTI FROM K-1	900099		
METROPOLITAN REAL ESTATE PARTNERS IV FUND LP		-9,773.	14
UBTI FROM K-1 LUMINATE CAPITAL PARTNERS II LP (83-0739836)	900099	-10,830.	14
UBTI FROM K-1 CARTESIAN/PANGAEA TWO LP (27-2707204)	900099	-5,072.	14
UBTI FROM K-1 LITTLEJOHN FUND VI LP (82-5017620)	900099	-3,371.	14

TOTAL TO FORM 990-PF, PG 12, LN 11

-123,673.

-63,987.

2019 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	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
1	FURNITURE AND FIXTURES OFFICE EQUIPMENT	01/01/07	SL	5.00		16	27,291.				27,291.	27,291.		0.	27,291.
2	FURNITURE AND FIXTURES 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.