

PUBLIC INSPECTION COPY

Form **990-PF**

Return of Private Foundation

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

2020

Open to Public Inspection

For calendar year **2020** or tax year beginning , **2020**, and ending , **20**

Name of foundation MAKE IT BETTER FOUNDATION		A Employer identification number 27-0773475
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) (847) 256-4642
City or town, state or province, country, and ZIP or foreign postal code WILMETTE, IL 60091		C If exemption application is pending, check here. <input type="checkbox"/>
G Check all that apply:		D 1. Foreign organizations, check here. <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	E If private foundation status was terminated under section 507(b)(1)(A), check here. <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. <input type="checkbox"/>
<input checked="" type="checkbox"/> Address change	<input type="checkbox"/> Name change	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 26,495.		
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	71,474.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
	3 Interest on savings and temporary cash investments	1.	1.		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain.				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	71,475.	1.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	21,307.			21,307.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) ATC# 1	5,717.			5,717.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions).				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) ATC# 2	48.			48.
	24 Total operating and administrative expenses. Add lines 13 through 23.	27,072.			27,072.
	25 Contributions, gifts, grants paid	20,896.			20,896.
26 Total expenses and disbursements. Add lines 24 and 25	47,968.	0.	0.	47,968.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	23,507.				
b Net investment income (if negative, enter -0-)		1.			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	2,988.	26,495.	26,495.
	3	Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule), . .			
	b	Investments - corporate stock (attach schedule)			
	c	Investments - corporate bonds (attach schedule),			
	11	Investments - land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation ▶ _____ (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation ▶ _____ (attach schedule)			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	2,988.	26,495.	26,495.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons, . .			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
23	Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>				
	and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" 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	2,988.	26,495.		
29	Total net assets or fund balances (see instructions)	2,988.	26,495.		
30	Total liabilities and net assets/fund balances (see instructions)	2,988.	26,495.		

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	2,988.
2	Enter amount from Part I, line 27a	2	23,507.
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	26,495.
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	26,495.

Part IV Capital Gains and Losses for Tax on Investment Income

Table with columns (a) through (l) for listing property sold, including FMV, adjusted basis, and gain/loss calculations.

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

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

Table with columns (a) through (d) for qualification information, with rows 1 through 8 marked as 'Reserved'.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 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/overpayment.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about influencing legislation, political expenditures, and reporting requirements.

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 foreign country interests.

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 enterprise interests.

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 3		21,307.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000.

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0.

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 WARMING HEARTS & HANDS PROGRAM - PLEASE SEE GENERAL EXPLANATION ATTACHMENT.	20,896.
2	
3	
4	

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

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	4,983.
c	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	4,983.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d.	3	4,983.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	75.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,908.
6	Minimum investment return. Enter 5% of line 5	6	245.

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	245.
2a	Tax on investment income for 2020 from Part VI, line 5	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	245.
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4	5	245.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	245.

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	47,968.
b	Program-related investments - total from Part IX-B.	1b	
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	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	47,968.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	47,968.

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 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				245.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.				
b Total for prior years: 20 <u>18</u> , 20 <u>17</u> , 20 <u>16</u>				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				92,063.
b From 2016				61,681.
c From 2017				66,369.
d From 2018				79,037.
e From 2019				87,929.
f Total of lines 3a through e	387,079.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>47,968.</u>				
a Applied to 2019, but not more than line 2a . . .				
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2020 distributable amount.				245.
e Remaining amount distributed out of corpus. . .	47,723.			
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	434,802.			
b Prior years' undistributed income. Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see instructions				
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .	92,063.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	342,739.			
10 Analysis of line 9:				
a Excess from 2016				61,681.
b Excess from 2017				66,369.
c Excess from 2018				79,037.
d Excess from 2019				87,929.
e Excess from 2020				47,723.

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) NOT APPLICABLE

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 2020, 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)

	Tax year				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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:					
a "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:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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).)

SUSAN NOYES

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.

N/A

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

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

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

ATCH 4

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<p>a Paid during the year</p> <p>ATCH 5</p>				
Total				3a 20,896.
<p>b Approved for future payment</p>				
Total				3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on savings, Dividends, Net rental income, etc.

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

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains N/A.

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

b If "Yes," complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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

Sign Here: Signature of officer or trustee, Date, Title. May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Paid Preparer Use Only: Print/Type preparer's name (JENNIFER D RHODERICK), Preparer's signature (Jennifer D Rhoderick), Date (05/13/21), Firm's name (ERNST & YOUNG U.S. LLP), Firm's address (111 MONUMENT CIRCLE, STE 4000 INDIANAPOLIS, IN 46204), Firm's EIN (34-6565596), Phone no. (317-681-7000).

Schedule of Contributors

2020

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

Name of the organization
MAKE IT BETTER FOUNDATION

Employer identification number
27-0773475

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **MAKE IT BETTER FOUNDATION**

Employer identification number
27-0773475

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SUSAN NOYES 1046 MICHIGAN AVE WILMETTE, IL 60091	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MAKE IT BETTER MEDIA GROUP 203 NORTH LASALLE STREET, SUITE 2100 CHICAGO, IL 60601	\$ 21,307.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **MAKE IT BETTER FOUNDATION**

Employer identification number

27-0773475

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization **MAKE IT BETTER FOUNDATION**

Employer identification number
27-0773475

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

GENERAL EXPLANATION ATTACHMENT

PART IX-A, CHARITABLE ACTIVITY
WARMING HEARTS & HANDS PROGRAM

THIS PROGRAM WAS ESTABLISHED BY MIBF AS A MEANS TO RAISE FUNDS WHICH MIBF WILL USE TO PURCHASE WINTER CLOTHING I.E. COATS, GLOVES, HATS ETC., ("WINTER CLOTHING"). WINTER CLOTHING PURCHASED WILL BE DONATED BY MIBF TO 501(C)(3) QUALIFIED SHELTERS AND FOOD KITCHENS FOR DIRECT DISTRIBUTION TO INDIVIDUALS AND FAMILIES IN NEED OF SUCH ITEMS.

UNDER THE PROGRAM, INDIVIDUALS WILL BE INVITED THROUGH BROADCAST EMAILS, SIGNS AND ADVERTISEMENTS TO CONTRIBUTE FUNDS THROUGH A FUNDRAISING WEBSITE. THEY CAN MAKE DONATIONS TO MIBF FOR THIS DESIGNATED PURPOSE AND MIBF WILL USE THESE DESIGNATED FUNDS TO PURCHASE WINTER CLOTHING FROM UNRELATED WHOLESALERS AND OTHER SOURCES. MIBF WILL THEN DONATE THE WINTER CLOTHING TO 501(C)(3) QUALIFIED SHELTERS AND FOOD KITCHENS FOR DIRECT DISTRIBUTION TO INDIVIDUALS AND FAMILIES IN NEED OF SUCH ITEMS.

RECIPIENTS FOR 2020:

CRADLES TO CRAYONS, THE GIVING FACTORY, 4141 W GEORGE STREET, CHICAGO, IL 60641

FAMILY EMPOWERMENT CENTER, 1533 W DEVON AVE, CHICAGO, IL 60660

SARAH'S CIRCLE, 4838 N SHERIDAN, CHICAGO, IL 60640

GEOGRAPHIC AREA:

MIBF PROGRAM FUNDING PRIMARILY FOCUSED IN CHICAGO AND SURROUNDING SUBURBS. WINNERS FOR THE PHILANTHROPY AWARD MAY BE NATIONAL.

WHAT WE SUPPORT

OUR SUPPORT INCLUDES BUT IS NOT LIMITED TO THE FOLLOWING SPHERES OF IMPACT:

FAMILY, YOUTH AND CHILD SERVICES

AS THE BACKBONE OF THE COMMUNITIES WE REACH, FAMILIES PRESENT A RANGE OF OPPORTUNITIES FOR SUPPORT, ENCOURAGEMENT AND SKILL DEVELOPMENT. MIBF IS COMMITTED TO SUPPORTING NFPS THAT DIRECT THEIR PROGRAM SERVICES TO FAMILIES AND WHO VIEW THESE FAMILIES AS A CHERISHED, BUT OFTEN UNDER-RESOURCED ASSET FOR OUR NEIGHBORHOODS. MIBF REINFORCES THE QUALITIES THAT MAKE STRONG FAMILIES, REGARDLESS OF THEIR SOCIAL STATUS, BY SUPPORTING NFPS COMMITTED TO TRAINING AND EDUCATING TEEN MOTHERS; COUNSELING FAMILIES FACING CRISIS; IMPROVING CROSS GENERATIONAL COMMUNICATION; NURTURING CHILD DEVELOPMENT BEST PRACTICES; FACILITATING COMMUNITY BASED SUPPORT GROUPS; PROMOTING PHYSICAL, MENTAL, EMOTIONAL WELL-BEING; AND ERADICATING SUBSTANCE ADDICTION, ABUSE AND NEGLECT.

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

EDUCATION

QUALITY EDUCATION AT THE EARLY CHILDHOOD/PRESCHOOL, PRIMARY AND SECONDARY LEVELS IS A CORE PRIORITY AND LONG STANDING PILLAR IN OUR COMMUNITIES' EFFORTS TO PREPARE OUR NEXT GENERATION. MIBF FINANCIALLY SUPPORTS THE MISSION OF INNOVATIVE, EVIDENCE-BASED, AND RESPONSIVE EDUCATION PROGRAMS IN THE CHICAGOLAND AREA TO ENSURE THEIR STORY, THEIR MODEL, AND THEIR SUCCESSES ARE SUPPORTED AND SHARED WITH OTHERS. IN ADDITION TO TRADITIONAL EDUCATION INSTITUTIONS, MIBF SUPPORTS NFP ORGANIZATIONS THAT ENCOURAGE TEACHER EXCELLENCE, CHARTER SCHOOLS WITH INNOVATIVE MODELS, LITERACY INTERVENTIONS, AFTER-SCHOOL HOMEWORK ASSISTANCE PROGRAMS, EXECUTIVE AND STUDY SKILLS TRAINING PROGRAMS, AND EARLIEST INTERVENTION PROGRAMS FOR YOUNG DEVELOPING MINDS.

ARTS, CULTURE AND HUMANITIES

MIBF SUPPORTS A VARIETY OF PERFORMING ARTS, PUBLIC BROADCASTING MEDIA, LIBRARY AND MUSEUM INSTITUTIONS LOCATED IN OUR FOOTPRINT. THEIR EFFORT TO PROMOTE AND FURTHER THE CAUSE OF EXCELLENT ARTS, RESOURCES AND ENTERTAINMENT FOR OUR COMMUNITY IS PRIMARY FOCUS OF MIBF ACTIVITY. MIBF ACCOMPLISHES ITS MISSION IN PART BY SPONSORING THEIR VARIOUS EVENTS AND AMPLIFYING THEIR MISSION, PROMOTING INSTITUTES THAT EQUIP AND TRAIN FUTURE PERFORMERS, AND UNDERWRITING SPECIAL EXHIBITS.

HEALTH AND HUMAN SERVICES

ANOTHER PRIORITY FOCUS FOR MIBF IS SUPPORTING THOSE ORGANIZATIONS THAT ELEVATE THE HUMAN SPIRIT AND BRING ASSISTANCE, COMFORT, HEALING, AND WELL-BEING TO FELLOW RESIDENTS IN AND AROUND CHICAGO. SPECIFICALLY, MIBF SUPPORTS INSTITUTIONS THAT PROVIDE EMERGENCY SHELTER FOOD, AND SAFETY FOR OUR HOMELESS POPULATION; FOSTER FUNCTION-SPECIFIC LIVING ENVIRONMENTS FOR RESIDENTS LIVING WITH MENTAL ILLNESS OR DEVELOPMENTAL CHALLENGES; PROVIDE MULTIPURPOSE SERVICES AND SUPPORT FOR JOB SEARCH, AND PERMANENT HOUSING OPTIONS; AND RESEARCH AND DEVELOP EXCELLENCE IN MEDICAL ADVANCEMENT, DISEASE AND DISORDER EDUCATION, PATIENT/FAMILY SUPPORT, TREATMENT AND PREVENTION SERVICES, AND HOSPICE CARE.

ANIMALS AND ENVIRONMENT

MIBF IS FORTUNATE TO PARTNER WITH THE NATIONALLY ACCLAIMED ORGANIZATIONS IN CHICAGO AND SURROUNDING COMMUNITIES THAT SEEK TO PRESERVE AND PROTECT OUR ANIMAL AND PLANT KINGDOMS AND MAKE THEM ACCESSIBLE TO THE GENERAL PUBLIC. IT DOES THIS BY SUPPORTING AND AMPLIFYING THE MISSION OF LOCAL AQUARIUMS, BOTANIC GARDENS, ZOOS, PARKS AND CONSERVANCIES THROUGH EVENT SPONSORSHIP, EDITORIAL COVERAGE AND SPECIAL EXHIBIT FUNDING.

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

SOCIAL JUSTICE:

WE SUPPORT PROJECTS OR PROGRAMS ACHIEVING COMMUNITY OR ORGANIZATIONAL CHANGE THAT SUPPORTS DISENFRANCHISED, DISEMPOWERED, LESS PRIVILEGED OR OPPRESSED GROUPS. PROGRAMS DEDICATED TO ELIMINATING DISCRIMINATION, OPPRESSION, AND INJUSTICE LOCALLY AND GLOBALLY WERE ENCOURAGED TO APPLY. VIOLENCE PREVENTION AND HUNGER RELIEF PROGRAMS WERE ALSO CONSIDERED.

ATTACHMENT 1

FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
ACCOUNTING FEES	5,717.			5,717.
TOTALS	<u>5,717.</u>			<u>5,717.</u>

ATTACHMENT 2

FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
BANK SERVICE CHARGES	10.			10.
FILING FEES	25.			25.
MISCELLANEOUS EXPENSES	13.			13.
TOTALS	<u>48.</u>			<u>48.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 3

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
SHARON P. KRONE PO BOX 751 WILMETTE, IL 60091	SECRETARY & TREASURER 1.00	21,307.	0.	0.
SANDRA TSUCHIDA PO BOX 751 WILMETTE, IL 60091	DIRECTOR 1.00	0.	0.	0.
SUSAN NOYES PO BOX 751 WILMETTE, IL 60091	DIRECTOR 1.00	0.	0.	0.
MELINDA FAUNTILEROY PO BOX 751 WILMETTE, IL 60091	PRESIDENT 1.00	0.	0.	0.
KATHY ROESER PO BOX 751 WILMETTE, IL 60091	DIRECTOR 1.00	0.	0.	0.
<u>GRAND TOTALS</u>		<u>21,307.</u>	<u>0.</u>	<u>0.</u>

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MIBF ATTN: SHARON KRONE
PO BOX 751
WILMETTE, IL 60091
847-256-4642

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

APPLICATIONS FOR THE ANNUAL PHILANTHROPY AWARDS COMPETITION CAN BE FOUND ON THE MIBF WEBSITE. [HTTP://FOUNDATION.MAKEITBETTER.COM/](http://FOUNDATION.MAKEITBETTER.COM/)

SUBMISSION DEADLINES:

NOMINATIONS FOR PHILANTHROPY AWARDS ARE ACCEPTED DURING THE SPECIFIED PERIOD, TYPICALLY THE MONTH OF SEPTEMBER EACH YEAR.

RESTRICTIONS OR LIMITATIONS ON AWARDS:

WE WILL REVIEW REQUESTS FOR SUPPORT AGAINST OUR STATED MISSION, WHICH IS TO IDENTIFY AND AMPLIFY THE WORK OF OUSTANDING NONPROFITS WHILE GROWING A NETWORK OF WELL-INFORMED, COMMITTED PHILANTHROPISTS; SOCIAL ENTREPRENEURS; AND SPONSORS. WE ENTER INTO THE AGREEMENT USING THE ORGANIZATION'S STANDARD SPONSORSHIP FORM, HAVING CONFIRMED THEIR 501(C) (3) STATUS IN ADVANCE. GENERALLY THESE ARE ORGANIZATIONS IN THE SURROUNDING CHICAGOLAND AREA THAT ARE WITHIN THE DISTRIBUTION FOOTPRINT OF MAKE IT BETTER LLC MEDIA CHANNELS. PLEASE VISIT [HTTP://FOUNDATION.MAKEITBETTER.COM/VALUES-MISSION-VISION](http://FOUNDATION.MAKEITBETTER.COM/VALUES-MISSION-VISION)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 5

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CRADLES TO CRAYONS 4141 W GEORGE ST CHICAGO, IL 60641	N/A PC	PROVIDE WINTER CLOTHES FOR NEEDY	16,000.
FAMILY EMPOWERMENT CENTERS 1533 WEST DEVON AVENUE CHICAGO, IL 60660	N/A PC	PROVIDE WINTER CLOTHES FOR NEEDY	4,198.
SARAH'S CIRCLE 4838 N SHERIDAN ROAD CHICAGO, IL 60640	N/A PC	PROVIDE WINTER CLOTHES FOR NEEDY	698.

TOTAL CONTRIBUTIONS PAID 20,896.