PUBLIC INSPECTION COPY

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

F	or ca	lendar year 2020 or tax year beginning				, 202	0, and end	ling		, 20
Na	ame of	f foundation							A Employer identif	cation number
	MAK:	E IT BETTER FOUNDATION							27-077347	5
Νι	umber	and street (or P.O. box number if mail is not delivere	to stre	et ad	ldress)		Room/suit	te	B Telephone numb	er (see instructions)
_		BOX 751							(847) 25	6-4642
Ci	ty or to	own, state or province, country, and ZIP or foreign po	stal cod	le					C If avanation applies	diam in
		MDEED 11 60001							C If exemption application pending, check here	ation is
_		METTE, IL 60091		T	Initial nature	- f - f	ممام مثامانیت			. \square
G	Cne	eck all that apply: Initial return			Initial return		public cha	irity	D 1. Foreign organiza	
		Final return X Address change			Amended re				Foreign organiza 85% test, check h	
	Cho	$oxed{ \begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	1/0)/3	7					computation	▶ □
ï	_		(6)(3	−i	ther taxable p		otion		E If private foundation	
1		section 4947(a)(1) nonexempt charitable trust market value of all assets at J Ac			nethod: X C				,)(1)(A), check here
١		of year (from Part II, col. (c), line		_	ecify)	asii Ac	Ciuai			in a 60-month termination (1)(B), check here
				٠.	(d), must be on c	ash hasis)			under section 507(b)(1)(b), check here
1		Analysis of Revenue and Expenses (T				don basis.)				(d) Disbursements
		total of amounts in columns (b), (c), and (d)	.		Revenue and penses per	(b) Net in		(0	c) Adjusted net	for charitable purposes
		may not necessarily equal the amounts in column (a) (see instructions).)			books	inco	ille		income	(cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	_		71,474.					
	2	Check 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)								
ne		Net gain or (loss) from sale of assets not on line 10								
en	b	Gross sales price for all assets on line 6a								
Revenue	7	Capital gain net income (from Part IV, line 2)								
Œ	8	Net short-term capital gain.								
	9	Income modifications	-							
	IVa	and allowances								
		Less: Cost of goods sold .								
		Gross profit or (loss) (attach schedule)								
	11 12	Other income (attach schedule) Total. Add lines 1 through 11	•		71,475.		1.			
_					21,307.					21,307
S	13	Compensation of officers, directors, trustees, etc.								
nse	15	Other employee salaries and wages Pension plans, employee benefits								
be	16a	Legal fees (attach schedule)								
Ж	b	Accounting fees (attach schedule)ATCH 1			5,717.					5,717
<u>×</u>	c	Other professional fees (attach schedule)	-							
rat	14 15 16a b c 17 18 19 20 21	Interest								
ist	18	Taxes (attach schedule) (see instructions)								
틆	19	Depreciation (attach schedule) and depletion								
þ	20	Occupancy	. L							
þ	21	Travel, conferences, and meetings								
a	22	Printing and publications			1.0					4.0
ng	23 24 25	Other expenses (attach schedule) ${\tt ATCH}$. 2.			48.			<u> </u>		48
rati	24	Total operating and administrative expense			27 070					27 072
be		Add lines 13 through 23.			27 , 072. 20 , 896.					27,072
0		Contributions, gifts, grants paid			47,968.		0.		0.	47,968
_	26	Total expenses and disbursements. Add lines 24 and 2	5		II, JUO.		0.		0.	47,000
	27	Subtract line 26 from line 12:			23,507.					
		Excess of revenue over expenses and disbursement Net investment income (if negative, enter -0-			20,007.		1.			
		Adjusted net income (if negative, enter -0-).								
_		, (II II Ogalivo, Oilloi -0-)	-							

_	art II	Balance Sheets Attached schedules and amounts in the	Beginning of year	End o	f voor
Ŀ	art II	description column should be for end-of-year	(a) Book Value	(b) Book Value	(c) Fair Market Value
_		amounts only. (See instructions.)	(a) DOOK Value	(b) Dook value	(c) I all Warket Value
		Cash - non-interest-bearing	2,988.	26,495.	26,495.
		Savings and temporary cash investments	2,300.	20,433.	20,433.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
		Other notes and loans receivable (attach schedule)			
۰,		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
155		Prepaid expenses and deferred charges			
٩		Investments - U.S. and state government obligations (attach schedule).			
		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
		and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
		Investments - mortgage loans			
		Investments - other (attach schedule) Land, buildings, and			
		Leard, buildings, and equipment: basis Less: accumulated depreciation			
		(attach schedule)			
		Other assets (describe)			
		Total assets (to be completed by all filers - see the	2 000	26 405	06 405
		instructions. Also, see page 1, item I)	2,988.	26,495.	26,495.
		Accounts payable and accrued expenses			
		Grants payable			
Liabilities	19	Deferred revenue			
≝		Loans from officers, directors, trustees, and other disqualified persons.			
<u>ā</u> .		Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe >)			
		T (0	0	
_		Total liabilities (add lines 17 through 22)	0.	0.	
nces		Foundations that follow FASB ASC 958, check here			
		and complete lines 24, 25, 29, and 30.			
ョ	24	Net assets without donor restrictions			
<u>8</u>	25	Net assets with donor restrictions			
Ĕ		Foundations that do not follow FASB ASC 958, check here			
Net Assets or Fund Bala		and complete lines 26 through 30.			
ō		Capital stock, trust principal, or current funds			
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	2 000	26 405	
SS	28	Retained earnings, accumulated income, endowment, or other funds	2,988. 2,988.	26,495. 26,495.	
4		Total net assets or fund balances (see instructions)	2,900.	20,493.	
å		Total liabilities and net assets/fund balances (see	2 000	26 405	
_		instructions)	2,988.	26,495.	
	art II				
1		Il net assets or fund balances at beginning of year - Part I			2 000
_		of-year figure reported on prior year's return)			2,988.
2		er amount from Part I, line 27a		_	23,507.
3					06 405
_		lines 1, 2, and 3			26,495.
5		reases not included in line 2 (itemize) ▶	p =/ =	5	00 405
6	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)), line 29 6	26,495.

Form **990-PF** (2020)

Form 990-PF (2020) Page **3**

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and de	scribe the kind(s) of property sold (for exrick warehouse; or common stock, 200 s		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a				D - Donation		
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	ss) is (g))
а						
b						
c						
d						
е						
	Complete only for assets s	showing gain in column (h) and owned l	by the foundation on 12/31/69.		Gains (Col. (h) ga	
	(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	col. (k), but not less than -0-) or Losses (from col. (h))		
а						
b						
C						
d						
е						
2	Capital gain net income	or (net canital loss)	nin, also enter in Part I, line 7 sss), enter -0- in Part I, line 7	2		
3	Net short-term capital g	gain or (loss) as defined in sections	1222(5) and (6):			
	If gain, also enter in P	Part I, line 8, column (c). See inst	ructions. If (loss), enter -0- in			
				3		
Pa		Under Section 4940(e) for Red				
1	Reserved	SECTION 4940(e) REPEALED ON D	DECEMBER 20, 2019 - DO NOT CO	OMPLETE	<u>.</u>	
	(a)	(b)	(c)		(d)	
	Reserved	Reserved	Reserved		Reserved	
	Reserved					
	Reserved Reserved					
	Reserved					
	Reserved					
	reserved					
2	Reserved			2		
3	Reserved			3		
4	Reserved			4		
5	Reserved			5		
6				6		
7	Reserved			7		
8	Reserved			8		

Form **990-PF** (2020)

JSA 0E1430 1.000

Form	990-PF (2020) MAKE IT BETTER FOUNDATION 27-077	3475	Р	Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instruction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)			
b	Reserved			0.
С	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6	Credits/Payments:			
а	2020 estimated tax payments and 2019 overpayment credited to 2020 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d _	Backup withholding erroneously withheld			0.
7	Total credits and payments. Add lines 6a through 6d			
8	Effect any periods for anadepayment of destinated tax. Sheak field			0.
9	Tax add in the total of lines of and of office than line is, office amount owner.			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2021 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
-	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		3.7
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Χ	
_	conflict with the state law remain in the governing instrument?	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		21	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	0.5		
J	4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV.	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
. 0	names and addresses	10		Х

5787CU 1274 V 20-4.6F PAGE 5

Page 5

Pai	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions.	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► FOUNDATION.MAKEITBETTER.COM			
14	The books are in care of ► SHARON KRONE Telephone no. ► 847-256	-464	2	
	Located at ▶PO BOX 751 WILMETTE, IL ZIP+4 ▶ 60091			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No (3) Furnish goods services or facilities to (or accept them from) a disqualified person? Yes X No			
	(b) Turnish goods, services, or racinites to (or accept them from) a disqualified person:			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	the benefit of use of a disqualified person):			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, it terminating within 50 days.			
D	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	1b		Х
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	10		
_	Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
٠	were not corrected before the first day of the tax year beginning in 2020?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2020? Yes			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	o If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2020.)	3b		
4a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4.		17
	charitable nurpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	∣ 4h	1	X

Form **990-PF** (2020)

V 20-4.6F PAGE 6

Page 6

Pai	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (con	tinued)			
5a	During the	e year, did the foundation pay or incur any amo	ount to:					Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	Yes	X No			
	(2) Influe	nce the outcome of any specific public ele	ection (see section	4955); or to carry or	η,				
	direct	ly or indirectly, any voter registration drive?			Yes	X No			
		de a grant to an individual for travel, study, or o				X No			
	(4) Provid	de a grant to an organization other than a	charitable, etc., org	ganization described i	n				
	section	n 4945(d)(4)(A)? See instructions			Yes	X No			
		de for any purpose other than religious, cl							
	purpo	ses, or for the prevention of cruelty to children	or animals?		. Yes	X No			
b		swer is "Yes" to 5a(1)-(5), did any of the				scribed in			
	Regulation	ns section 53.4945 or in a current notice regar	ding disaster assistan	ce? See instructions.			5b		
	Organizat	ions relying on a current notice regarding disa	ster assistance, check	here		▶□			
С	If the an	swer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the t	ax				
	because i	t maintained expenditure responsibility for the	grant?		Yes	No			
	If "Yes," a	attach the statement required by Regulations s	ection 53.4945-5(d).						
6a	Did the f	oundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiur	ns				
		onal benefit contract?	•		Yes	X No			
b		undation, during the year, pay premiums, dire			act?		6b		Χ
		6b, file Form 8870.							
7a	At any tim	ne during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes	X No			
b		lid the foundation receive any proceeds or ha					7b		
8	Is the fou	ndation subject to the section 4960 tax on pa	yment(s) of more tha	n \$1,000,000 in					
	remunera	tion or excess parachute payment(s) during the	year?		. Yes	X No			
Pai	t VIII	Information About Officers, Directo					yees,		
1	list all of	and Contractors ficers, directors, trustees, and foundat	ion managers and	their compensation	Soo instruc	rtions			
•	List all O		(b) Title, and average	(c) Compensation	(d) Contribu	itions to	(e) Expens	e accol	ınt
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee ben and deferred co	lelit piaris	other all	owance	s
ATCI	I 3			21,307.		0.			0.
2		ation of five highest-paid employees	(other than thos	se included on line	e 1 - see	instruction	s). If no	one,	entei
	"NONE."		T		(d) Contribu	itions to			
(a)	Name and a	address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee	benefit	(e) Expens	e accol	ınt,
			devoted to position		compens		otilei ali	Owanice	
	NONE								
						1			

Form **990-PF** (2020)

0E1460 1.000 5787CU 1274 V 20-4.6F PAGE 7 Form 990-PF (2020) Page **7**

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instru		
(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	<u></u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	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	12.	Amount
1 NONE		
2		
All other program-related investments. See instructions.		
3 NONE		
Tatal Add lines 1 through 2		

Form **990-PF** (2020)

5787CU 1274 V 20-4.6F PAGE 8

Form 990-PF (2020) Page **8**

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fo	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	4,983.
	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	4,983.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
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.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here ▶ and do not complete this part.)	g foun	
1	Minimum investment return from Part X, line 6	1	245.
2 a	Tax on investment income for 2020 from Part VI, line 5		
	Income tax for 2020. (This does not include the tax from Part VI.) 2b		
	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.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	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:		
а	Suitability test (prior IRS approval required)	3a	
	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		47,968.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		ng whether the foundation

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

Form **990-PF** (2020)

Form 990-PF (2020)

Pa	rt XIII Undistributed Income (see instr	uctions)			<u> </u>
		(a)	(b)	(c)	(d)
1	Distributable amount for 2020 from Part XI,	Corpus	Years prior to 2019	2019	2020
	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: $20\underline{18}$, $20\underline{17}$, $20\underline{16}$				
3	Excess distributions carryover, if any, to 2020:				
a	From 2015 92,063.				
k	From 2016 61,681.				
c	From 2017				
c	From 2018				
e	From 2019	200 000			
	Total of lines 3a through e	387,079.			
4	Qualifying distributions for 2020 from Part XII,				
	line 4: ▶ \$ 47,968.				
a	Applied to 2019, but not more than line 2a 🚬 🔝				
t	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				245.
	I Applied to 2020 distributable amount Remaining amount distributed out of corpus	47,723.			210.
	Excess distributions carryover applied to 2020	17,723.			
	(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.			
	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				
c	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	92,063.			
_	applied on line 5 or line 7 (see instructions)	,			
9	Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	342,739.			
10	Analysis of line 9:				
	Excess from 2016 61,681.				
	Excess from 2017 66, 369.				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Form **990-PF** (2020)

Рa	rt XIV Private Op	erating Foundations	s (see instructions ar	nd Part VII-A, questio	on 9)	NO	r Appl	ICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	iting			
	foundation, and the rulin	g is effective for 2020, e	nter the date of the ruling		▶			
b	Check box to indicate	whether the foundation	is a private operating t	foundation described in	section	4942(j)(3)	or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(-) 7	
	justed net income from Part	(a) 2020	(b) 2019	(c) 2018	(d) 20	17	(e) i	Γotal
	I or the minimum investment							
	return from Part X for each year listed							
b	85% of line 2a							
	Qualifying distributions from Part							
·	XII, line 4, for each year listed							
d	Amounts included in line 2c not							
	used directly for active conduct of exempt activities							
е	Qualifying distributions made							
	directly for active conduct of							
	exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
а	alternative test relied upon: • • "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 invest-							
	ment return shown in Part X, line 6, for each year listed							
С	"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 sup-							
	port from an exempt organization							
	(4) Gross investment income							
Pa	rt XV Suppleme	ntary Information (Complete this part	only if the founda	tion had \$	5,000 or n	nore in	assets at
		luring the year - see						
1	Information Regardin	-						• • •
а	List any managers of before the close of any						by the	toundation
	_		ley have contributed h	1101e tilali \$5,000). (36	e section 50	/ (u)(z).)		
_	SUSAN NOYES		400/					
b	List any managers of ownership of a partner					n equally la	arge por	tion of the
	Ownership of a partile	iship of other entity) of	willon the loundation	rias a 10 % or greater	interest.			
	3.T / 73							
2	N/A Information Regardin	a Contribution Grant	Gift Loon Scholarch	in ata Bragrama:				
2		-						
	Check here ▶ if t							
	unsolicited requests for complete items 2a, b,			ints, etc., to individual	is or organiz	ations unde	er otner	conditions,
_	The name, address, a			o norson to whom ann	lications shou	ıld bo addra	acod:	
a		ind telephone number	or email address or th	ie person to whom app	nications snot	ilu be addres	sseu.	
h	The form in which app	dications should be sul	amitted and information	on and materials they	should includ	٥.		
IJ	The form in willon app	moditions should be sul	ommica and informatio	m and materials tiley :	onoula molaa	.		
_	Any submission deadli	ines:						
·	, ary subminission deadil							
d	Any restrictions or li	imitations on awards	. such as by geogra	aphical areas, charita	ble fields k	inds of ins	stitutions	. or other
-	factors:		, 222 40 by googic		110100, 1	01 1110		,

JSA 0E1490 1.000 5787CU 1274 Form **990-PF** (2020) V 20-4.6F

Page 11
Part XV Supplementary Information (continued)

Cupplementary information (<i>continuca</i>			
3 Grants and Contributions Paid Duri	ing the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	rooipioni		
a r ala daling the year				
ATCH 5				
AICH 5				
				20.006
Total			> 3a	20,896.
b Approved for future payment				
			L	
Total			▶ 3b	I

Form 990-PF (2020)

Part XVI-A Analysis of Income-Producing Activities Page **12**

Enter gross amounts unless otherwise indicated.		ated business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
•					(======================================
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	1.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
0 Gross profit or (loss) from sales of inventory					
1 Other revenue: a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)				1.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1.
See worksheet in line 13 instructions to verify calc					
Part XVI-B Relationship of Activitie	s to the A	ccomplishment of Ex	xempt Pur	poses	
Explain below how each activit accomplishment of the foundation	-		-	- T	

Form **990-PF** (2020)

Page **13** Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Part XVII **Organizations**

1	Did the	e organization directl	ly or indirectly e	engage in any	of the following	g with any oth	ner organization	described		Yes	No
		tion 501(c) (other	than section	501(c)(3) org	ganizations) or	in section 5	527, relating to	political			
	organiz	zations?									
а		ers from the reporting	-								
		sh							1a(1)		X
	(2) Oth	ner assets							1a(2)		X
b	_	ransactions:									
		es of assets to a nor							1b(1)		X
		chases of assets fro							1b(2)		X
		ntal of facilities, equi							1b(3)		X
		imbursement arrange									X
		ans or loan guarantee									X
		formance of service		-	-			T I			X
		g of facilities, equipm	_								X
d		answer to any of th		•	•			•			
		of the goods, other a									
	value i	n any transaction or				1					
(a) L	ine no.	(b) Amount involved	(c) Name of no	oncharitable exem	pt organization		on of transfers, transac	ctions, and shari	ng arra	ngemei	nts
		N/A				N/A					
2a	Is the	foundation directly of	or indirectly affi	liated with, o	r related to, on	e or more tax	k-exempt organiz	zations			
		ped in section 501(c)	-						Ye	sX	No
b		," complete the follow	•	()().	,			_			_
		(a) Name of organization		(b) Typ	e of organization		(c) Descrip	tion of relationsh	nip		
		penalties of perjury, I decla						of my knowledge	and b	elief, it	is true,
\ !	I	t, and complete. Declaration of	preparer (other than ta	xpayer) is based on a	II information of which	preparer has any kno	wledge.				
Sigi								May the IRS with the pre			
ler	e Sign	nature of officer or trustee		Date	<i>'</i>	Title		See instructions		п г	No
		Print/Type preparer's nar	me	Preparer's sig	n/ature/	/ . / Da	ate Ch	eck if P	TIN		
Paid	t	JENNIFER D RHO		Jenny	, , , , , , , ,	derick	0=110101		003	9573	5
re	parer		NST & YOUNG	U.S. LLP			Firm's EIN	24 (5			
	Only		1 MONUMENT		TE 4000		FIIIISEII	, 🕶		-	
	,	1	DIANAPOLIS,			46204	Phone no	317-68	1-70	000	
		1 111				10201	Frione no	·			(2020)

0E1493 1.000 5787CU 1274 V 20-4.6F PAGE 14

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

Name of the organization

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Employer identification number

MAKE IT BETTER FOUNDATION 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 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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

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).

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

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		Person X
	1046 MICHIGAN AVE	\$	Payroll Noncash
	WILMETTE, IL 60091		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MAKE IT BETTER MEDIA GROUP		Person X
	203 NORTH LASALLE STREET, SUITE 2100	\$\$1,307.	Payroll Noncash
	CHICAGO, IL 60601	_	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization MAKE IT BETTER FOUNDATION

Employer identification number 27-0773475

Part II	Noncash Property	(see instructions)	Use duplicate co	pies of Part II if additiona	I space is needed
	14011Ca3111 TOPCILY		i. Osc auplicate co	pics of i art if if additiona	i apace la riccucu.

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

Name of organization MAKE IT BETTER FOUNDATION

Employer identification number 27-0773475

	(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of \$1,000 or less for the Use duplicate copies of \$1,000 or less for the Use d	the year from any one ons completing Part III, e e year. (Enter this inform	contributor. Center the total c	complete columns (a) through (e) and of exclusively religious, charitable, etc.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address, an	(e) Transfer of o		ship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	ı	(d) Description of how gift is held		
		(e) Transfer of g	gift			
	Transferee's name, address, an	nd ZIP + 4	Relation	ship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(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						
(a) No. from Part I	(b) Purpose of gift	(c) Use of giff	t	(d) Description of how gift is held		
	Transferee's name, address, an	(e) Transfer of ç		iship 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 TMPACT:

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.

5787CU 1274 V 20-4.6F PAGE 21

	CHARITABLE PURPOSES	5,717.	5,717.
	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME		
II.	REVENUE AND EXPENSES PER BOOKS	5,717.	5,717.
FORM 990PF, PART I - ACCOUNTING FEES			TOTALS
FORM 990PF, PART I	DESCRIPTION	ACCOUNTING FEES	

V 20-4.6F

5787CU 1274

ATTACHMENT 1 PAGE 22

\sim	J
E	
'7	1
-	7
Ē	
>	7
_	٠
т	
_	4
\mathcal{C}	
A	1
⊿ E	1
TNEMHUALL	7 7 7
A T T T	T T T T T

R P R N R R R	
F	,
—	
λ R	1,111
РЯ,	
6	

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

ATTACHMENT 2 PAGE 23

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

V 20-4.6F

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/

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

5787CU 1274 V 20-4.6F PAGE 25

27-0773475 2020 FORM 990-PF MAKE IT BETTER FOUNDATION

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

AMOUNT	16,000.	4,198.	8 9
PURPOSE OF GRANT OR CONTRIBUTION	PROVIDE WINTER CLOTHES FOR NEEDY	PROVIDE WINTER CLOTHES FOR NEEDY	PROVIDE WINTER CLOTHES FOR NEEDY
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A
	PC	PC	PC
RECIPIENT NAME AND ADDRESS	CRADLES TO CRAYONS	FAMILY EMPOWERMENT CENTERS	SARAH'S CIRCLE
	4141 W GEORGE ST	1533 WEST DEVON AVENUE	4838 N SHERIDAN ROAD
	CHICAGO, IL 60641	CHICAGO, IL 60660	CHICAGO, IL 60640

20,896.

TOTAL CONTRIBUTIONS PAID

V 20-4.6F

5787CU 1274