PUBLIC INSPECTION COPY

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.

For calendar year 2019 or tax year beginning , 2019, and ending , 2								, 20		
Na	ame of	foundation							A Employer identifi	cation number
	MAK:	E IT BETTER FOUNDATION							27-0773475	5
Νι	umber	and street (or P.O. box number if mail is not delivere	to stre	et ad	dress)		Room/suit	te	B Telephone number	er (see instructions)
	115	O WILMETTE AVE							(847) 25	6-4642
Ci	ty or to	own, state or province, country, and ZIP or foreign po	stal cod	e						_
									C If exemption applica pending, check here	tion is
_		METTE, IL 60091							1 3,	
G	Che	ck all that apply: Initial return			Initial return	of a former p	oublic cha	rity	D 1. Foreign organizat	ions, check here
		Final return			Amended re	turn			2. Foreign organiza	
		Address change			Name chang				85% test, check h computation	ere and attach
H	Che	eck type of organization: X Section 50	1(c <u>)(</u> 3	<u>)</u> ex	empt private f	oundation			E If private foundation	status was terminated
	s	ection 4947(a)(1) nonexempt charitable trust		_	her taxable pr				•)(1)(A), check here
I	Fair	market value of all assets at J Ac	ounti	ng r	nethod: X C	ash Acc	crual		F If the foundation is	in a 60-month termination
		• , , , , , , , , , , , , , , , , , , ,		٠.	ecify)				under section 507(b)	(1)(B), check here
_				mn (d), must be on c	ash basis.)				
j	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	ie	(a) F	Revenue and	(b) Net inv	estment	1	c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in		ex	benses per books	incon		, ,	income	purposes
_		column (a) (see instructions).)								(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			87,709.					
	2	Check tri the foundation is not required to attach Sch. B.								
	3	Interest on savings and temporary cash investments	•		6.		6.			
	4	Dividends and interest from securities	• 📖							
	5a	Gross rents	•							
	l	Net rental income or (loss)								
Revenue	6a	b Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all								
é	~	assets on line 6a					0.			
Ş	7	Capital gain net income (from Part IV, line 2)					0.			
	8	Net short-term capital gain								
	9 10a	Income modifications	•							
		and allowances								
		Less: Cost of goods sold								
		Gross profit or (loss) (attach schedule) Other income (attach schedule) ATCH 1			9,350.					
	11 12	Total. Add lines 1 through 11			97,065.		6.		0.	
_	13	Compensation of officers, directors, trustees, etc.			40,938.					40,938.
es		Other employee salaries and wages								
ns	15	Pension plans, employee benefits								
g	16a	Legal fees (attach schedule)								
ŵ	b	Accounting fees (attach schedule)ATCH 2			7,972.					7,972
š	c	Other professional fees (attach schedule)								
ati	17	Interest								
ist	18	Taxes (attach schedule) (see instructions).								
Ë	19	Depreciation (attach schedule) and depletion								
둳	20	Occupancy								
₹ D	21	Travel, conferences, and meetings	. 🗀							
aŭ	14 15 16a b c 17 18 19 20 21	Printing and publications								
ğ	23	Other expenses (attach schedule)ATCH 3			32,343.					32,343
aţi	23 24 25	Total operating and administrative expense								
ě		Add lines 13 through 23			81,253.					81,253
Ö	25	Contributions, gifts, grants paid			16,618.					16,618
_	26	Total expenses and disbursements. Add lines 24 and 2			97,871.		0.		0.	97,871
	27	Subtract line 26 from line 12:								
	а	Excess of revenue over expenses and disbursement	· 🖳		-806.					
	b	Net investment income (if negative, enter -0-)				6.			
		Adjusted net income (if negative enter -0-)						1	0	

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Part I	Balance Sheets Attached schedules and amounts in the	Beginning of year	End of	year
	description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	3,794.	2,988.	2,988.
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 ▶			
ssets 6 8	Inventories for sale or use			
SS 9	Prepaid expenses and deferred charges			
⋖ 10a	Investments - U.S. and state government obligations (attach schedule)			
b	Investments - corporate stock (attach schedule)			
4. 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			
	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)	3,794.	2,988.	2,988.
17	Accounts payable and accrued expenses			
18	Grants payable			
8 19	Deferred revenue			
20 21 22 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons.			
<u>e</u> 21	Mortgages and other notes payable (attach schedule)			
- 22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
S	Foundations that follow FASB ASC 958, check here			
ပ္	and complete lines 24, 25, 29, and 30.			
24	Net assets without donor restrictions			
č 25	Net assets with donor restrictions			
힡	Foundations that do not follow FASB ASC 958, check here			
24 25 25 26	and complete lines 26 through 30.			
	Capital stock, trust principal, or current funds			
<u>왕</u> 27	Paid-in or capital surplus, or land, bldg., and equipment fund	2 724	2 222	
Assets 28 29 29	Retained earnings, accumulated income, endowment, or other funds	3,794.	2,988.	
Ž 29	Total net assets or fund balances (see instructions)	3,794.	2,988.	
30 30	Total liabilities and net assets/fund balances (see	2 524	2 222	
	instructions)	3,794.	2,988.	
	Analysis of Changes in Net Assets or Fund Balan			
	al net assets or fund balances at beginning of year - Part II		-	2 56:
	I-of-year figure reported on prior year's return)			3,794.
	er amount from Part I, line 27a			-806
	er increases not included in line 2 (itemize) ▶			0.000
	d lines 1, 2, and 3			2,988.
	creases not included in line 2 (itemize)		5	2 000
6 Tot	al net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b)	, line 29 6	2,988.

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Part IV Capital Gains	s and Losses for Tax on Inve	estment Income			Page -
	escribe the kind(s) of property sold (for e		(b) How acquired	(c) Date acquired	(d) Date sold
	orick warehouse; or common stock, 200		P - Purchase D - Donation	(mo., day, yr.)	(mo., day, yr.)
1 a					
b					
С					
d					
е	1				
(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	
a					
b					
С					
d					
Complete only for exacts a	lshowing gain in column (h) and owned	by the foundation on 12/21/60			
Complete only for assets s			, ,	Gains (Col. (h) ga (k), but not less t	
(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	COI.	Losses (from co	
a					
b					
С					
d					
е		l ain, also enter in Part I, line 7)			
For optional use by domesti		e section 4940(a) tax on net invest	ment inco	_]
	the section 4942 tax on the distrib n't qualify under section 4940(e). D		ase perio	d?	」Yes □X □ No
	mount in each column for each yea		ng any er	ntries	
(a)	(b)	(c)	lig driy or	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col. (b) divided by	itio col. (c))
2018	79,527.	9,790.			8.123289
2017	66,562.	3,869.		1	7.203929
2016	61,983.	6,041.		1	0.260387
2015	92,486.	8,450.		1	0.945089
2014	158,533.	29,273.			5.415673
2 Total of line 1, column ((d)		2	5	1.948367
3 Average distribution rat	io for the 5-year base period - divide	e the total on line 2 by 5.0, or by			
the number of years the	foundation has been in existence i	if less than 5 years	3	1	0.389673
4 Enter the net value of n	oncharitable-use assets for 2019 fi	rom Part X, line 5	4		11,848.
			5		123,097.
	nent income (1% of Part I, line 27b).		6		
	·				123,097.
			7		
8 Enter qualifying distribution If line 8 is equal to or or	tions from Part XII, line 4	in Part VI, line 1b, and complete	8 that part	using a 1% tax	97,871. k rate. See th

JSA 9E1430 1.000 5787CU 1274

Part VI instructions.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)		
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	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.		
	here and enter 1% of Part I, line 27b	(
С	All other domestic foundations enter 2% 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	2019 estimated tax payments and 2018 overpayment credited to 2019 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
С.	Tax paid with application for extension of time to file (Form 8868) 6c Backup withholding erroneously withheld 6d					
d				0.		
7	Total disease and payments is an analysis of the transfer of t					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.		
9	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.					
10 11	Enter the amount of line 10 to be: Credited to 2020 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		Х		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition	1b		Х		
	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		X		
d	d 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			7,7		
	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				
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N.	/A X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		21		
•	If "Yes," attach the statement required by <i>General Instruction T</i> .					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or Proceeding that affectively amends the governing instrument as that he mandatory directions that					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Х			
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	7	Х			
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	-				
	IL,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		V			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"			X		
	complete Part XIV	9		- 21		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х		

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Par	t 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		X
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	-4642	2	
	Located at ▶1150 WILMETTE AVE WILMETTE, IL ZIP+4 ▶ 60091			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N/A	🕨	
	and enter the amount of tax-exempt interest received or accrued during the year	N/A		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	<i></i>	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Par	t 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	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			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	41-		Х
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	10		Х
_	were not corrected before the first day of the tax year beginning in 2019?	1c		21
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	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ , , , ,			
h	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	N/	Ά
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	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	of If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b	N/	'A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

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T GI	t VII-B	Statements Regarding Activities			un du (donanda)			
5a	During the	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	o		
	(2) Influe	nce the outcome of any specific public ele	ection (see section	4955); or to carry or	1,			
	directl	y or indirectly, any voter registration drive?			Yes X No	o		
		e a grant to an individual for travel, study, or c			7.7	o		
	(4) Provid	e a grant to an organization other than a	charitable, etc., ord	ganization described i	n			
	` ,	n 4945(d)(4)(A)? See instructions				o		
		e for any purpose other than religious, ch						
		ses, or for the prevention of cruelty to children		•				
b		swer is "Yes" to 5a(1)-(5), did any of the				n		
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions							
	-	ons relying on a current notice regarding disas	-				N,	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax								
_		maintained expenditure responsibility for the		•				
		ttach the statement required by Regulations s	-					
6a		oundation, during the year, receive any fur	` ,	ectly to pay premiur	ns			
		nal benefit contract?	•					
b		undation, during the year, pay premiums, dire				6b		Х
		6b, file Form 8870.	<i>,</i> , , , , , , , , , , , , , , , , , ,	•		•		
7a		e during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes X No			
b		id the foundation receive any proceeds or ha			- — —		N,	/A
8	· · · · · · · · · · · · · · · · · · ·							
		ion or excess parachute payment(s) during the	• •		Yes X No			
Pai	t VIII	Information About Officers, Directo	rs, Trustees, Fou	undation Managers	s, Highly Paid Em	ployees,		
1	List all of	and Contractors ficers, directors, trustees, and foundat	ion managore and	their compensation	Soo instructions			
	LIST AII OI		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e accol	ınt
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	owance	s,
ATCI	I 4			40,938.	0.			0.
2		ation of five highest-paid employees	(other than thos	se included on line	e 1 - see instructi	ions). If n	one,	enter
2	Compens	ation of five highest-paid employees	·	se included on line		ions). If n	one,	enter
	"NONE."	ation of five highest-paid employees	(b) Title, and average hours per week	se included on line (c) Compensation	(d) Contributions to employee benefit	(e) Expens	se accou	ınt,
	"NONE."		(b) Title, and average		(d) Contributions to	-	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE."		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a		(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,
(a)	"NONE." Name and a NONE		(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens	se accou	ınt,

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Form 990-PF (2019) Page 7 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 **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. PHILANTHROPY AWARDS CEREMONY - PLEASE SEE GENERAL EXPLANATION ATTACHMENT. 48,816. 2 Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 NONE

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3 NONE

All other program-related investments. See instructions.

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundations,	
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	
b	Average of monthly cash balances	1b	12,028.
С	Fair market value of all other assets (see instructions).	1c	
d		1d	12,028.
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	12,028.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	180.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,848.
6	Minimum investment return. Enter 5% of line 5	6	592.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.)	ndations	
1	Minimum investment return from Part X, line 6	1	592.
2 a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (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	592.
4	Recoveries of amounts treated as qualifying distributions.	4	9,350.
5	Add lines 3 and 4	5	9,942.
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	9,942.
Pa	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	97,871.
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	97,871.
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	97,871.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		e foundation

Form **990-PF** (2019)

Page 8

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

Form 990-PF (2019) Page **9**

Form	n 990-PF (2019)				Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
•	line 7				9,942.
2	Undistributed income, if any, as of the end of 2019:				
	Enter amount for 2018 only.				
	Total for prior years: 20 17,20 16,20 15				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015 92,063.				
С	From 2016 61,681.				
d	From 2017				
	From 2018	456.010			
	Total of lines 3a through e	456,219.			
4	Qualifying distributions for 2019 from Part XII, line 4: \(\) \(
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2019 distributable amount				9,942.
	Remaining amount distributed out of corpus	87,929.			
5	Excess distributions carryover applied to 2019 (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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	544,148.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
u	amount - see instructions				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				
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 2014 not applied on line 5 or line 7 (see instructions)	157,069.			
9	Excess distributions carryover to 2020.	207 070			
	Subtract lines 7 and 8 from line 6a	387,079.			
	Analysis of line 9:				
	Excess from 2015				
	66 369				
	70 027				
	EXCESS HOIII 2010				
e	Excess from 2019 87,929.				

Form **990-PF** (2019)

MAKE IT BETTER FOUNDATION COPY

Form	990-PF (2019)	MAKE IT B	ETTER FOUNDATION	HON COPY		27-0	77347	75 Page 10
Pa	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NO	IGA TC	PLICABLE
1 a	If the foundation has i	received a ruling or d	etermination letter that	it is a private opera	ating			
	foundation, and the ruling	g is effective for 2019, e	nter the date of the ruling		▶			
b	Check box to indicate v					4942(j)(3) or	4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years				
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d) 2016	;	((e) Total
	I or the minimum investment		,					
	return from Part X for each							
L	year listed							
	85% of line 2a							
С	Qualifying distributions from Part XII, line 4, for each year listed							
d	Amounts included in line 2c not used directly for active conduct							
е	of exempt activities							
	directly for active conduct of exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
_	alternative test relied upon:							
а	"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		ntary Information (only if the founda	ation had \$5	,000 or	more	in assets at
	any time d	uring the year - seè	instructions.)	•				
1	Information Regarding	g Foundation Manage	rs:					
а	List any managers of						ed by the	he foundation
	before the close of any	tax year (but only if th	ey have contributed n	nore than \$5,000). (S	ee section 507	(d)(2).)		
	SUSAN NOYES							
b	List any managers of	the foundation who	own 10% or more of	the stock of a corp	oration (or an	equally	large p	ortion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest.			
	N/A							
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:				
	Check here ▶ if the time of time of the time of time of the time of time of time of the time of t	- he foundation only i	makes contributions	to preselected char	itable organiza	ations ar	nd doe	s not accent
	unsolicited requests for complete items 2a, b, c	or funds. If the found	ation makes gifts, gra					
_	The name, address, a			e nerson to whom on	olications chould	he addr	occod.	
а		na telephone namber	or email address or th	ie person to whom app	Dilcations should	i be addi	esseu.	
J.	ATCH 5	lications should be au-	amitted and information	on and materials they	should include:			
D	The form in which appl	แบลแบบร รับเบนเน มัย Sul	omitted and informatio	m and materials they	SHOULU HICHUGE:			
	ATCH 6							
С	Any submission deadli	nes:						
	ATCH 7							
d	Any restrictions or life factors:	mitations on awards	, such as by geogra	aphical areas, charita	able fields, kir	ıds of ii	nstitutio	ons, or other
	ATCH 8							

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Form **990-PF** (2019)

IT BETTER FOUNDATION 27-0773475

Supplementary Information (continued) Part XV **Grants and Contributions Paid During the Year or Approved for Future Payment** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of Recipient Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year ATCH 9 16,618. **b** Approved for future payment Total

Form 990-PF (2019)

Page **11**

27-0773475

Form 990-PF (2019) Page **12**

Part XVI	-A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated.	Unrela	ated business income	Excluded b	y section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
-						(
. —						
	and contracts from government agencies					
	ship dues and assessments			14	6.	
	on savings and temporary cash investments					
	ds and interest from securities					
	tal income or (loss) from real estate:					
	delth fire and a great and a second					
	debt-financed property					
	al income or (loss) from personal property					
	vestment income					
	loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory			01	9,350.	
	evenue: a REIMBURSEMENT			01	7,550.	
е					9,356.	
	I. Add columns (b), (d), and (e)					9,356.
	dd line 12, columns (b), (d), and (e) • • heet in line 13 instructions to verify calc			• • • • • •	13	9,330
Part XVI-			accomplishment of F	vammt Dur		
			•	<u>-</u>	-	
Line No.	Explain below how each activit	-	· ·	-		•
lacktriangle	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	g funds for such purpose	s). (See instructions.)
	N/A					

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

1	Did the	e organization direct	ly or indirectly	engage in any o	f the following	g with an	y other organ	zation d	escribed		Yes	No
		ction 501(c) (other	than section	501(c)(3) orga	nizations) or	in secti	on 527, rela	ting to	political			
	organiz	zations?										
а		ers from the reportin	-									
		sh								1a(1)		X
	(2) Oth	ner assets								1a(2)		X
b	Other t	transactions:										
	(1) Sal	les of assets to a no	ncharitable exe	mpt organization.						1b(1)		X
	(2) Pui	rchases of assets fro	om a noncharita	able exempt organ	nization					1b(2)		X
	(3) Re	ntal of facilities, equi	pment, or other	assets						1b(3)		X
	(4) Re	imbursement arrange	ements							1b(4)		X
	(5) Loa	ans or loan guarantee	s							1b(5)		X
	(6) Per	rformance of service	s or membersh	nip or fundraising	solicitations .					1b(6)		X
С	Sharin	g of facilities, equipm	ent, mailing list	s, other assets, o	or paid employ	ees				1c		X
d	If the	answer to any of th	e above is "Ye	s," complete the	following so	hedule. (Column (b) sh	ould alv	ays show	the	fair m	narket
	value o	of the goods, other	assets, or servi	ces given by the	reporting for	undation.	If the founda	tion rec	eived less	than	fair m	narket
	value i	n any transaction or	sharing arrang	gement, show in	column (d) th	ne value	of the goods,	other as	sets, or se	ervice	s rec	eived.
(a) L	ine no.	(b) Amount involved	(c) Name of r	noncharitable exempt	organization	(d) Des	cription of transfer	s, transacti	ons, and shar	ing arra	ingeme	nts
		N/A				N/A						
2a	Is the	foundation directly	or indirectly af	filiated with, or r	elated to, one	e or mor	e tax-exempt	organiza	itions			
	describ	ped in section 501(c)	(other than see	ction 501(c)(3)) c	r in section 52	27?				Ye	es X	No
b	If "Yes	," complete the follow	wing schedule.									
		(a) Name of organization	า	(b) Type	of organization		(c) Description of relations			hip		
		penalties of perjury, I decla ct, and complete. Declaration of						the best of	my knowledg	e and b	elief, it	is true,
Sig	I	,a sopioto. Dociaration of	p. sparsi (suite triali t					ſ	May the IRS	discus	s this	return
_						EXECU	JTIVE DIRE	CTOR	with the pre			below?
ler	e Sigr	nature of officer or trustee		Date		Title			See instructions	s. X	Yes	No
Paid	4	Print/Type preparer's nar	me	Preparer's signa	ture DI.	1	Date	Che	~ L I I I	TIN		
		JENNIFER D RHC			OLhin	unick	07/07/2	J self-	. ,	2003		5
	parer		NST & YOUNG				F	irm's EIN	▶ 34-65	6559	96	
Jse	Only	Firm's address ▶ 11	1 MONUMENT	CIRCLE, STE	4000							
		IN	DIANAPOLIS	, IN		462	204 F	Phone no.	317-68			
									For	m 99 0)-PF	(2019)

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

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Schedule of Contributors

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

Name of the organization

MAKE IT BETTER FOUNDATION

Organization type (check one):

Department of the Treasury Internal 733, 10111 336-17.

Solution 1336-17.

Employer identification number 27-0773475

Organiza	tion type (check one):	·
Filers of:		Section:
Form 990	0 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	X 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 cov	vered by the General Rule or a Special Rule .
•	ly a section 501(c)(7),	(8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General I	Rule	
X		ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a tributions.
Special F	Rules	
	regulations under sect 13, 16a, or 16b, and the	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one eyear, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, I purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
	contributor, during the contributions totaled in during the year for an General Rule applies t	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such nore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions are 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).

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) (2019)

JSA

Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization MAKE IT BETTER FOUNDATION

Employer identification number 27-0773475

Parti	Contributors (see instructions). Use duplicate copies of	n Part i il additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	SUSAN NOYES 1046 MICHIGAN AVE	\$55,876.	Person X 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	PATRICK G. & SHIRLEY W. RYAN FOUNDATION 150 N. MICHIGAN AVE., STE. 2100	_ \$10,000.	Person X 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
3	JP MORGAN CHASE & COMPANY 10 S DEARBORN ST CHICAGO, IL 60603	\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	KIRKLAND & ELLIS LLP 23230 CHAGRIN BLVD STE 225 CLEVELAND, OH 44122	\$8,334.	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.)

Page 3

Name of organization MAKE IT BETTER FOUNDATION

Employer identification number 27-0773475

art II	Noncash Property	(see instructions).	Use duplicate co	pies of Part II if additio	nal space is needed.
--------	------------------	---------------------	------------------	----------------------------	----------------------

(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
		\$	

Employer identification number

Name of organization MAKE IT BETTER FOUNDATION

				27-0773475			
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organization	the year from any	one contributor.	Complete columns (a) through (e) and			
	contributions of \$1,000 or less for the	e year. (Enter this ir	formation once. S				
(a) No.	Use duplicate copies of Part III if additi			1			
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
				-			
		(e) Trans	fer of gift				
	Transferee's name, address, an	id ZIP + 4	Relatio	onship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Part I							
		(a) Tubus	t				
		(e) Trans	rer or gift				
	Transferee's name, address, an	d ZIP + 4	Relation	onship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use	of sift	(d) Description of how gift is held			
Part I	(b) Ful pose of gift	(c) use	or girt	(a) Description of now girt is field			
		(e) Trans	fer of gift				
	Transferee's name, address, an	d 7IP + 4	Polatic	onship of transferor to transferee			
	Transieree's frame, address, an	u ZIF T T	Kelatik	manip of transferor to transferee			
(a) No.				1			
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Faiti							
	(e) Transfer of gift						
		(5)	- - 				
	Transferee's name, address, an	d ZIP + 4	Relatio	onship of transferor to transferee			

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

GENERAL EXPLANATION ATTACHMENT

PART IX-A, CHARITABLE ACTIVITY

IN 2019, MAKE IT BETTER FOUNDATION CONDUCTED THEIR 7TH ANNUAL PHILANTHROPY AWARDS COMPETITION. NOMINEES SUBMIT THEIR APPLICATION VIA LINKS THROUGH MIBF WEBSITE. THEIR PRIZE INCLUDES PROFESSIONAL PRODUCED VIDEOS AND ARTICLES THAT BRING TO LIFE THEIR MISSIONS AND DEMONSTRATE THAT DONATED DOLLARS BY THE COMMUNITY ARE WELL SPENT. (VALUE \$10,000)

$\Box \Box \Box \Box \Box \Box \Box$	CATEGORIES	ΔMD	2019	WINNERS	INCLUDE:

CATEGORY	ORGANIZATION NAME	ORGANIZATION ADDRESS
EDUC & ARTS	CRADLES TO CRAYONS	4141 W GEORGE ST, CHICAGO, IL 60641
EDUC & ARTS	THE PEOPLE'S MUSIC SCHOOL	931 W EASTWOOD AVE,
SOCIAL JUSTICE	SELAH FREEDOM, INC	CHICAGO IL 60641 PO BOX 21415, SARASOTA FL 34276
HUMAN SERV & EMP	KESHET	600 ACADEMY DRIVE, STE. 130, NORTHBROOK IL 60062

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 - OTHER INCOME

REVENUE

AND EXPENSES NET INVESTMENT ADJUSTED NET

DESCRIPTION

REIMBURSEMENT

PER BOOKS 9,350.

INCOME

INCOME

TOTALS

9,350.

ATTACHMENT 1

PAGE 21

ATTACHMENT Z

	FORM	990PF,	PART	Ι	_	ACCOUNTING	FEES
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DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT _INCOME_	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES		7,972.			7,972.
	TOTALS =	7,972.			7,972.

ATTACHMENT 3

FORM 990PF, PART I - OTHER EXPENSES

	REVENUE			
	AND	NET	ADJUSTED	
	EXPENSES	INVESTMENT	NET	CHARITABLE
DESCRIPTION	PER BOOKS	INCOME	INCOME	PURPOSES
BANK SERVICE CHARGES	25.			25.
FILING FEES	115.			115.
NONPROFIT MARKETING VIDEO EXP	32,198.			32,198.
MISCELLANEOUS EXPENSES	5.			5.
TOTALS	32,343.			32,343.

27-0773475

TORY 99011, THE VIII BIST OF OFFICERO, BIRDCHORD, TWO IROSTEDS	FORM 990PF	', PART VIII -	LIST OF OFFICERS,	DIRECTORS, AND TRUSTEES	ATTACHMENT 4	
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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SHARON P. KRONE 1150 WILMETTE AVE WILMETTE, IL 60091	EXECUTIVE DIRECTOR & SECRETARY 1.00	40,938.	0.	0.
SANDY TSUCHIDA 1150 WILMETTE AVE WILMETTE, IL 60091	TREASURER 1.00	0.	0.	0.
SUSAN NOYES 1150 WILMETTE AVE WILMETTE, IL 60091	DIRECTOR 1.00	0.	0.	0.
FRANCIA HARRINGTON 1150 WILMETTE AVE WILMETTE, IL 60091	ADVISOR TO THE BOARD 1.00	0.	0.	0.
	GRAND TOTALS	40,938.	0.	0.

ATTACHMENT 5

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

MIBF ATTN: SHARON KRONE 1150 WILMETTE AVE. WILMETTE, IL 60091 847-256-4642

2019 FORM 990-PF MAKE IT BETTER FOUNDATION

ATTACHMENT 6

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

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

2018 FORM 990-PF MAKE IT BETTER FOUNDATION

ATTACHMENT 7

990PF, PART XV - SUBMISSION DEADLINES

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

ATTACHMENT 8

990PF, PART XV - 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

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

			ATTACHMENT 9
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
A SAFE HAVEN FOUNDATION	N/A	PROVIDE WINTER CLOTHES FOR NEEDY	3,309.
2750 ROOSEVELT ROAD	PC		
CHICAGO, IL 60608			
FAMILY EMPOWERMENT CENTERS	N/A	PROVIDE WINTER CLOTHES FOR NEEDY	3,309.
1533 WEST DEVON AVENUE	PC		
CHICAGO, IL 60660			
CRADLES TO CRAYONS	N/A	GENERAL SUPPORT	2,500.
4141 W GEORGE ST	PC		
CHICAGO, IL 60641			
THE PEOPLE'S MUSIC SCHOOL	N/A	GENERAL SUPPORT	2,500.
931 W EASTWOOD AVE	PC		
CHICAGO, IL 60641			
KESHET	N/A	GENERAL SUPPORT	2,500.
600 ACADEMY DRIVE	PC		
CHICAGO, IL 60062			
SELAH FREEDOM, INC	N/A	GENERAL SUPPORT	2,500.
PO BOX 21415	PC		
SARASOTA, FL 34276			

ATTACHMENT 9

V 19-5.2F

16,618.

TOTAL CONTRIBUTIONS PAID