RECEIVED

APPLICATION NUMBER

721

JAN 1 0 2018 Y OF CHICAGO

AN APPLICATION TO THE CHICAGO PLAN COMMISSION UNDER THE LAKE MICHIGAN AND CHICAGO EXPERINT PROTECTION ORDINANCE

(This Application Must Be Typewritten)

The Chicago Plan Commission has provided this Application in accordance with Section 194B-6.1(a) of the Lake Michigan and Chicago Lakefront Protection Ordinance. The Conditions under which the provisions of this Ordinance are applicable are stated in Section 194B-5.1 of the Ordinance. The process of Plan Commission review and public hearing on each proposal within the Lake Michigan and Chicago Lakefront Protection District will commence with the Applicant's submission, to the Chicago Plan Commission, of a completed Application and the required proof of notice. Strict compliance with Section 194B-6.1(c) is required.

The staff of the Department of Planning and Development is available to provide technical assistance to the Applicant, before preparation of the Application, during the process stages and to review the Application upon submission to the Chicago Plan Commission. Copies of the Ordinance, Application and examples of forms for both notification and proof of notice are available from the:

Department of Planning and Development City Hall 121 North LaSalle Street Room 905 Chicago, IL 60602 (312) 744-5777

This Application consists of five (5) parts:

- Part One General Information
- Part Two Character of the Proposal
- Part Three Zoning Information
- Part Four Potential Impact of the Proposal
- Part Five Disclosure Forms

A copy of this Application will be available for public inspection in City Hall, Room 905, five (5) days prior to the date of which the public meeting before the Chicago Plan Commission on this Application is to be held.

| SEC | CTION BELOW FOR OFFICE USE ONLY | | | |
|-------------------------------|--|-----------|----|--|
| Date of Receipt in DPD: | ZBA Action Necessary: | | No | |
| Date of Receipt in Buildings: | Type and Status: Disclosure Necessary: | | | |
| Date of Applicant Notice to | Disclosure Necessary: | Yes | No | |
| Taxpayers of Record: | | | | |
| Date Set for Public Hearing: | Simultaneous Planned Development Processing: | | | |
| | YesNo | | | |
| Date on which Plan Commission | Previous Application for this Address: | Yes | No | |
| Published Newspaper notice: | Application Number | | | |
| Date of Publication of Report | Zoning Map Amendment: | Yes | No | |
| of Commissioner of DPD: | | | | |
| Date Forwarded DIS: | Disposition: | | | |
| DSS: | Approved: | | | |
| CDOT: | Disapproved: | | | |
| PKD: | Continued: | | | |
| Other: | Date Applicant Notified of | Decision: | | |

GUIDELINES FOR COMPLETING PART ONE OF THE APPLICATION

Part One of this Application provides general information to the Chicago Plan Commission for use in preparing its public notices of the proposal set forth in the Application and in preparing its review of that proposal.

- 1. The date entered in (I.) should be the date on which the Application is filed.
- 2. The location of the site of the proposal should be given by street address; if there is no street address, the location must be described in relation to nearest existing streets, rights-of-way or other fixed points of reference.
- 3. The Applicant must state his own name, address and telephone number and the name, address and telephone number of the owner of the subject property (if different). The Applicant must be either the owner of the subject property or the owner's duly authorized agent or representative; if the Applicant is the owner's duly authorized agent or representative, the Applicant must submit proof to the Chicago Plan Commission at the time the Application is filed of such authorization.

Whenever the ownership of the subject property takes the form of something other than a singular living individual (partnership, corporation, trust, etc.) the Applicant shall so indicate. Furthermore, the Chicago Plan Commission may require disclosure of all parties having interest in the subject property.

- 4. The description of a proposal should include, at a minimum, types of land uses and space uses, floor area, number of dwelling units and structure height (in feet and stories). Any additional information describing the proposal should also be included.
- 5. Under the provisions of Section 194b-6.1(c) of the Lake Michigan and Chicago Lakefront Protection Ordinance, the Chicago Plan Commission will not accept an Application until the Applicant submits to the Chicago Plan Commission a list of names and last known addresses of the owners of all property on which notice must be served, the names and addresses of persons so served (if different), the method of service employed and a statement certifying that the Applicant has complied with all applicable noticing provisions in effect at the time of filing.
- 6. If there are any other approvals required from other public agencies before the Applicant can proceed with their proposal, those approvals must be listed; except that other City of Chicago licenses and permits may be omitted. If no other approvals are required, enter "NONE" under (VI. A.). Examples of items which should be listed include approvals from the:
 - United States Department of Housing and Urban Development Federal Housing Administration
 - United States Army Corps of Engineers
 - Federal Aviation Administration
 - State of Illinois Department of Natural Resources

PART ONE: GENERAL INFORMATION Ĭ. Date of Application: January 10, 2018 Address or Location of the Site of the Proposal: 1601 - 1629 East Midway Plaisance; II. 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Information on the Applicant and/or Owner: III. Applicant A. Name: The Barack Obama Foundation Phone: _____ 773-420-1700 Address: 5535 S. Harper Court, Suite 1140, Chicago, IL 60615 В. Owner (if different) Name: Chicago Park District Phone: 312-742-4290 Address: 541 N. Fairbanks Court If the Applicant is not the Owner, initial here x that proof has been C. attached to this Application that the Applicant is the duly authorized agent or representative of the Owner. D. If the ownership of the subject property takes the form of something other than a singular living individual (partnership, corporation, trust, etc.), please indicate such: Chicago Park District is an Illinois municipal corporation IV. Brief Description of the Proposal: See Part Two, Figure VI. Project Narrative. Initial here: X verifying that the noticing provisions of Section 194B-6.1(c) have been V. completed as they apply to the Applicant and this Application. VI. The Applicant must also obtain the following approvals, in addition to the approval of the Chicago Plan Commission (provide an addendum, if necessary): Nature of the Approval: Approval of Planned Development A. Agency: City Council

Agency: <u>led by Federal Highway Administration with the following cooperating agencies: National Park Service; Department of Interior/Fish & Wildlife; Army Corps; Advisory Council on Historic Preservation; Illinois Department of Transportation; State Historic Preservation Office; Chicago Park District; and City of Chicago</u>

Nature of the Approval: Federal Environmental Assessment and Historic Review

В.

GUIDELINES FOR COMPLETING PART TWO OF THE APPLICATION

All graphic materials must be submitted in an 8.5" x 11" format and must be suitable for clear and sharp, black and white production. Each map or diagram should have a scale and a north arrow. Each sheet of graphic material must be labeled with the appropriate figure number. If there are multiple sheets comprising one figure (for example figure 4), those sheets should be labeled consecutively (Figure 4-1, Figure 4-2, Figure 4-3, etc); and, each sheet should contain the address of the site of the proposal.

For Figure 1, the Applicant should consider the "vicinity of the site" to be at least as extensive as the area for which he is required to give notice, plus any intervening streets or other public rights-of-way.

For Figures 3 and 4, the Applicant should consider that "recreation areas" and "recreation space and facilities" include game courts, swimming pools and pool areas, game rooms, exercise rooms, party rooms, community rooms, observation decks and sun decks.

The required narrative statement should describe the features of the proposed development, including size and mix of dwelling units, mix of uses on the site, etc. It should present a basic rationale for the development.

For Figure 6, the Applicant is urged to provide any materials at 8.5" x 11" which will facilitate the review of the Application.

PART TWO: CHARACTER OF THE PROPOSAL

This portion of the Application must be completed by attaching the following items, correctly sized and labeled, to the Application.

- I. Figure 1: Map of the Vicinity of the Site, showing (and labeling) Lake Michigan, lakefront parks, preferential streets, schools, parks, major institutions and significant developments. All streets on this map should be labeled and all building footprints within the vicinity of the subject site should be outlined and all structure heights should be identified.
- II. Figure 2: Map of the Existing Site, showing locations and dimensions of lot lines, contour intervals (5'), existing structures, walkways, driveways and any other special features.
- III. Figure 3: <u>Proposed Site Plan</u> showing locations and dimensions of proposed structures, driveways walkways, parking areas, open space and recreational areas.
- IV. Figure 4: <u>Proposed Floor Plans</u>, including the ground floor, a typical floor and any floors with recreational space or facilities.
- V. Figure 5: <u>Elevation or Cross-Section</u>, showing the height and number of stories for all proposed structures.
- VI. Narrative: Statement Describing the Proposed Development.

The Applicant is encouraged to provide additional graphic materials, visual aids, photographs, full-color renderings, data tables, etc; any such exhibits should be labeled "Figure 6".

PART THREE: ZONING INFORMATION

The Applicant must provide the following data regarding zoning considerations for the site subject to this proposal; all applicable calculations must be provided via an addendum.

| I. | Is a Planned Development ordinance or an amendment to an existing Planned Development required or permitted in order to allow for the proposal on this subject site? | | | | |
|------|--|--------------------|-------------------------|--------------------------|---|
| | Required <u>x</u> | Perm | nitted | NA | _ |
| | If a Planned Developmer the designation, the App. Application. | | | ~ - | • |
| II. | Is a Zoning Board of Appeals approval of a variation or special use required or contemplated in order to allow for the proposal on the subject site? | | | | |
| | Yes | No | november / | | |
| | If Yes, please explain the nature of the matter that ZBA will need to consider: | | | | |
| III. | Square Feet of Net Site addendum, if necessary: Sub-Area I: Zoning Distr Sub-Area II: Zoning Dist Sub-Area III: Zoning Dist | ict Classification | Net S Net S Net S | Classification(s); provi | |
| IV. | Dwelling Units Maximum Units Allowed without Efficiency Units Maximum Units Allowed including Maximum Percentage of Efficiency Units | | | | |
| | Proposed Number of Dw Proposed Number of Effi Proposed Number of Total | ciency Units | | | |
| | Does the Applicant intend to increase allowable floor area by reducing the number of units constructed below the maximum allowed? | | | | |
| | Yes | No | | | |
| | If Yes, please specify the be reduced by an will be requested. | | | | |

| V. | Bulk | | | | | | |
|------|---|--|-----------------|--|--|--|--|
| | Base Floor Area Ratio, without Bonuses Proposed Floor Area Ratio, including all Bonuses List all Bonuses being requested: | | | | | | |
| | | | | | | | |
| | Proposed Floor Are Percentage of floor | Proposed Floor Area sq. ft. Percentage of floor area devoted to interior recreation space, meeting rooms, etc | | | | | |
| VI. | Off-street Parking and Loading | | | | | | |
| | Parking Spaces Loading Docks | Minimum Required | Number Proposed | | | | |
| VII. | Setbacks | | | | | | |
| | Front Yard Side Yard Rear Yard | Minimum Required | Number Proposed | | | | |

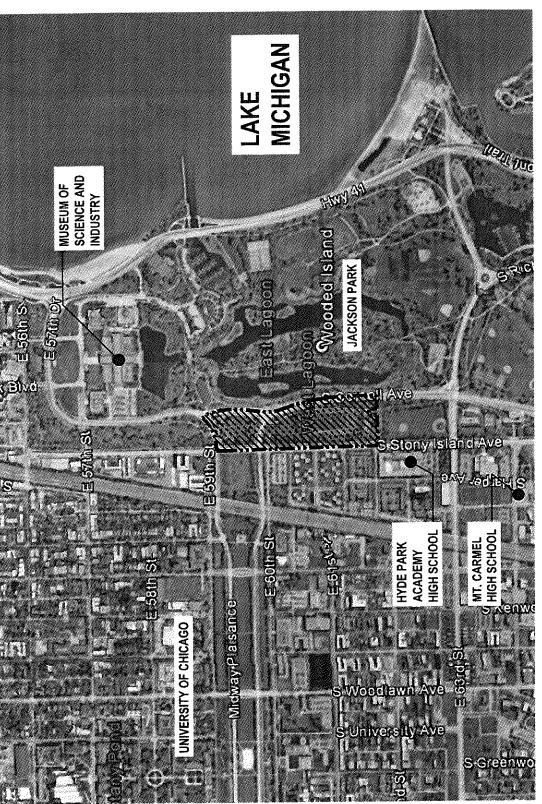
PART FOUR: POTENTIAL IMPACT OF THE PROPOSAL

The Chicago Plan Commission requires that the Applicant address the following Fourteen (14) Basic Policies of the Lakefront Plan of Chicago and the Thirteen (13) Purposes of the Lake Michigan and Chicago Lakefront Protection Ordinance in a written statement to the Commission attached to this Application and labeled as Part Four. The statement should indicate which Policies or Purposes are or are not applicable to the Applicant's proposal; and, for those Policies and Purposes which are applicable, the statements should discuss the potential impact of the proposal.

- I. Fourteen Basic Policies of the Lakefront Plan of Chicago
 - 1. Complete the publicly owned and locally controlled park system along the entire Chicago lakefront.
 - 2. Maintain and enhance the predominantly landscaped, spacious and continuous character of the lake shore parks.
 - 3. Continue to improve the water quality and ecological balance of Lake Michigan.
 - 4. Preserve the cultural, historical and recreational heritage of the lakeshore parks.
 - 5. Maintain and improve the formal character and open water vista of Grant Park with no new above-ground structures permitted.
 - 6. Increase the diversity of recreational opportunities while emphasizing lake-oriented leisure time activities.
 - 7. Protect and develop natural lakeshore park and water areas for wildlife habitation.
 - 8. Increase personal safety.
 - 9. Design all lake edges and lake construction to prevent detrimental shoreline erosion.
 - 10. Ensure a harmonious relationship between the lakeshore parks and the community edge, but in no instance will further private development be permitted east of Lake Shore Drive.
 - 11. Improve access to the lakeshore parks and reduce vehicular traffic on secondary park roads.
 - 12. Strengthen the parkway characteristics of Lake Shore Drive and prohibit a roadway of expressway standards.
 - 13. Ensure that all port, water supply and public facilities are designed to enhance lakefront character.
 - 14. Coordinate all public and private development within the water, park and community zones,

- II. Thirteen Purposes of the Lake Michigan and Chicago Lakefront Protection Ordinance
 - 1. To promote and protect the health, safety, comfort, convenience and general welfare of the people and to conserve our natural resources.
 - 2. To identify and establish the Lake Michigan and Chicago Lakefront Protection District and to divide that District into several zones wherein any and all development or construction, as specified in Article V hereinafter, shall be specifically restricted and regulated.
 - 3. To maintain and improve the purity and quality of the waters of Lake Michigan.
 - 4. To ensure that construction in the Lake, or modification of the existing shoreline shall not be permitted if such construction or modification would cause environmental or ecological damage to the Lake or would diminish water quality; and, to ensure that the life patterns of fish, migratory birds and other fauna are recognized and supported.
 - 5. To ensure that the Lakefront Parks and the Lake itself are devoted only to public purposes and to ensure the integrity of, and expand the quantity and quality of, the Lakefront Parks.
 - 6. To promote and provide for continuous pedestrian movement along the shoreline.
 - 7. To promote and provide for pedestrian access to the Lake and Lakefront Parks from and through areas adjacent thereto at regular intervals of one-fourth (1/4) mile and additional wherever possible; and, to protect and enhance vistas as these locations and wherever else possible.
 - 8. To promote and provide for improved public transportation access to the Lakefront.
 - 9. To ensure that no roadway of expressway standards, as hereinafter defined, shall be permitted in the Lakefront Parks.
 - 10. To ensure that development of properties adjacent to the Lake or the Lakefront Parks is so defined as to implement the above-stated Purposes, provided; however, that with respect to property located within the Private-Use Zone, as established by Article V, VI and IX of this Ordinance, the permitted use, special use, lot area per dwelling unit and floor area ratio provisions found in the applicable chapters of Chicago Zoning Ordinance portion of the Municipal Code of Chicago, shall govern, expect where such provisions are in substantial conflict with the Purposes of this Ordinance or the Fourteen Basic Policies of the Lakefront Plan of Chicago.
 - 11. To achieve the above-stated Purposes, the appropriate public agency should acquire such properties or rights as may be necessary and desirable.
 - 12. To define and limit the powers and duties of the administrative body and officers as provided herein.
 - 13. Nothing contained in the Lake Michigan and Chicago Lakefront Protection Ordinance shall be deemed to be a waiver, consent, license or permit to use any property or to locate, construct or maintain any building, structure or facility or to carry on any trade, industry, occupation or activity which may be otherwise required by law.







ScALE: 1" = 1000
Applicant: The Barack Obama Foundation
Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive;
5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance
Date Filed: January 10, 2018

FIGURE 1 VICINITY MAP

TOD WILLIAMS BILLIE TSIEN Architects | Partners

Interactive Design Architects (IDEA)

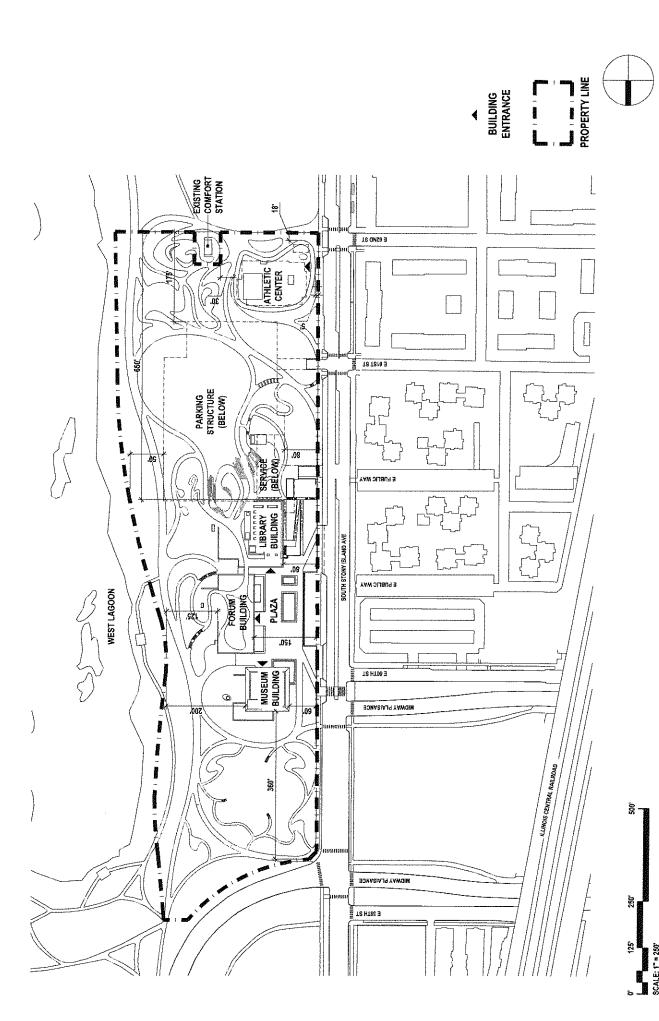
EXISTING SITE PLAN FIGURE 2

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed; January 10, 2018

Applicant: The Barack Obama Foundation

TOD WILLIAMS BILLIE TSIEN Architects | Partners

Interactive Design Architects (IDEA)

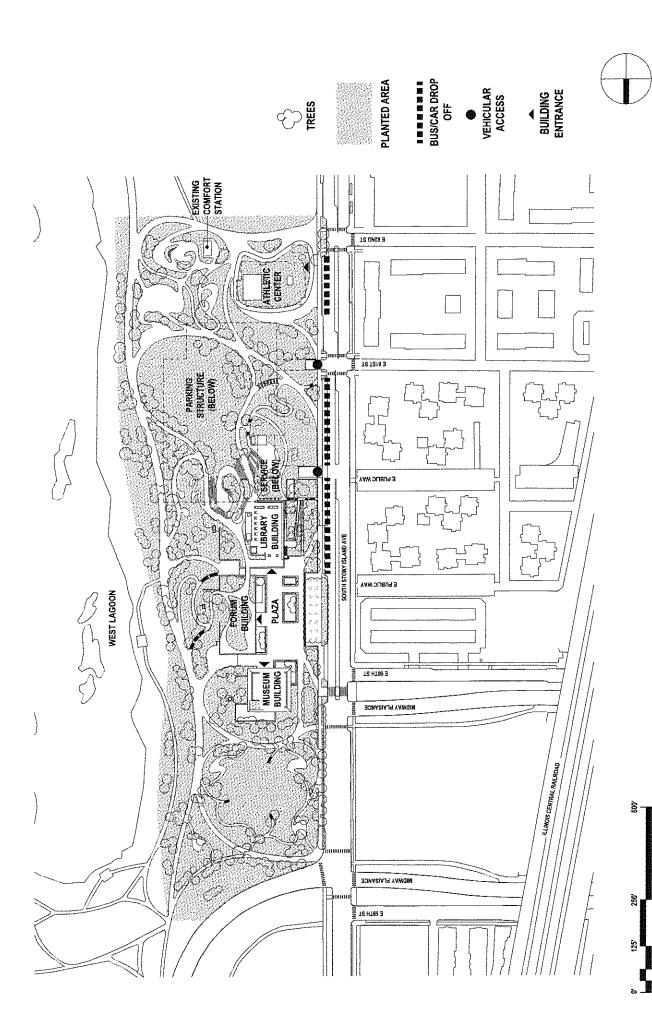


PROPOSED SITE PLAN FIGURE 3.1

TOD WILLIAMS BILLIE TSIEN Architects | Partners Interactive Design Architects (IDEA)

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

Applicant: The Barack Obama Foundation



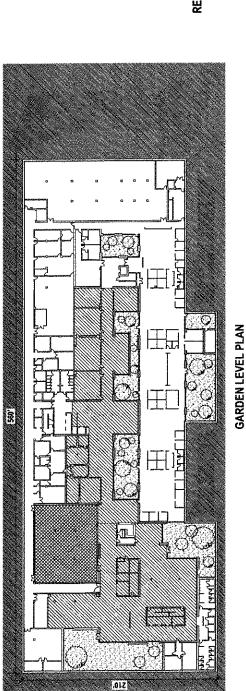
TOD WILLIAMS BILLIE TSIEN Architects | Partners Interactive Design Architects (IDEA)

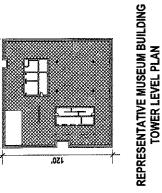
LANDSCAPE PLAN FIGURE 3.2 PROPOSED

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Comell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

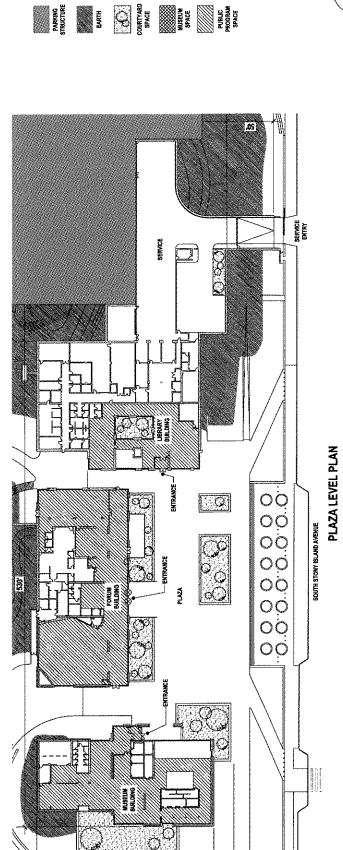
Applicant: The Barack Obama Foundation

SCALE: 1" = 250"





120



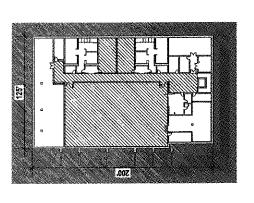


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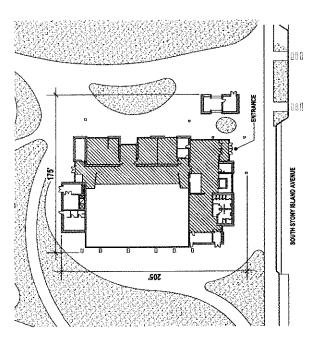
Applicant: The Barack Obama Foundation

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

PROPOSED FLOOR PLANS







PLANTED AREA
AREA
EARTH
PUBLIC
PUBLIC
SPROGRAM
SPACE

GROUND FLOOR PLAN



PROPOSED FLOOR PLANS **ATHLETIC CENTER**

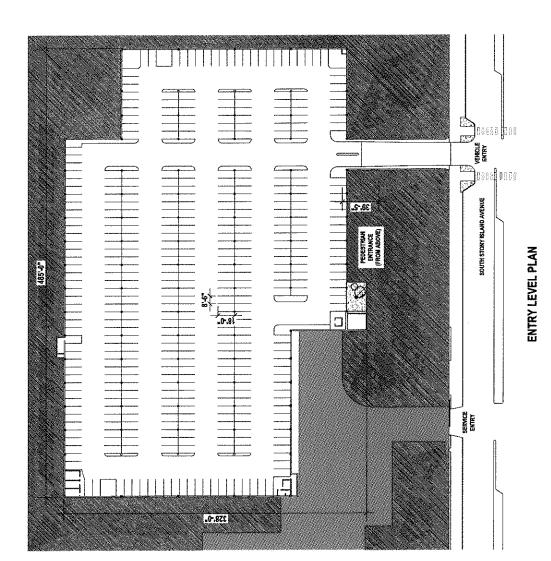
Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

Applicant: The Barack Obama Foundation

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FIGURE 4.2

TOD WILLIAMS BILLIE TSIEN Architects | Partners Interactive Design Architects (IDEA)





OPC
OPC
EARTH
COURTYAND
SPACE

TOD WILLIAMS BILLIE TSIEN Architects | Partners

PROPOSED FLOOR PLANS **PARKING STRUCTURE** FIGURE 4.3

Applicant: The Barack Obama Foundation Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

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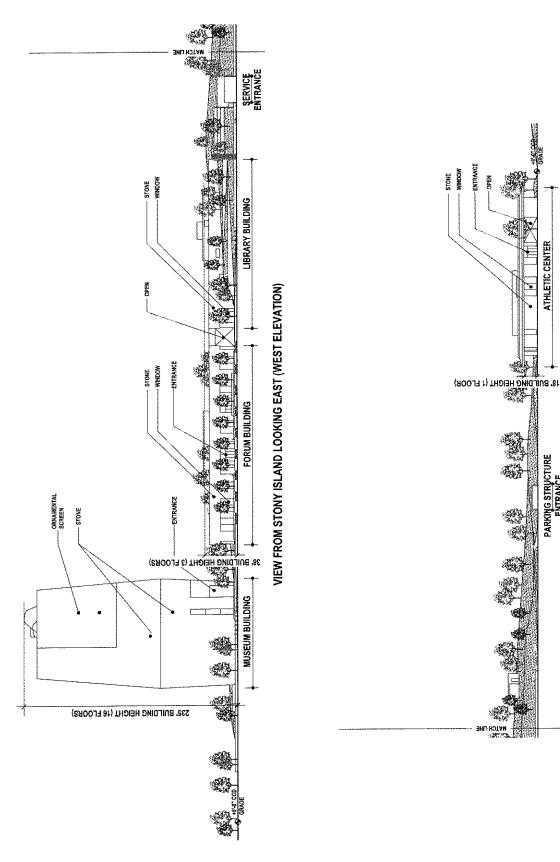
Interactive Design Architects (IDEA)

ATHLETIC CENTER

VIEW FROM STONY ISLAND LOOKING EAST (WEST ELEVATION)

PARKING STRUCTURE ENTRANCE

Interactive Design Architects (IDEA)

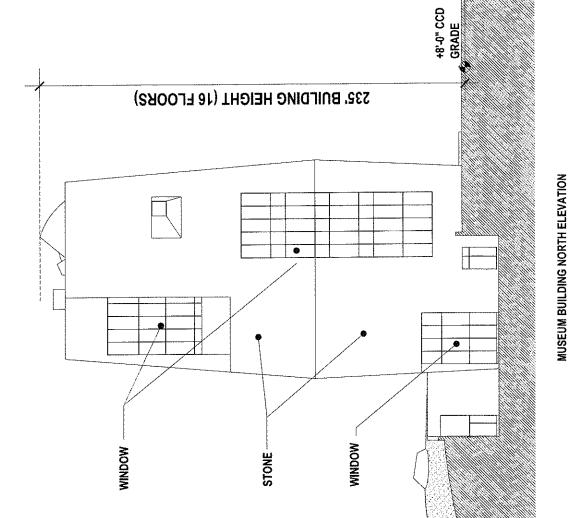


Applicant: The Barack Obama Foundation 울

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Story Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

Interactive Design Architects (IDEA)

FIGURE 5.2 ELEVATIONS



Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018 Applicant: The Barack Obama Foundation

+8'-0" CCD GRADE

332. BULDING HEIGHT (16 FLOORS)

STONE

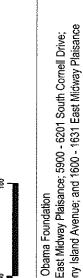
WINDOW

ORNAMENTAL SCREEN

Interactive Design Architects (IDEA)

FIGURE 5.3 ELEVATIONS

MUSEUM BUILDING WEST ELEVATION



SCALE: 1" = 50"





Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

Applicant: The Barack Obama Foundation

MUSEUM BUILDING SOUTH ELEVATION



ENTRANCE

9

+8'-0" CCD GRADE

WINDOW

- STONE

332' BUILDING HEIGHT (16 FLOORS)

ORNAMENTAL SCREEN

WINDOW

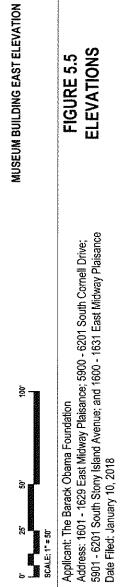
WINDOW

+8'-0" CCD GRADE

STONE

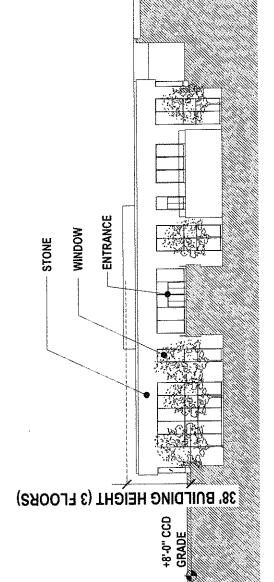
332. BNIFDING HEIGHT (16 FLOORS)





Applicant: The Barack Obama Foundation

FIGURE 5.6 ELEVATIONS



FORUM BUILDING NORTH ELEVATION

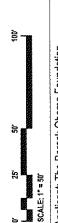
WINDOW

38. BNIГDIИС НЕІСНІ (3 LГООКЗ)

+8-0" CCb GRADE

-STONE

FORUM BUILDING WEST ELEVATION



Applicant: The Barack Obama Foundation

Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed; January 10, 2018



38. ВПІТВІИВ НЕІВНІ (З ЕГООВЗ)

WINDOW

STONE

FORUM BUILDING SOUTH ELEVATION

WINDOW

38' BUILDING HEIGHT (3 FLOORS)

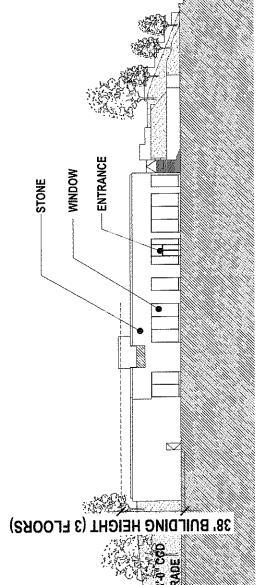
-STONE

GRADE +8'-0" CCD

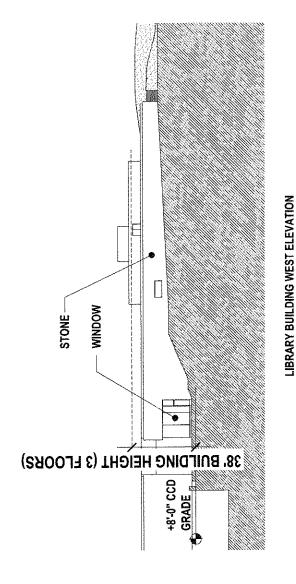


Applicant: The Barack Obama Foundation Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Story Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018

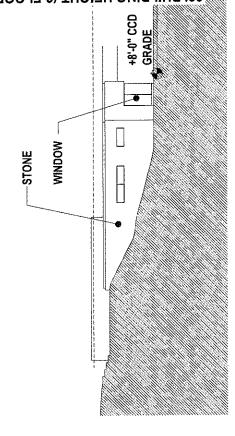
FIGURE 5.8 ELEVATIONS



LIBRARY BUILDING NORTH ELEVATION



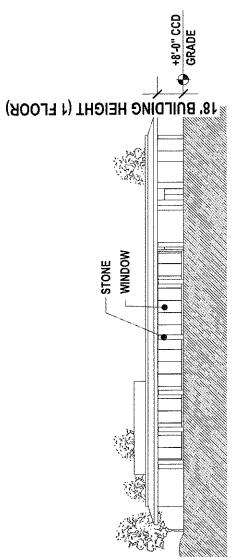
Applicant: The Barack Obama Foundation Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018



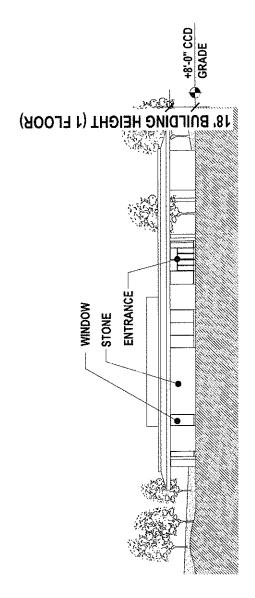
LIBRARY BUILDING EAST ELEVATION

38. BULDING HEIGHT (3 FLOORS)

Applicant: The Barack Obama Foundation
Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive;
5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance
Date Filed: January 10, 2018



ATHLETIC CENTER NORTH ELEVATION



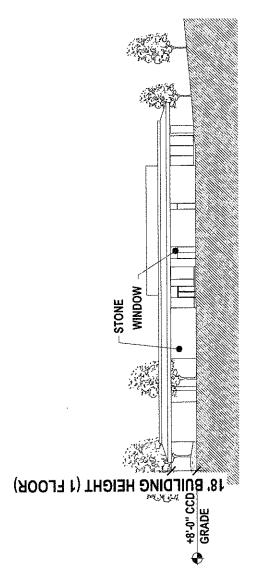
ATHLETIC CENTER WEST ELEVATION



Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Plaisance Date Filed: January 10, 2018 Applicant: The Barack Obama Foundation

FIGURE 5.10 ELEVATIONS

Interactive Design Architects (IDEA)



ATHLETIC CENTER SOUTH ELEVATION

STONE

18' BUILDING HEIGHT (1 FLOOR)

ATHLETIC CENTER EAST ELEVATION



Address: 1601 - 1629 East Midway Platsance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East Midway Platsance Date Filed: January 10, 2018 Applicant: The Barack Obama Foundation

ELEVATIONS FIGURE 5.11

APPLICATION TO THE CHICAGO PLAN COMMISSION UNDER THE LAKE MICHIGAN AND CHICAGO LAKEFRONT PROTECTION ORDINANCE

PART TWO: CHARACTER OF THE PROPOSAL, VI. NARRATIVE

More than a building or museum, the Obama Presidential Center (the "OPC") will be a living, working campus for citizenship, designed to inspire and empower visitors and residents to create change in their communities and the world. An open, inclusive campus integrated into historic Jackson Park, the OPC will unlock the Park's potential as a cultural attraction, creating new recreational opportunities for community members and driving economic opportunity on the South Side.

The Obama Foundation believes in every person's ability to create change in their local community or anywhere in the world; the Foundation's initiatives inspire and empower people with the skills and tools they need to do just that, and train and connect the next generation of civic leaders. The vision for the OPC is inspired by the legacy of civic engagement exemplified by President and Mrs. Obama.

The OPC will be a global hub for community convenings, recreation, and learning, as well as a place for storytelling and story making. It will include a collection of buildings, a central plaza, dynamic play areas for children, a community garden, and other spaces designed to inspire community members and visitors to collaborate, build, and most importantly, take a piece of their experience back into their own community to create positive change.

The OPC will be an economic engine for the City of Chicago by drawing hundreds of thousands of visitors to the OPC every year, creating thousands of new jobs on the South Side, and revitalizing historic Jackson Park.

The Design Principles

Our vision is a timeless and elegant design that fits seamlessly within the Park and serves as an instrument for social change, a hub for leadership training, and a beacon of values. We are creating a global community center, a place of life and vibrancy that showcases the South Side to the world.

The guiding principles for the design of the OPC are to:

• Create a world-class cultural attraction on the South Side: Provide new and improved public recreation space and civic engagement opportunities for the people and families of the South Side; create a welcoming and dynamic space for children and young adults that allows them to play, learn, and be inspired; enhance public safety in and around the park; and invest in increased horticultural diversity. Much of the space within the OPC's buildings and the entirety of the surrounding OPC campus will be free to the public.

- Create jobs and economic opportunity for the South Side: Provide economic development opportunities for the individuals, families, and businesses of the South Side and City of Chicago. The OPC is estimated to support nearly 5,000 new, local jobs during its construction, and more than 2,500 permanent jobs once the OPC opens. The OPC will attract up to 760,000 annual visitors and in its first 10 years, is expected to have a total economic impact of \$3.1 billion.
- Unify Jackson Park and honor its history: Remove barriers and improve connectivity to the lakefront; reinvigorate Jackson Park as a "park for the people"; honor the vision of Frederick Law Olmsted; add green space; and strengthen the identity and connections between the Museum Campus South institutions, including the Museum of Science and Industry and the DuSable Museum of African American History.
- **Build with sustainable practices:** Aim for, at minimum, a LEED v4 Platinum rating; manage water responsibly; improve ecological performance of planting; educate visitors on sustainability; and encourage community members to engage with the landscape and park experience.
- Build upon existing partnership with the community: Community input and feedback is critical to the design and construction of the OPC; much of the current design is the result of thousands of engagements -- meetings, conversations, and online submissions -- from our neighbors. The design will continue to be shaped by community input.

The Campus

The OPC will inspire visitors with an experience that draws on the legacy of President Obama's presidency, and empowers visitors with tools to become active citizens in their own communities. Rather than a single building placed in Jackson Park, the OPC is designed as an open, inclusive campus integrated into the landscape. The OPC will be a safe, welcoming space for families on the South Side to enjoy.

The Museum Building will inspire the next generation of leaders with stories of the past, while empowering them with practical lessons for the future. In the Forum Building, visitors will put those lessons into practice, participating in programming and community engagement. And, at the Library Building, visitors will collaborate in a place for knowledge formation and take with them their experiences to create positive change.

The campus is comprised of:

• Museum Building (approximately 165,000 GSF): The Museum Building is intendeestablish the Obama Presidential Center as a landmark and an important civic place for the City of Chicago. This building is intended to represent ascension, hope and what ordinary people have the power to do together, and is planned to be 235-feet-high (measured from grade +8° CCD) and composed of 8 primary floors and multiple mezzanine levels. About half of the building will be occupied by the OPC's museum, which will be a ticketed experience and be filled with exhibitions and artifacts telling the story of the Obamas situated within a nuanced historical context: civil rights history, African-American history, the history of Chicago along with a broader U.S. history. The

rest of the building will be filled with other public spaces, including the top floor, which will feature a contemplative space that is free and open to the public with views of the park and Lake Michigan.

- Forum Building (approximately 70,000 GSF): This is a 2-story building, with one level below grade and one story (38-feet) above grade. Landscaped paths transition visitors from the park to the building's fully accessible roof terrace. The Forum Building will be primarily comprised of programming spaces and community amenities including a public winter garden, multi-purpose meeting spaces, auditorium, media production, and a restaurant. The majority of this space will be free and open to the public.
- Library Building (approximately 50,000 GSF): This is a 2-story building, with one level below grade and one story (38-feet) above grade. The building is covered with accessible and useable park land. The public portion of this building opens onto the Plaza and will be a portal for visitors to engage with the world beyond the Center. The majority of this building, which is hidden from public view by landscaped terracing and the planned community garden, will serve the OPC's back-of-house and service functions. The Foundation is currently exploring the possibility of a partnership with the Chicago Public Library for some of the space within this building.
- Plaza (approximately 44,000 SF): The Museum, Forum, and Library Buildings will wrap around a public plaza (2-feet above grade) that faces towards the community and will act as another gateway or entry point into the park. The Plaza will act as a "town square" for the local community; a place for both informal gathering and programmed public events that will add to the neighborhood. It will host performances of all types, including celebrations, events or markets and fairs.
- Athletic Center (approximately 40,000 SF): This two-story building is partially submerged and approximately 18-feet above grade with a green roof. It will provide an indoor multi-use sport and athletic facility for year-round activity that invites the community to play and celebrate the importance of teamwork and exercise through playing sports. The Athletic Center provides opportunities for programming partnerships with Hyde Park Academy, the South Side YMCA, and Chicago Park District Field House, among others.
- Parking Facility (approximately 170,000 SF): The parking facility will be located underground in Jackson Park between the Library Building and the Athletic Center. Entry and exit from the garage will be on the east side of Stony Island Avenue and aligned with 61st Street. The facility will accommodate a maximum of 450 cars.

The OPC campus comprises approximately 19.3 acres within Jackson Park. Included in the 19.3 acres are the vacated roads of the Midway Plaisance South east of Stony Island Avenue and a portion of Cornell Drive. The vacation of these roads allows for new park land and a barrier-free pathway for the community to access the lagoon and lakefront from the west. The OPC buildings, plaza and parking occupy approximately 7.4 acres of the 19.3 acre campus, of which more than 85% have publicly accessible landscaped roofs or hardscape.

The Park

Honoring the legacy of Olmsted and Vaux, the OPC is designed to further the potential of Jackson Park for the South Side, City of Chicago, and all of its visitors. The landscape design will restore the connectivity to Lake Michigan and create a cohesive park, with safe, open spaces for children to play, and friends and family to gather. The campus is designed to enable people to flow through and around the buildings and maintain connections to the park and park features, including the lagoon and Lake Michigan. The campus landscape will be open and accessible to all park visitors.

The Museum, Forum, and Library Buildings will be connected at the below grade Garden Level. The Forum and Library Buildings and Parking Facility will be covered with landscaping to create accessible park land that will seamlessly integrate into the existing park. Landscaped pathways will take visitors up from the park to above the roofs of the Forum and Library Buildings, offering views of the Plaza and the lagoon.

Different people currently use the Park for different experiences – from recreational to contemplative. Our design will enable a wide range of recreational and passive activities in Jackson Park, supplementing the existing offerings. The campus will include:

- new public pathways,
- a nature walk along the lagoon,
- a sledding hill,
- a community garden,
- adventure play areas,
- areas for picnicking,
- a sloped lawn that can be used for special events and everyday use from picnicking to recreation.

The campus will also introduce varied topography with increased biodiversity and hydrology features. The OPC will be a real-life symbol of President and Mrs. Obama's commitment to sustainability. The OPC is planned to be certified (at a minimum) LEED v4 Platinum.

The entire OPC campus is designed with universal design concepts so that it can be accessed, understood and used to the greatest extent possible by all people regardless of their age, size, ability or disability.

The design for the landscape of the OPC is being developed in conjunction with an overall update of the South Lakefront Framework Plan.

PART FOUR: POTENTIAL IMPACT OF THE PROPOSAL

A. FOURTEEN BASIC POLICIES

1. Complete the publicly owned and locally controlled park system along the entire Chicago Lakefront.

Response: The proposed development supports Policy 1. The proposed development will be operated and maintained for recreational and cultural purposes. The purpose of the proposed development will be to enhance Jackson Park, including enhancing the existing public spaces and recreational, cultural and commercial amenities, attracting a broader audience and increasing year-round attendance. The site is located entirely within the Public-Use Zone and will remain under public ownership and control.

2. Maintain and enhance the predominantly landscaped, spacious and continuous character of the lakeshore parks.

Response: The proposed development supports Policy 2 by enhancing landscaping within Jackson Park. The proposed development has been designed to provide interactive opportunities for the public to use the existing and enhanced open space and enhancement to pedestrian connections between the neighboring community and the lagoons, active park recreation to the south, and the Museum of Science and Industry to the north. The roadway vacations of the Midway Plaisance South east of Stony Island Avenue and a portion of Cornell Avenue allow for the creation of park land in its place and barrier-free access to the lagoons and Lake Michigan. Furthermore, nearly 6.4 acres of the 7.4 acres of constructed buildings are designed to be publicly accessible landscaped roof or hardscape. The proposed development will maintain and enhance the predominantly landscaped, spacious and continuous character of the portion of Jackson Park within which the Obama Presidential Center will coexist.

3. Continue to improve the water quality and ecological balance of Lake Michigan.

Response: The proposed development will comply with all applicable regulations pertaining to the management of wastewater and storm water runoff and will not negatively impact the purity and quality of the waters of Lake Michigan. The improvements subject to this application are located west of Lake Shore Drive and will have no adverse impact on water quality or ecology. Sustainability is a key feature of the redevelopment plans. The proposed development envisions implementing sustainability initiatives that address energy, water, waste and transportation and is seeking to achieve Leadership in Energy and Environmental Design (LEED) Platinum (version 4) certification. The proposed development is committed to improve storm water management measures which will mitigate current storm water run-off issues from the site into the adjacent lagoon. One of the primary criteria for landform design and the selection of pavement and planting material will be the respective ability to mitigate, slow and/or filter storm water run-off. All infrastructure and building development will conform to all applicable regulations concerning water purity.

4. Preserve the cultural, historical, and recreational heritage of the lakeshore parks.

Response: The proposed development will respect the cultural, historical and recreational heritage of the lakeshore parks. The proposed development supports Policy 4 by including enhanced cultural and recreational opportunities, while respecting the historic features and content of Jackson Park.

5. Maintain and improve the formal character and open water vista of Grant Park with no new above-ground structures permitted.

Response: Policy 5 is not applicable to the proposed development because the proposed development is not located within or adjacent to Grant Park.

6. Increase the diversity of recreational opportunities while emphasizing lake-oriented leisure time activities.

Response: The proposed development supports Policy 6 within Jackson Park. The proposed development is intended to provide a broader range of opportunities for recreational and lesiure time activities including new active play spaces and a network of spaces for passive enjoyment of the natural lakeshore and park environment.

7. Protect and develop natural lakeshore park and water areas for wildlife habitation.

Response: The proposed development does not currently include natural lakeshore park. The proposed design will include an increase in the diversity of trees and plantings within the subject property and along South Stony Island. Recognizing the importance of Jackson Park as a bird migratory path, the proposed design will use native plantings to promote and maintain wildlife habitats.

8. Increase personal safety.

Response: The provision of improved lighting, pathway resurfacing, clearer sight lines and what are expected to be popular amenities will attract more people to this space and establish a safer means of traversing and monitoring activity throughout the site.

9. Design all lake edge and lake construction to prevent detrimental shoreline erosion.

Response: This policy is not applicable because the proposed development is not located within the lake or on the lake edge.

10. Ensure a harmonious relationship between the lakeshore parks and the community edge, but in no instance will further private development be permitted east of Lake Shore Drive.

Response: The proposed development is located west of Lake Shore Drive. The proposed development will serve the goals of Policy 10 by enhancing public recreational and cultural opportunities within Jackson Park. The proposed development will provide expanded year-round programming and entertainment options for the public. Amenities such as play spaces, active recreation areas, picnicking and community gardens are intended to appeal to a broader audience and enable visitors to enjoy the park and surrounding area.

11. Improve access to the lakeshore parks and reduce vehicular traffic on secondary park roads.

Response: The proposed development supports Policy 11 by improving vehicular, bicycle paths and pedestrian circulation around and within Jackson Park. Traffic improvements include directional signage to re-route vehicular traffic to more efficient routes and to reduce vehicle-pedestrian interactions. Bicycle paths within Jackson Park are continuous through the proposed development site. The proposed development also calls for the roadway vacations of the Midway Plaisance South east of Stony Island Avenue and a portion of Cornell Avenue, removing vehicular traffic from the park and creating safe, barrier-free access to the lagoons and Lake Michigan.

12. Strengthen the parkway characteristics of Lake Shore Drive and prohibit a roadway of expressway standards.

Response: Policy 12 is not applicable because the proposed development does not involve any modifications to Lake Shore Drive. The roadway modifications are intended to disburse traffic, improve efficiency of vehicular circulation and enhance the pedestrian experience.

13. Ensure that all port, water supply, and public facilities are designed to enhance lakefront character.

Response: No port or water supply facilities will be impacted as a part of the proposed development.

14. Coordinate all public and private development within the water, park and community zones.

Response: The proposed development supports Policy 14. The presence of this facility within the Public (Park) Use Zone, established pursuant to the Lake Michigan and Chicago Lakefront Protection Ordinance, requires analysis of the development by the Chicago Plan Commission and coordinated reviews between various city, state and federal agencies, as well as elected officials and the general public The Applicant's proposed development was developed with the input of many stakeholders, community members, elected officials and agencies, resulting in a comprehensive proposed development that will be well-integrated with the existing urban character of the surrounding neighborhoods.

B. THIRTEEN PURPOSES

1. To promote and protect the health, safety, comfort, convenience, and the general welfare of the people, and to conserve our natural resources.

Response: The proposed development will help activate the neighborhood by providing enhanced open space, recreational, cultural, entertainment and educational opportunities within the Lake Michigan and Chicago Lakefront Districts. The proposed development includes modifications to increase pedestrian safety and convenience and to improve vehicular traffic circulation. Parking and traffic improvements will be designed to promote and protect health, safety and welfare and will be subject to the approval of the Chicago Department of Transportation. New landscape developments are intended to increase the biodiversity of the project site, add to the ecological function of Jackson Park, and expand the habitat for local fauna.

2. To identify and establish the Lake Michigan and Chicago Lakefront Protection District and to divide that District into several zones wherein any and all development or construction, as specified in Article V hereinafter, shall be specifically restricted and regulated.

Response: The proposed development falls within the Public (Park) Use Zone of the Lake Michigan and Chicago Lakefront Protection District and has been and will continue to be consistent and conform to the District's restrictions and regulations.

3. To maintain and improve the purity and quality of the waters of Lake Michigan.

Response: The proposed development, located west of Lake Shore Drive, will comply with all applicable regulations pertaining to the management of wastewater and storm water runoff and will not negatively impact the purity and quality of the waters of Lake Michigan. The proposed development includes implementation of sustainability initiatives that address energy, water, waste and transportation. The proposed development will seek to achieve Leadership in Energy and Environmental Design (LEED) Platinum (version 4) certification. The plans include the installation of new storm water management strategies and will seek to mitigate the impacts of urban storm water runoff. The proposed development pursues a reduction in the total volume of runoff and implements new filtration systems through both natural and mechanical means. Installation of bio-filtration basins and rain gardens will improve water quality and reduce the impact of development on adjacent lagoons connected to Lake Michigan.

4. To ensure that construction in the Lake or modification of the existing shoreline shall not be permitted if such construction or modification would cause environmental or ecological damage to the Lake or would diminish water quality; and, to ensure that the life patterns of fish, migratory birds and other fauna are recognized and supported.

Response: Purpose 4 is not applicable to the proposed development because it will not include construction in the Lake or modification of the existing shoreline.

5. To ensure that the Lakefront Parks and the Lake itself are devoted only to public purposes and to ensure the integrity of, and expand the quantity and quality of, the Lakefront Parks.

Response: These improvements are proposed to take place on publicly-owned property and the subject property will remain under public ownership and control. The proposed development will be open to the general public and include improved access to natural lagoon areas and Lake Michigan, new community gardens, enhanced active recreational amenities, and new public gathering spaces that will expand the quality and overall usage of Jackson Park and this section of the lakefront park system.

6. To promote and provide for continuous pedestrian movement along the shoreline.

Response: The proposed development will not impede pedestrian movement along the shoreline. The proposed development supports Purpose 6 by improving pedestrian and bike trail connections between Jackson Park, the community and the lakefront.

7. To promote and provide for pedestrian access to the Lake and Lakefront Parks from and through areas adjacent thereto at regular intervals of one-fourth (1/4) mile and additional places wherever possible; and, to protect and enhance vistas at these locations and wherever else possible.

Response: The proposed development supports Purpose 7 by improving pedestrian connections to the community and throughout Jackson Park and the lakefront. The proposed development does not adversely impact pedestrian access to Lake Michigan and Lakefront Parks. The proposed development will help to improve access to and through Jackson Park, as well as other adjacent lake shore park space, through the elimination of certain portions of South Cornell Drive and the creation of accessible park land in its place, the establishment of new pedestrian access points and ADA compliant design features. Vistas will be enhanced by the elevation changes provided in the landscape that overlook the lagoon and park. Placement and orientation of pathways through the landscape offer views into the park that keep sightlines open and promote safety.

8. To promote and provide for improved public transportation access to the Lakefront.

Response: The proposed development supports Purpose 8 by maintaining public transportation and providing vehicular and pedestrian access to the site. In addition, the proposed development will include bus drop-off, and pick-up along the east side of Stony Island Avenue.

9. To ensure that no roadway of expressway standards, as hereinafter defined, shall be permitted in the Lakefront Parks.

Response: The proposed roadway modifications will eliminate 224,583 square feet of right-of-way, creating more open space for pedestrians and park land within Jackson Park.

10. To ensure that development of properties adjacent to the Lake or the Lakefront Parks is so defined as to implement the above-stated Purposes, provided, however, that with respect to property located within the Private Use Zone as established by Article V, VI, and IX of this

Ordinance, the permitted use, special use, lot area per dwelling unit, and floor area ratio provisions found in the applicable chapters of the Chicago Zoning Ordinance portion of the Municipal Code of Chicago, shall govern, except where such provisions are in substantial conflict with the Purposes of this Ordinance or the Fourteen Basic Policies of the Lakefront Plan of Chicago.

Response: While Purpose 10 is not applicable to the proposed development because the site is not located in the Private Use Zoning, the proposed development will be in compliance with applicable zoning regulations and will not be in conflict with the purposes of the Lake Michigan and Chicago Lakefront Protection Ordinance or the Fourteen Basic Policies of the Lakefront Plan of Chicago.

11. To achieve the above-stated purposes, the appropriate public agency should acquire such properties or rights as may be necessary and desirable.

Response: Purpose 11 is not applicable because the site is already owned by public agencies.

12. To define and limit the powers and duties of the administrative body and officers as provided herein.

Response: Purpose 12 is not applicable to the proposed development.

13. Nothing contained in the Lake Michigan and Chicago Lakefront Protection Ordinance shall be deemed to be a waiver or consent, license or permit to use any property or to locate, construct or maintain any building, structure or facility or to carry on any trade, industry, occupation or activity which may be otherwise required by law.

Response: The Applicant is separately seeking approvals from applicable agencies.



Administration Office

541 North Fairbanks Ct. Chicago, Illinois 60611 (312) 742-7529 (312) 747-2001 (TTY) www.chicagoparkdistrict.com

Space of Commissioners

Jesse H. Ruiz President

Avis LaVelle Vice President

Erika R. Allen Donald J. Edwards David A. Helfand Tim King M. Laird Koldyke

General Superintendent & CEO

Michael P. Kelly

City of Chicago Rahm Emanuel Mayor January 10th, 2018

Mr. Martin Cabrera, Jr. Chairman, Chicago Plan Commission City Hall, Room 905 121 North LaSalle Street Chicago, IL 60602

Applicant:

The Barack Obama Foundation

5235 S. Harper Court, Suite 1140, Chicago, Illinois 60615

Subject Property:

1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell

Drive; 5901 - 6201 South Stony Island Avenue; and 1600 - 1631 East

Midway Plaisance

Re:

Application For Rezoning To Planned Development And An Application To The Chicago Plan Commission Under The Lake

Michigan And Chicago Lakefront Protection Ordinance

Dear Chairman Cabrera:

We are aware that The Barack Obama Foundation (the "Foundation") is planning to develop the Obama Presidential Center on the subject property described above and depicted on Exhibit A attached to this letter (the "Subject Property"). In order to proceed with the development, the Foundation must seek a rezoning of the Subject Property to a Planned Development and obtain approval under the Lake Michigan and Chicago Lakefront Protection Ordinance. The Subject Property is owned by the Chicago Park District. The undersigned does hereby authorize Neal & Leroy, LLC, on behalf of the Foundation, to file the necessary applications for Planned Development and Lake Michigan and Chicago Lakefront Protection Ordinance.

By:

Timothy King General Counsel Chicago Park District

cc:

Patricia Scudiero, Zoning Administrator

David Reifman, Commissioner

Robbin Cohen, Executive Director, The Barack Obama Foundation

NEAL & LEROY, LLC

120 North LaSalle Street, Suite 2600 | Chicago, Illinois 60602 | telephone 312.641.7144 | facsimile 312.641.5137

January 10, 2018

Daniel S. Solis, Chairman Committee on Zoning Room 304, City Hall 121 North LaSalle Street Chicago, Illinois 60602

Martin Cabrera, Jr., Chairman Chicago Plan Commission Room 1000, City Hall 121 North LaSalle Street Chicago, Illinois 60602

Re: Applications for Institutional Planned Development and Approval under The Lake Michigan and Chicago Lakefront Protection Ordinance

Dear Chairman Solis and Chairman Cabrera:

The undersigned, Carol D. Stubblefield, an attorney with the law firm of Neal & Leroy, LLC, which firm represents The Barack Obama Foundation, the applicant for an amendment to the Chicago Zoning Ordinance and approval under The Lake Michigan and Chicago Lakefront Protection Ordinance with respect to property commonly known as 1601-1629 East Midway Plaisance; 5900-6201 South Cornell Drive; 5901-6201 South Stony Island Avenue; and 1600-1631 East Midway Plaisance, certifies that she has complied with the requirements of Section 17-13-0107 and Section 16-4-100 of the Municipal Code of the City of Chicago by sending the attached letter by United States Postal Service First Class Mail to the owners of all property within 250 feet in each direction of the subject property, as determined by the most recent Cook County tax records of Cook County, exclusive of public roads, streets, alleys and other public ways, or a total distance limited to 400 feet.

The undersigned certifies that the notice contains the common street address of the subject property, a description of the nature, scope and purpose of the applications; the name and address of the Applicant; the name and address of the owner; the date the Applicant intends to file the applications on or about January 17, 2018.

The undersigned certifies that she has made a bona fide effort to determine the addresses of the parties to be notified under Section 17-13-0107 and Section 16-4-100 of the Municipal Code of the City of Chicago and that the Applicant certifies that the accompanying list of names and addresses of surrounding properties located within 250 feet of the subject property, is a complete list containing the names and last known addresses of the owners of the property required to be served.

Subscribed and sworn to before me this [104] day of January 2018

Notary Public

Carol D. Stubblefield

Very truly yours

Official Seal
Evelyn M Neri
Notary Public State of Illinois
My Commission Expires 10/28/2020

| 20-14-223-039-0000 | 20-13-104-001-0000 | 20-14-223-041-8001 |
|--|-------------------------|--|
| City of Chicago | Chicago Park District | Metra |
| 121 N. LaSalle St., Rm 501 | 541 N. Fairbanks Ct. | 547 W. Jackson Blvd. |
| Chicago, Illinois 60602 | Chicago, Illinois 60611 | Chicago, Illinois 60606 |
| 20-14-419-001-0000 | 20-14-501-001-0000 | 20-14-222-062-0000 |
| Board of Education | Candian National | CAROL LERNER |
| 42 W. Madison, 9th Fl. | 17641 S. Ashland | 5834 S HARPER AVE |
| Chicago, Illinois 60602 | Homewood, IL 60430 | CHICAGO, IL 60637 |
| 20-14-222-061-0000 | 20-14-222-072-1005 | 20-14-223-041-8002 |
| DAVID RADEN | HELFAND HEDRICK | HYDE PARK CAFE |
| 5832 S HARPER | 8137 SW 35TH AVENUE | 5230 NORTH CICERO |
| CHICAGO, IL 60637 | PORTLAND, OR 97219 | CHICAGO, IL 60630 |
| 20-14-405-006-0000 | 20-14-222-063-0000 | 20-14-222-072-1004 |
| JACKSON PARKSIDE APTS | JAMES MANN | JESSE W SHELTON |
| 6040 S HARPER AVE | PO BOX 749 | 5844 S HARPER AV 1ST |
| CHICAGO, IL 60637 | BUCYRUS, OH 44820 | CHICAGO, IL 60637 |
| 20-14-222-060-0000 | 20-14-222-058-0000 | 20-14-222-065-0000 |
| KANG WU | MARY ANNE WALLACE | MICHAEL B ROSEN |
| 5830 S HARPER AVE | 5822 S HARPER AV | 5848 S HARPER AV |
| CHICAGO, IL 60637 | CHICAGO, IL 60637 | CHICAGO, IL 60637 |
| 20-14-222-072-1001 | 20-14-223-034-0000 | 20-14-223-033-0000 |
| MICHAEL KENNEDY | MIDWAY APT BLDG CORP | PAUL A BAKER |
| 5842 S HARPER AVE#1 | 1534 E 59TH ST | 1520 E 59TH ST APT 3N |
| CHICAGO, IL 60637 | CHICAGO, IL 60637 | CHICAGO, IL 60637 |
| 20-14-222-059-0000 | 20-14-222-072-1003 | 20-14-222-072-1002 |
| R HERRON | RAY LODATO | RAYMOND LODATO |
| 5824 S HARPER | 5842 S HARPER AVE #2 | 5842 HARPER 2 |
| CHICAGO, IL 60637 | CHICAGO, IL 60637 | CHICAGO, IL 60637 |
| 20-14-411-032-0000 | 20-14-223-036-0000 | 20-14-223-032-0000 |
| REILLY MORTGAGE | SHAN LU | TAXPAYER OF |
| 2010 CORPORATE RIDGE | 5830 S STONY ISLAND AV | 5844 S STONY ISLAND |
| MCLEAN, VA 22102 | CHICAGO, IL 60637 | CHICAGO, IL 60637 |
| 20-14-411-033-0000 | 20-14-223-030-0000 | 20-14-223-031-0000 |
| TAXPAYER OF | UNIVERSITY OF CHICAGO | |
| 1544 E 62ND ST | 5235 S HARPER CT | |
| CHICAGO, IL 60637 | CHICAGO, IL 60615 | CHICAGO, IL 60637 |
| MCLEAN, VA 22102 20-14-411-033-0000 TAXPAYER OF 1544 E 62ND ST | UNIVERSITY OF CHICAGO | CHICAGO, IL 60637 20-14-223-031-0000 VISTA GARAGE CORP 5844 S STONY ISLAND CHICAGO, IL 60637 |

20-14-222-072-1006 YOUSEF CASEWIT 5844 S HARPER AVENUE CHICAGO, IL 60637

NEAL & LEROY, LLC

120 North LaSalle Street, Suite 2600 | Chicago, Illinois 60602 | telephone 312.641.7144 | facsimile 312.641.5137

January 10, 2018

First Class Mail

Dear Sir or Madam:

In accordance with the requirements of Section 17-13-0107 and Section 16-4-100 of the Municipal Code of the City of Chicago, please be informed that on or about January 17, 2018, the undersigned, on behalf of the owner and Applicant identified below, intends to file an application to amend the Chicago Zoning Ordinance (the "Rezoning Application") and an application to the Chicago Plan Commission under The Lake Michigan and Chicago Lakefront Protection Ordinance (the "Lakefront Protection Application"). The Applications relate to the development of the Obama Presidential Center ("OPC") on property commonly known as 1601-1629 East Midway Plaisance; 5900-6201 South Cornell Drive; 5901-6201 South Stony Island Avenue; and 1600-1631 East Midway Plaisance (the "Property"). Attached to this letter, please find a map that illustrates the location of the Property.

More than a building or museum, the OPC will be a living, working campus for citizenship, designed to inspire and empower visitors and residents to create change in their communities and world. An open and inclusive campus integrated into historic Jackson Park, the OPC will unlock the Park's potential as a cultural attraction, creating new recreational opportunities for community members and driving economic opportunity on the South Side. The Obamas chose to bring the OPC to Jackson Park and the South Side, a community they called home, to give back to the community that has given them so much. Today, the Obama Foundation submitted its zoning application for the OPC, marking a significant step in realizing President and Mrs. Obama's vision for the OPC as a global community center, a place of vibrancy and life showcasing the South Side to the world. The Foundation looks forward to receiving additional input and feedback from the community to further develop the vision and plans for the OPC.

The Rezoning Application will request City of Chicago approval to rezone the Property from POS-1, Parks and Open Space District to an Institutional Planned Development for the construction of the OPC. The OPC is a planned campus comprising four buildings (the Museum, Forum and Library Buildings, plus an Athletic Center), a Plaza, and landscaped grounds totaling approximately 19.3 acres. The building footprints will occupy only 2.6 acres, or less than 15%, of the total campus site, and more than half that total (the "roofs" of the Forum and Library Buildings) will be covered by accessible park space. The OPC will include, among other features, a museum, exhibitions, resources and space for community activity, an auditorium, restaurant, recreational facilities, visitor parking and new passive and active park areas, including new walking and bike paths, more diverse plantings and improved lighting and public facilities.

Page 2
January 10, 2018
Obama Presidential Center
Public Notice Letter

The Lakefront Protection Application will request Chicago Plan Commission approval of the proposed development under The Lake Michigan and Chicago Lakefront Protection Ordinance.

The Property is owned by the Chicago Park District, 541 N. Fairbanks Ct, Chicago, Illinois 60611; Attn: Nichole Sheehan, phone: 312-742-4290.

The Applicant for the rezoning is The Barack Obama Foundation, 5235 S. Harper Court, Suite 1140, Chicago, Illinois 60615; Attn: Robbin Cohen, Executive Director, phone: 773-420-1700.

I am an authorized representative of the owners and the Applicant. Questions regarding the proposed project or the Applications may be addressed to Carol D. Stubblefield, Esq. at Neal & Leroy, LLC, phone: 312-641-7144; 120 North LaSalle Street, Suite 2600, Chicago, Illinois 60602

PLEASE NOTE: THE APPLICANT IS NOT SEEKING TO REZONE OR PURCHASE YOUR PROPERTY. YOU ARE RECEIVING THIS NOTICE AS REQUIRED BY THE CHICAGO MUNICIPAL CODE BECAUSE COOK COUNTY TAX RECORDS INDICATE YOU OWN PROPERTY WITHIN 250 FEET OF THE BOUNDARIES OF THE SUBJECT PROPERTY.

Very truly yours,

Carol D. Stubblefield, Esq.

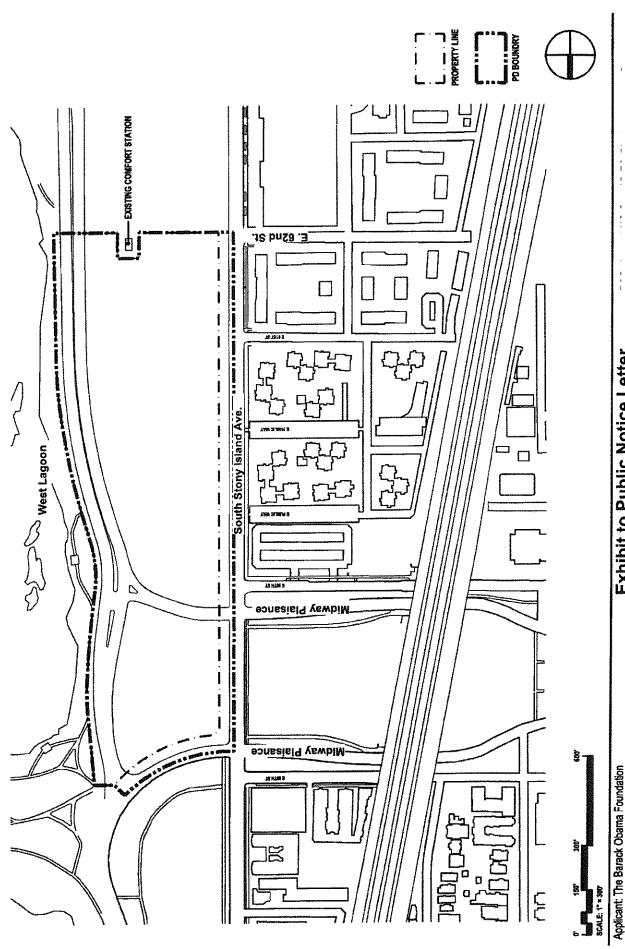


Exhibit to Public Notice Letter PROPERTY LINE AND PD

BOUNDARY MAP Address: 1601 - 1629 East Midway Plaisance; 5900 - 6201 South Cornell Drive; 5901 - 6201 South Story Island Avenue; and 1600 - 1631 East Midway Plaisance

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

December 31, 2016

| Prepared for | The Barack Obama Foundation 5235 South Harper Court No. 1140 Chicago, IL 60615 |
|--|---|
| Prepared by | Washington, Pittman and Mckeever, LLC 819 South Wabash Avenue - Suite 600 Chicago, IL 60605 |
| Amount due or refund | Not applicable |
| Make check payable to | Not applicable |
| Mail tax return and check (if applicable) to | Not applicable |
| Return must be mailed on or before | Not applicable |
| Special Instructions | This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. |

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

6

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.ira.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

| A | For the | 2016 calendar year, or tax year beginning | and | ending | | |
|-------------------------|----------------------------|--|---|----------------|--------------------------|---------------------------------------|
| В | Check If applicable | C Name of organization | | | D Employer ident | ification number |
| | Addres | THE BARACK OBAMA FOUNDATION | | | | |
| 片 | Name | Doing business as | | | 46-49 | 950751 |
| F | Initial | Number and street (or P.O. box if mail is not delive | vered to street address) | Room/suite | E Telephone numb | her |
| = | iretum Final | 5235 SOUTH HARPER COURT | ,0100 10 01001 0201000) | 1140 | | 420,1700 |
| l | iretum/ termin- aled | City or town, state or province, country, and Z | 7ID or foreign pastal code | | G Gross receipts \$ | 13,182,092. |
| _ | Amend | | TIL DI IOLGIĞIL boştal code | | H(a) is this a group | |
| H | iretum Applica tion | | N COHEN | | | es? Yes X No |
| ł | tion pendin | SAME AS C ABOVE | | | H(b) Are all subordinate | |
| · | | | (insert no.) 4947(a)(1) | or 527 | | a list. (see instructions) |
| | | mpr status: (A) 50 (C)(3) (C) (C) (C) (C) | (macritics) 1 3 45 47 (a)(1) | , 0;, DL1 | H(c) Group exempt | · · · · · · · · · · · · · · · · · · · |
| | | | ociation Other | I Vear | | M State of legal domicile: DC |
| | | Summary | DOIGHOT DOIGH | L 100; | di jorniation, 2-22 | M Diate of legal contacto |
| Ľ | ait : | Briefly describe the organization's mission or most s | -tMannt nativition: THE FO | ' אסדייגמאוור | S INTTIAL FOCUS | |
| Activities & Governance | : | S THE DEVELOPMENT OF THE PRESIDENTIAL | CENTER. | | | |
| Ĕ | 2 | Check this box 🕨 📖 If the organization discon | tinued its operations or disp | osed of more | than 25% of its net | |
| Š | 3 ! | lumber of voting members of the governing body (| Part VI, line 1a) | ,, | | 3 11 |
| ڻ م | 4 1 | lumber of independent voting members of the gov | eming body (Part VI, line 1b) | ************ | | 11 |
| 8 | 5 | otal number of individuals employed in calendar ye | ear 2016 (Part V, line 2a) | | | 13 |
| žį | 6 | otal number of volunteers (estimate if necessary) | *************************************** | | | 3 23 |
| ŧ | 78 | otal unrelated business revenue from Part VIII, col | umn (C), line 12 | | <u>7</u> | a 0. |
| • | ы | let unrelated business taxable income from Form 9 | 990-T, line 34 | | | b 0, |
| | T | | | | Prior Year | Current Year |
| 83 | 8 (| Contributions and grants (Part VIII, line 1h) | ********************* | | 1,916,24 | 7. 13,175,732. |
| Revenue | 1 1 | Program service revenue (Part VIII, line 2g) | | 0. | | |
| ě | 10 | nvestment income (Part VIII, column (A), lines 3, 4, | and 7d) | | 19 | 6,360. |
| m | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, | | | (| 0, |
| | | otal revenue - add lines 8 through 11 (must equal I | | | 1,916,260 | 5. 13,182,092. |
| | | Grants and similar amounts paid (Part IX, column (A | | | (| 0. |
| | | Benefits paid to or for members (Part IX, column (A) | | l. | { | 0. |
| en. | 15 | Salaries, other compensation, employee benefits (P | art IX, column (A), lines 5-10 |) | 1,111,131 | 1,819,458. |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), lin | | | 12,000 | 578,579. |
| 8 | Ь. | Total fundraising expenses (Part IX, column (D), line | | 171. | | |
| வி | 17 | Other expenses (Part IX, column (A), lines 11a-11d, | | | 1,697,777 | 7. 2,473,239. |
| | | Total expenses. Add lines 13-17 (must equal Part IX | | | 2,820,90 | 4,871,276. |
| | | Revenue less expenses. Subtract line 18 from line 1 | | | -904,642 | 8,310,816. |
| ö | | | | | eginning of Current Yea | r End of Year |
| Sets | 20 | Total assets (Part X, line 16) | *************************************** | | 3,990,573 | |
| 30 | 21 | | | i " | 1,412,592 | 2,559,816. |
| 甏 | 22 | Vet assets or fund balances. Subtract line 21 from | | | 2,577,983 | 10,888,797. |
| P | art II | Signature Block | | | | |
| Un | der pena | ties of perjury, I declare that I have examined this return, I | including accompanying schedu | ies and statem | ents, and to the best of | my knowledge and belief, it is |
| tru | e, correc | , and complete. Declaration of preparer (other than officer | r) is based on all information of v | which prepare | r has any knowledge. | |
| * | | | | | | |
| Sig | תב | Signature of officer | | | Date | ., |
| He | | ROBBIN COHEN, EXECUTIVE DIRECTOR | | | | |
| | | Type or print name and title | | | | |
| | | Print/Type preparer's name, | Preparer's signature/ | | Date Check | PTIN |
| Pa | id | VIVIAN FUNCLES | Vman tunck | La L | 5./2-/7 self-emp | layed P00692224 |
| | parer | Firm's name WASHINGTON, PITTMAN AND E | CKEEVER, LLC | | Firm's EIN | |
| | e Only | Firm's address 819 SOUTH WABASH AVENUE - | | | | |
| | • | CHICAGO, IL 60605 | | | Phone no.31 | L2-786-0330 |
| | the 15 | S discuss this return with the preparer shown about | ve? (see instructions) | | | Yes No |

| | 000 (00)0/ | CK OBAMA FOUNDATION | 46-4950751 | Page 2 |
|------------|--|---|---|---|
| Pa | t III Statement of Program S | | | |
| | | response or note to any line in this Part III | *************************************** | х |
| 1 . | Briefly describe the organization's mis SEE SCHEDULE O | sion: | | |
| | | | | |
| | | | | *************************************** |
| 2 | prior Form 990 or 990-EZ? | gnificant program services during the year which | | Yes X No |
| _ | If "Yes," describe these new services | | | Yes X No |
| 3 | Did the organization cease conducting if "Yes," describe these changes on \$ | g, or make significant changes in how it conduct | s, any program services? | JYes L≛JNo |
| 4 | Describe the organization's program s | service accomplishments for each of its three larg zations are required to report the amount of grat | | |
| 4a | (Code:) (Expenses 5 DEVELOPMENT OF THE PRESIDENT | 2,797,694. Including grants of \$ |) (Revenue \$ |) |
| | DEVELOPMENT OF THE PRESIDENT | , | | |
| | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | |
| | | | | |
| | | | | |
| | | | *************************************** | ************************************** |
| | | | | |
| | | | | |
| | | | | |
| 4b | /n | 3 |) (D., | |
| 410 | (Code:) (Expenses \$ | including grants of \$ |) (Rovenue \$ |) |
| | | | | |
| | | 444444444444444444444444444444444444444 | | |
| | | | | |
| | | | | |
| | | | | |
| | The state of the s | | | |
| | | | | |
| | | | | |
| | | | | |
| 4c | (Code:) (Expenses \$ | including grants of \$ | } {Revenue \$ | |
| 40 | (Code:) (Expenses \$ | attenting grants of 3 | 1 fundame 2 | ; |
| | | | | |
| | | | | |
| | | | | |
| | | | | ····· |
| | | | | ······································ |
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| | <u> </u> | | | |
| | | | | |
| | | | | |
| | Character to the first terms of | about in O | | |
| 4 d | Other program services (Describe in S (Expenses \$ | including grants of \$ |) (Revenue \$ | |
| 4e | Total program service expenses | 2,797,694. | | |

Form **990** (2016)

| | Attendance of tradence contents | | Yes | No |
|--------|--|--------|----------|--------------|
| | is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | Г | 163 | 1100 |
| 7. | | 1 | х | |
| _ | If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors Schedule Of Contributors | 2 | X | |
| 2 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| J | public office? If "Yes," complete Schedule C, Part I | 3 | | х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | i | l |
| ~* | during the tax year? If "Yes," complete Schedule C, Part II | 4 | ŀ | х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | <u> </u> | |
| • | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| _ | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | l | х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | x |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? if "Yes," complete | | | |
| | Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | Х |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X | | | |
| | as applicable. | | | |
| 8 | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | , | |
| | Part VI | 11a | Х | <u> </u> |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | l <u>.</u> . |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| C. | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | х |
| | assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII | 11c | | |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | х | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| | Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X | 11e | | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | х |
| 48. | Did the organization obtain separate, Independent audited financial statements for the tax year? If "Yes," complete | 1 11 | | |
| 128 | | 128 | х | |
| L | Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? | 100.63 | | |
| D | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | х |
| 14a | market to the first term of th | 148 | | х |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| _ | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e7 If "Yes," complete Schedule G, Part I | 17 | х | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | لــــا | X |
| | | Form | 990 (| 2016) |

Page 4

| 1 62 | tiv Oncontrol of required extraction (common) | | | |
|-----------|--|-------------|--|--|
| 00 | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | Yes | No X |
| | Name and the second sec | 20b | | ╫ |
| b | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 200 | | ┪ |
| 21 | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | x |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | + |
| 22 | Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III | 22 | | x |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | - | | |
| 20 | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | . | | |
| | Schedule J | 23 | х | |
| 242 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | \vdash | 1 |
| a743 | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | 1 | 1 |
| | Schedule K. If "No", go to line 25a | 24a | | x |
| ь | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| Ü | any tax-exempt bonds? | 24c | | |
| н | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | 1 |
| 200 | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | x |
| b | | | | T |
| - | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ7 if "Yes," complete | | | |
| | Schedule L, Part I | 25b | | х |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | - | T |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | |
| | complete Schedule L, Part II | 26 | | x |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? if "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | , | |
| | instructions for applicable filing thresholds, conditions, and exceptions); | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | x |
| | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | x |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | x | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | if "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | |
| | Note, All Form 990 filers are required to complete Schedule O | 38 | x | ļ |

| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | | w | |
|----------|---|--------|-------|-------------|
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 21 | | | Ī |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | ĺ |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | l |
| | (gambling) winnings to prize winners? | 10 | x | |
| 2a | Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a 13 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | x | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | · | | İ |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | Х |
| b | If "Yes," enter the name of the foreign country: ▶ | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | ! |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Х |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | х |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | Х |
| . Р | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax cleductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | Ì | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | Х |
| þ | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| ¢ | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | |
| | to file Form 82827 | 7c | | x |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | İ | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 71 | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | l | 1 | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | ŀ | ľ | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | ĺ | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | 1 | - 1 | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b |] | - 1 | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | Ì | 1 | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | j | | |
| | amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | , | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | 1 | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| a | | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | ļ | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | 1 | |
| | organization is licensed to issue qualified health plans | l | | |
| c | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 148 | | х |
| <u>b</u> | | 14b | | |
| | | Form : | 990 (| 2016) |

Form 990 (2016)

THE BARACK OBAMA FOUNDATION

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response or changes in Schedule O. See instructions.

| | to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. | | | |
|----------|---|--------|------|----------|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
| Sec | tion A. Governing Body and Management | | | |
| | 1. 1 | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 11 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule D. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 11 1b | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | _ | | |
| | officer, director, trustee, or key employee? | | | X |
| . 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | ۱ |
| | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | x |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | |
| | more members of the governing body? | 7a | | Х |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| | persons other than the governing body? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | · | |
| а | The governing body? | 8a | Х | |
| ь | Each committee with authority to act on behalf of the governing body? | d8 | Х | |
| . 9 | is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | , | |
| Ministra | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | Ċ | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 128 | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | <u> </u> |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | in Schedule O how this was done | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | X | |
| | Other officers or key employees of the organization | 15b | X | |
| - | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| | taxable entity during the year? | 16a | | x |
| h | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | |
| _ | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a | vallab | le | |
| | for public inspection, indicate how you made these available. Check all that apply. | | | |
| | X Own website X Another's website X Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and | finan | cial | |
| 10 | statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: | | | |
| e.U | THE BARACK OBAMA FOUNDATION C/O JONABEL RUSSETTE, DIR OF ACCT. & ADM | | | |
| | 5235 SOUTH HARPER CT, STE, 1140, CHICAGO, IL 60615 | | | |
| 62200 | SEE SCHEDULE O FOR FULL LIST OF STATES | Form | 990 | (2016 |

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MiSC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| | (list any hours for | ă | | ICI N C | | is bol | | Reportable compensation from | (E) Reportable compensation from related | Estimated amount of other |
|--|--|----------|------------------------------------|----------|--------------|------------------------------|----------|--|--|--|
| · | hours for § | | Institutional trust ina | Pficer | Кеу атріаува | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) MARTIN H. NESBITT | 10.00 | | | Γ | | | Π | | | |
| DIRECTOR/CHAIRMAN | | ж | | х | <u> </u> | | | 0. | 0. | 0. |
| (2) JOHN KEVIN POORMAN | 10.00 | | | | | | | | | |
| DIRECTOR/PRESIDENT | | x | | x | İ | | | 0. | 0. | 0. |
| (3) DAVID PLOUFFE | 1.00 | | | | | | | | | |
| DIRECTOR/VP/SECRETARY | | x | | х | <u> </u> | | | 0. | 0. | 0. |
| (4) MAYA SOETORO-NG | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0, |
| (5) JULIANNA SMOOT | 1,00 | | | l | | ļ | | | | |
| DIRECTOR | | X | | | | | | 0. | 0, | 0. |
| (6) JOHN DOERR | 1.00 | | | | | | | | | |
| DIRECTOR | | X | L | | | | | 0, | 0, | 0. |
| (7) THELMA GOLDEN | 1.00 | | | İ | | ĺ | | | | |
| DIRECTOR | | X | | | | 1 | <u> </u> | 0, | 0. | 0. |
| (8) DEVAL PATRICK | 1.00 | į | | | l | | | | | |
| DIRECTOR | <u></u> | X | | | | | | 0, | 0. | 0, |
| (9) JOHN ROGERS | 1.00 | - | l | | | | | | | |
| DIRECTOR | | X | | | | | | 0, | 0. | 0. |
| (10) MICHAEL SACKS | 1.00 | | | | | | | | | |
| DIRECTOR | | x | L | <u> </u> | | | | 0, | 0. | 0. |
| (11) ROBERT WOLF | 1,00 | | | | İ | | | ' | | |
| DIRECTOR | | Х | ļ | | | | | 0, | 0. | 0. |
| (12) ROBBIN COHEN | 40,00 | | | | | | | | | |
| EXECUTIVE DIRECTOR | | | <u> </u> | X | ļ | | | 490,627. | O., | 21,784. |
| (13) JONABEL RUSSETTE | 40.00 | | | | | | | | | |
| DIR OF ACCOUNTING & ADM. | | | | x | | | _ | 121,531. | 0. | 14,683. |
| (14) DAVID SIMAS | 40.00 | | | | | | | | | |
| CEO (12/20/16) | | <u> </u> | <u> </u> | X | - | _ | ļ | 0. | . 0. | 0. |
| (15) MICHAEL A. STRAUTMANIS | 40,00 | | | | | | | | | , |
| VP OF CIVIC ENGAGEMENT | | | <u> </u> | | X | | <u> </u> | 248,121. | 0. | 18,364. |
| (16) ROARK A. FRANKEL | 40,00 | | | | _ | | | | | |
| DIR. OF PLANNING AND CONSTRUCTION | | | <u> </u> | | X | | <u> </u> | 204,224. | 0, | 21,920. |
| (17) ELISABETH C. SICILIANO CHIEF OF STAFF | 40.00 | | | | x | | ĺ | 180,000, | 0. | 6,945, |

632007 11-11-16

| Part VII Section A. Officers, Directors, Trus | stees, Key Em | ploy | ees | , an | d Hi | ighe | st C | compensated Employe | es (continued) | | | | | |
|---|------------------|-------------------------------|---|---------|--|------------------------------|------------|---------------------------|--|--------------|-----------------|-------|-------|--|
| (A) | (B) | Γ | | (4 | C) | | | (D) | (E) | | (F) | 17.2 | | |
| Name and title | Average | (de | Position (do not check more than one | | | | ons | Reportable | Reportable | Es | stimate | ed | | |
| | hours per | Бох | | | ox, unless person is both an officer and a director/trustee) | | | is bot | ns ri | compensation | compensation | | nount | |
| | week | | 1 | T | | TT | | from the | from related | | other | | | |
| | hours for | g g | | | | | | organization | organizations (W-2/1099-MISC) | | pensa rom th | | | |
| | related | 50 65 | 野 | | | 122 | | (W-2/1099-MISC) | (** 23 1000 (11100) | | anizat | | | |
| | organizations | trast | raj fra | | 2 | edwo | | , | | • | d relat | | | |
| | below | ndividual trustes or director | nstitutional trustee | le: | Kay employee | Highest compensated employee | i i | | | orga | anizati | ions | | |
| | line) | in the | E | Officer | \$ | 물등 | 훈 | | | | i i i | | | |
| (18) JAMISON CITRON | 40.00 | | | | | | | | | | | | | |
| CHIEF OF STAFF TO CDO | | | | | | X | | 137,500. | 0. | | б | ,920. | | |
| (19) HILARY L. COHEN | 40.00 | | | | | | | | | | | | | |
| ADVISOR | | | | | _ | X | _ | 110,308. | 0. | | | 0. | | |
| | | | | | | | | | | | | | | |
| | | | <u> </u> | | <u> </u> | | | | | | | | | |
| | | 2 | | | | 14 1 | | 5 8 | | | | | | |
| | | Γ | | | | 311/09/1 | | | | 23 | | | | |
| | | | | | _ | | | | | | | | | |
| 3 A | | | | | | | | | 8 | | 5 | | | |
| | | | \vdash | - | - | | | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | |
| ₹ ² 1 | | 1 | j. | | | | | _ | | 170 | | | | |
| i . | | | | | | | | 22 | | | | | | |
| ************************************** | | | | | | - | | | le a | | | | | |
| 1b Sub-total | | | | - 04 | l as | | b . | 1,492,311. | 0. | | 90 | 616. | | |
| c Total from continuation sheets to Part V | | | | | | | | 0. | Β, | | | 0. | | |
| d Total (add lines 1b and 1c) | | | | | | | | 1,492,311. | 0. | | 90, | 516, | | |
| 2 Total number of individuals (including but n | | | | | | | | eceived more than \$100 | .000 of reportable | | T. V. VIIII | | | |
| compensation from the organization | | | | | *** | | | | | | | 7 | | |
| | | | | | | | | | TWO IN THE STATE OF THE STATE O | | Yes | No | | |
| 3 Did the organization list any former officer, | director, or tru | ustes | s, ke | y er | npic | yee, | or i | highest compensated er | mployee on | \neg | | | | |
| line 1a? If "Yes," complete Schedule J for s | | | | | | | | | | 3 | | X | | |
| 4 For any individual listed on line 1a, is the su | ım of reportabl | e co | mpe | ense | ation | and | i otł | ner compensation from t | the organization | 1 | | | | |
| and related organizations greater than \$15 | 0,000? If "Yes, | * ¢o | mple | ete S | Sche | dule | Jf | or such individual | | 4 | x | | | |
| 5 Did any person listed on line 1a receive or a | accrue comper | nsati | on f | rom | any | unr | elate | ed organization or Indivi | dual for services | | | | | |
| rendered to the organization? If "Yes," com | plete Schedule | g J f | or si | ıch | pers | on , | | | mariama anamana | 5 | | x | | |
| Section R. Independent Contractors | | | | 201 | 0.00 | | | | | 1 | (m | | | |

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--|---------------------|
| KATTEN, MUCHIN ROSENMAN, LLP | | |
| 525 WEST MONROE, CHICAGO, IL 60661 | LEGAL | 838,568. |
| BLUE STATE DIGITAL , 101 AVENUE OF THE | | |
| AMERICAS - 12TH FLOOR, NEW YORK, NY 10013 | MARKETING AND COMMUNICATIONS | 532,848. |
| GRENZEBACH GLIER & ASSOCIATES, INC., 401 | | |
| N. MICHIGAN AVE SUITE 2800, CHICAGO, IL | FUNDRAISING CONSULTANT | 372,937. |
| TOD WILLIAMS BILLIE TSIEN ARCHITECTS & PART | | |
| 222 CENTRAL PARK SOUTH, NEW YORK, NY 10019 | ARCHITECTS | 305,244. |
| GLENN OTIS BROWN | | 12-00-200 |
| NEW YORK, NY 10014 | DIGITAL CONSULTING | 187,500. |
| 2 Total number of independent contractors (including but not limited t \$100,000 of compensation from the organization | o those listed above) who received more than | |

Form **990** (2016)

| | | | Check if Schedule O cont | tains a respons | e or note to any lir | ne in this Part VIII | 751 | 775 | T (D) |
|---|------|--------|--|---|---|--|--|---|---|
| | | | | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |
| nts | | | Federated campaigns | | | | | | |
| 2 3 | ł | b | Membership dues | 1b | | | | | |
| S A | | | Fundraising events | | ···· | | | | |
| 5 5 | 1 | đ | Related organizations | 1d | | | | | |
| ž E | | | Government grants (contribut | - | | | | | |
| ig ig | 1 | f | All other contributions, gifts, gran | | | | | | |
| 흔등 | | | similar amounts not included abo | | 13,175,732. | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | g | Noncash contributions included in lines | : 1a-1f: \$ | | 12 175 722 | | | |
| 0 8 | | h | Total. Add lines 1a-1f | *************** | | 13,175,732. | | | <u> </u> |
| | | _ | | | Business Code | | | | |
| N.C. | 2 : | _ | 4-11-11-11-11-11-11-11-11-11-11-11-11-11 | | 1 | : | | | |
| Program Service Revenue | | b c | | | | | | | |
| E S | | d | | | | | | | |
| چ چ | Ì | e | | | · · · · · · · · · · · · · · · · · · · | | | | |
| F | 1 | f | All other program service reve | enue | | | | | |
| | | | Total. Add lines 2a-2f | | | EM HELLOWING TO STATE OF THE ST | | | |
| | 3 | | Investment income (including | | | | | | , |
| | | | other similar amounts) | | <i></i> | 29. | | | 29. |
| | 4 | | Income from investment of ta | | | | | | |
| | -5 | | Royalties | | > | | | | |
| 1 | | | | (i) Real | (ii) Personal | | ļ | ٠ | |
| | | | Gross rents | | | ÷ | | | |
| ł | | | Less: rental expenses | | | | | | |
| | | | Rental income or (loss) | | | | | | · |
| | | | Net rental income or (loss) | | | | | · · · · · · · · · · · · · · · · · · · | - |
| | 7 : | a | Gross amount from sales of | (i) Securities | | | | | |
| | | | assets other than inventory | 6,333 | - | | | | |
| | | D | Less: cost or other basis | l , | , | | | | - |
| | | _ | and sales expenses | | | | | | |
| | | | Gain or (loss) Net gain or (loss) | | | 6,331. | | | 6,331, |
| ا | | | Gross income from fundraisin | | | | | | ., |
| Revenue | ~ ` | | including \$ | | | | | | |
| Š | | | contributions reported on line | | | | 1 | | |
| . : | | | Part IV, line 18 | | a l | | | | |
| Other | ı | b | Less: direct expenses | | b | | | | |
| ١ | | | Net income or (loss) from fund | | | | | | |
| | 9 1 | 8 | Gross income from gaming at | tivities. See | | | | - | |
| | | | Part IV, line 19 | | | | | | |
| · | ı | b | Less: direct expenses | *************************************** | b | | | | |
| | | | Net income or (loss) from garr | - | <u>,</u> | | | | |
| | 10 : | 8 | Gross sales of inventory, less | | | | | | |
| | | | and allowances | | | | | | |
| | | | Less: cost of goods sold | | b | , | | | |
| - | | C | Net income or (loss) from sale | | | | | | |
| } | | | Miscellaneous Revenu | e e | Business Code | | and the same of th | | |
| | 11 / | | | | | *************************************** | | | |
| | | b | | | | | | · | |
| | • | C A | All other revenue | | | | | | |
| | | d _ | Total. Add lines 11a-11d | ····· | > | | | *************************************** | |
| - 1 | 12 | _ | Total revenue. See instructions. | | | 13,182,092. | 0. | 0. | 5,350. |
| 632009 | | | | | | | | | Form 990 (2016) |

Part IX Statement of Functional Expenses

| | Check if Schedule O contains a respons | | | | ····· |
|-----|--|-----------------------|---|---|--|
| | t include amounts reported on lines 6b, o, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 6 | Brants and other assistance to domestic organizations | | | | |
| a | ind domestic governments. See Part IV, line 21 | | | | |
| | Grants and other assistance to domestic | · | 1 | | |
| tí | ndividuals. See Part IV, line 22 | | | | |
| 3 (| Grants and other assistance to foreign | | j | | |
| c | organizations, foreign governments, and foreign | | | | |
| i | ndividuals. See Part IV, lines 15 and 16 | | | | |
| 4 8 | Benefits paid to or for members | | | | |
| 5 (| Compensation of current officers, directors, | | | | |
| ŧ | rustees, and key employees | 1,146,581. | 636,696. | 421,525. | 88,360 |
| 6 (| Compensation not included above, to disqualified | | | | |
| p | persons (as defined under section 4958(f)(1)) and | | 1 | | |
| p | persons described in section 4958(c)(3)(B) | | | | |
| 7 (| Other salaries and wages | 482,653. | 276,119. | 77,816. | 128,718 |
| | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| | Other employee benefits | 85,674. | 44,216. | 32,117. | 10,340 |
| | Payroll taxes | 103,550. | 57,067. | 31,812. | 14,67 |
| | Fees for services (non-employees): | | | | |
| | Vanagement | | | | , |
| | egal | 156,772. | 69,765. | 41,769. | 45,231 |
| | Accounting | 15,344. | | 15,344. | |
| | _obbying | | | | |
| | Professional fundraising services. See Part IV, line 17 | 578,579. | | | 578,57 |
| - | nvestment management fees | | NAME OF THE PARTY | | |
| | Other. (If line 11g amount exceeds 10% of line 25, | , | | | |
| | column (A) amount, list line 11g expenses on Sch Q.) | 415,961. | 356,128. | 59,557. | 276 |
| | Advertising and promotion | 1,291,268. | 1,103,749. | 140,319. | 47,200 |
| | Office expenses | 140,503. | 53,473, | 75,536. | 11,49 |
| | information technology | 137,730. | | 74,720. | 63,010 |
| | | | | | ······································ |
| | Royalties | | | | |
| | Occupancy | 176,150. | 131,454. | 14.093. | 30,603 |
| | Travel Payments of travel or entertainment expenses | | | | · |
| | | | | | |
| | for any federal, state, or local public officials | 65,891. | 29,206. | 208 | 36,47 |
| | Conferences, conventions, and meetings | | | | |
| | Interest | | | | |
| | Payments to affiliates | 44,138. | 39,821. | 4.113. | 204 |
| | Depreciation, depletion, and amortization | 29,482. | | 29,482. | |
| | Insurance | 27,302. | | 27,702. | |
| | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| 8 | | | | | |
| b . | | | | | ************************************** |
| c . | | | | | |
| ď | | | | .: | |
| | All other expenses | | | | · · · · · · · · · · · · · · · · · · · |
| 25 | Total functional expenses. Add lines 1 through 24e | 4,871,276. | 2,797,694. | 1,018,411, | 1,055,173 |
| | Joint costs. Complete this line only if the organization | | | | |
| ı | reported in column (B) joint costs from a combined | i | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here ht following SOP 88-2 (ASC 858-720) | | | | |

| | | Check if Schedule O contains a response or not | a to any sine | I I I I I I I I I I I I I I I I I I I | | ````` | |
|-----------------------------|-----|--|--------------------|---|--------------------------|------------------|---|
| | | · | | | (A) Beginning of year | | (B) End of year |
| T | 1 | Cash - non-interest-bearing | | | 2,348,817. | 1 | 6,753,927. |
| - | | Savings and temporary cash investments | | | | 2 | |
| | | Pledges and grants receivable, net | | | 340,557. | 3 | 2,742,519 |
| - | 4 | Accounts receivable, net | | J. | | 4 | 53,089 |
| - [| 5 | Loans and other receivables from current and for | | | | | |
| | | trustees, key employees, and highest compensa- | ted employ | ees. Complete | | | |
| | | Part II of Schedule L. | | 1 | | 5 | |
| | 6 | Loans and other receivables from other disquali | fied persons | s (as defined under | | | |
| - 1 | | section 4958(f)(1)), persons described in section | 4958(c)(3)(| B), and contributing | | | |
| | | employers and sponsoring organizations of sect | ion 501(c)(9 |) voluntary | | | |
| . | | employees' beneficiary organizations (see instr). | Complete F | Part II of Sch L | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | | Inventories for sale or use | | 8 | | 8 | |
| | 8 | Prepaid expenses and deferred charges | | | 7,497. | 9 | 14,073 |
| | 9 | Land, buildings, and equipment: cost or other | [[| | | | |
| | 108 | basis. Complete Part VI of Schedule D | 100 | 338,717. | | | |
| | | basis. Complete Part VI of Schedule 2 | 10h | 59,276. | 32,494, | 10c | 279,441 |
| ļ | | Less: accumulated depreciation | | | | 11 | |
| - 1 | 11 | Investments - publicly traded securities Investments - other securities. See Part IV, line | | | | 12 | |
| 1 | 12 | Investments - other securities. See Part IV, line Investments - program-related. See Part IV, line | | | | 13 | · · · · · · · · · · · · · · · · · · · |
| | 13 | | | 3 | | 14 | W |
| | 14 | Intangible assets | | 1,261,208. | 15 | 3,605,564 | |
| | 15 | Other assets. See Part IV, line 11 | 3,990,573. | 16 | 13,448,613 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | 1,412,592. | 17 | 2,559,816 | | |
| | 17 | Accounts payable and accrued expenses | | | 18. | | |
| | 18 | Grants payable | | 19 | | | |
| | 19 | Deferred revenue | | | | 20 | |
| | 20 | Tax-exempt bond liabilities | | | 21 | , | |
| | 21 | Escrow or custodial account liability. Complete | | | | ~! | *************************************** |
| S | 22 | Loans and other payables to current and forme | r officers, di | rectors, trustees, | | | |
| 3 | | key employees, highest compensated employe | | | | 22 | |
| Liabilities | | Complete Part II of Schedule L | | | | 23 | |
| • | 23 | Secured mortgages and notes payable to unrel | ated third p | arties | | | |
| | 24 | Unsecured notes and loans payable to unrelate | d third part | 95 | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | yables to re | elated third | | | |
| | | parties, and other liabilities not included on line | s 17-24). Co | implete Part X of | | 65 | |
| | | Schedule D | **** | , | 1 410 500 | 25 | 2,559,816 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 1,412,592. | 26 | 2,335,020 |
| | | Organizations that follow SFAS 117 (ASC 95 | B), check h | ere 📂 🔼 and | | | |
| e e | | complete lines 27 through 29, and lines 33 a | nd 34. | | 2 24 540 | | 0 146 278 |
| Ē | 27 | Unrestricted net assets | | | 2,244,648. | - | 8,146,278 |
| <u>~</u> | 28 | Temporarily restricted net assets | | *************************************** | 333,333. | 28 | 2,742,519 |
| <u> </u> | 29 | Permanentiy restricted net assets | | | | 29 | |
| Þ | 1 | Organizations that do not follow SFAS 117 (| \SC 958), c | heck here 📂 📖 | | | |
| 5 | | and complete lines 30 through 34. | | | | | |
| 13 | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| Ď | 31 | Paid-in or capital surplus, or land, building, or a | | | | 31 | |
| Net Assets of Fund Balances | 32 | Retained earnings, endowment, accumulated i | ncome, or o | ther funds | | 32 | |
| ž | 33 | Total net assets or fund balances | | ********************** | 2,577,981. | 33 | 10,888,797 |
| | 34 | Total liabilities and net assets/fund balances | | | 3,990,573. | 34 | 13,448,613 |

| Form | 1990 (2016) THE BARACK OBAMA FOUNDATION | 46-4950751 | | Pa | ge 12 |
|------|---|------------|---------|----------|----------|
| Pa | rt XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | ******* | | <u> </u> |
| | | 1 | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | | ,092. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | ,276. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | <u> </u> | ,816. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | _4 | 2 | ,577 | ,981. |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 10 | ,888 | ,797. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check If Schedule O contains a response or note to any line in this Part XII | | ., | ***** | ᆜ |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | 0. | | | ļ |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | ' | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | i | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2ხ | X | |
| | if "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | ********** | 2c. | Х. | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir | ngle Audit | | | |
| | Act and OMB Circular A-133? | | За | | x |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ | red audit | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |
| | | | Form | 990 | (2016) |

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Ravenue Service

Name of the organization

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

OMB No. 1545-0047

Open to Public Inspection

| | | | RACK OBAMA FOUN | | | | | | 6-4950751 | |
|-----|-------|---|-------------------------------|---|-----------------------|--|------------------|---------------|----------------------------|--|
| P | art l | Reason for Public | Charity Status (| All organizations must c | omplete th | is part.) S | ee instruction | s. | | |
| The | organ | ganization is not a private foundation because it is: (For lines 1 through 12, check only one box.) | | | | | | | | |
| 1 | | A church, convention of ch | urches, or association | on of churches describe | d in sectio | on 170(b)(° | 1)(A)(i). | | | |
| 2 | | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990 EZ).) | | | | | | | | |
| 3 | | A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). | | | | | | | | |
| 4 | | A medical research organiz | ation operated in co | njunction with a hospita | i describe | d in sectio | n 170(b)(1)(A |)(iii). Enter | the hospital's name, | |
| | | city, and state: | | | | | | | | |
| 5 | | An organization operated for | or the benefit of a co | llege or university owne | d or opera | ited by a g | ovemmental (| unit descri | bed in | |
| | | section 170(b)(1)(A)(iv). (0 | Complete Part II.) | | | | | | | |
| 6 | | A federal, state, or local go | vernment or governm | nental unit described in | section 1 | 70(b)(1)(A) | (v). | | | |
| 7 | X | An organization that norma | illy receives a substa | ntial part of its support | from a gov | /emmental | l unit or from t | he genera | l public described in | |
| | | section 170(b)(1)(A)(vi). (C | omplete Part II.) | | | | | | | |
| 8 | | A community trust describe | ed in section 170(b) (| (1)(A)(vi). (Complete Par | t II.) | | | | | |
| 9 | | An agricultural research org | ganization described | in section 170(b)(1)(A) | (ix) operati | ed in conju | unction with a | land-grant | t college | |
| | | or university or a non-land- | grant college of agric | ulture (see instructions) | . Enter the | name, cit | y, and state o | f the collec | ge or | |
| | | university: | | | | | , | | | |
| 10 | | An organization that norma | illy receives: (1) more | than 33 1/3% of its su | port from | contributi | ons, member | ship fees, a | and gross receipts from | |
| | | activities related to its exer | npt functions - subje | ct to certain exceptions | , and (2) no | o more tha | in 33 1/3% of | its suppor | t from gross investment | |
| | | income and unrelated busin | ness taxable income | (less section 511 tax) fr | om busine | esses acqu | ired by the or | ganization | after June 30, 1975. | |
| | , | See section 509(a)(2). (Cor | mplete Part III.) | • | | | | | | |
| 11 | | An organization organized | and operated exclus | ively to test for public s | afety. See | section 50 | 09(a)(4). | | | |
| 12 | | An organization organized | and operated exclus | ively for the benefit of, t | o perform | the functio | ons of, or to ca | arry out the | e purposes of one or | |
| | | more publicly supported or | ganizations describe | ed in section 509(a)(1) o | r section | 509(a)(2). | See section 5 | 509(a)(3), (| Check the box in | |
| | f | lines 12a through 12d that | | | | • | | - | | |
| 8 | · L | J Type L A supporting orga | anization operated, s | upervised, or controlled | by its sup | ported org | ganization(s), 1 | typically by | y glving | |
| | | the supported organization | on(s) the power to re | gularly appoint or elect | a majority | of the dire | ctors or truste | es of the s | supporting | |
| | | organization. You must c | complete Part IV, Se | ections A and B. | | | | | | |
| b | · | J Type II. A supporting org | anization supervised | i or controlled in connec | tion with it | ts support | ed organizatio | n(s), by ha | aving | |
| | | control or management o | f the supporting org | anization vested in the s | ame perso | ons that co | ontrol or mana | ige the sup | ported | |
| | r | organization(s). You mus | - | | | | | | • | |
| C | : | | | - · | | | | lly integrat | ed with, | |
| | | its supported organizatio | , , , | | | | | | | |
| C | I L | ☐ Type III non-functionally | - , , | = = : | | | | _ | . , | |
| | | that is not functionally int | - | - - | | | - | d an attent | iveness | |
| | | requirement (see instruct | • | • | | | | | | |
| е | · L | Check this box if the orga | | | | | Type I, Type | II, Type III | | |
| | _ | functionally integrated, or | | nally integrated support | ing organi | zation. | | | | |
| | | or the number of supported of | | *************************************** | | | | | , | |
| 9 | | ride the following information Name of supported | about the supporte | d organization(s). (iii) Type of organization | i (iv) is the orga | inization listed | (v) Amount of | mnetanı | (vi) Amount of other | |
| | , | organization | (n) sate | (described on lines 1-10 | in your payemi Yes | ing document? | support (see in | | support (see instructions) | |
| | | | | above (see instructions)) | 165 | 140 | | | | |
| | | | · | | | | | | | |
| | | | | | | | | | <u> </u> | |
| | | | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | **** | | | | | | |
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| | | | | | | | | | | |

Page 2

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | ction A. Public Support | | | | | | |
|------|--|---------------------------------------|-----------------|---|------------------|---|-------------|
| Cale | ndar year (or fiscal year beginning in) 📂 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | Include any "unusual grants.") | | | 5,434,877. | 1,916,247. | 13,175,732. | 20,526,856. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | 1 | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | * |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | 5,434,877. | 1,916,247. | 13,175,732. | 20,526,856. |
| 5 | The portion of total contributions | | | 1 | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | |
| | Public support, Subtract line 5 from line 4. | | | | | | 20,526,856. |
| | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 📂 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 7 | Amounts from line 4 | | | 5,434,877. | 1,916,247. | 13,175,732. | 20,526,856. |
| 8 | Gross income from interest, | | | | | 1 | |
| | dividends, payments received on | | | | | 1 | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | 19. | 6,360 | 6,379. |
| 9 | Net income from unrelated business | | | | | Ì | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | <u> </u> | | | 20,533,235. |
| | Gross receipts from related activities, | · · · · · · · · · · · · · · · · · · · | | • > • • • • • • • • • • • • • • • • • • | | 12 | |
| 13 | First five years. If the Form 990 is for | = | | | | | |
| 800 | organization, check this box and storetion C. Computation of Publ | here | rcentage | | **************** | | |
| - | Public support percentage for 2016 (| | | | | 14 | 0/ |
| | ,, , , = , , | | | | | 15 | % % |
| | Public support percentage from 2015 | | | | | | |
| 168 | 33 1/3% support test - 2016. If the | - | | | | | <u> </u> |
| | stop here. The organization qualifies 33 1/3% support test - 2015. If the organization | | _ | | | | |
| £ | | | | | | | |
| a~- | and stop here. The organization qual 10% -facts-and-circumstances tes | | | | | | |
| 1/8 | and if the organization meets the *fac | | | | | | |
| | meets the "facts-and-circumstances" | | | | | | |
| | meets the "tacts-and-circumstances" 10% -facts-and-circumstances tes | | | | | | |
| E | more, and if the organization meets to | _ | | | | | O/B UI |
| | organization meets the "facts-and-cire | | | | | | » [|
| 40 | Private foundation. If the organization | | - | | | *************************************** | |
| 10 | retivate roundation. If the organization | ALCHO CHECK E | DOVOLUME 19' 10 | a, 100, 17 a , 01 170. | | dule A (Form 990 | |
| | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2016 THE BARACK ORAMA FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

| (Complete only if you checked the box on line 10 of Part I or if the organization falled to qualify under Part II. If the | organization fails to |
|---|-----------------------|
| qualify under the tests listed below, please complete Part !!.) | |

| Sec | ction A. Public Support | | | | | | |
|------|---|----------------------|----------------------|------------------------|----------------------|---------------------|-------------|
| Cale | ndar year (or fiscal year beginning in) 🕪 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | <u> </u> | | |
| | membership fees received. (Do not | | | | Į | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, | | | | 1 | | |
| | merchandise sold or services per- | | | | | | |
| | formed, or facilities furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | · | | | | |
| | are not an unrelated trade or bus- | | | | 1 | | |
| | iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | - | | | | | |
| | or expended on its behalf | | | | | ļ | |
| 5 | The value of services or facilities | | | | | | |
| _ | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | : | | | | |
| | Total. Add lines 1 through 5 | | | 1 | | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| / 2 | 3 received from disqualified persons | | | | | | |
| ŀ | Amounts included on lines 2 and 3 received | | | | | | |
| | from other than disqualified persons that | | | | | | |
| | exceed the greater of \$5,000 or 1% of the | | | | | | |
| | amount on line 13 for the year | | | | ļ | _ | |
| | Add lines 7a and 7b | <u> </u> | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | 1 | <u> </u> | I DOMOSHIVATORIS | |
| | ction B. Total Support | | | (1004 | | 1 () 0040 | 10 T-1-1 |
| | endar year (or fiscal year beginning in) 🕪 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | ļ | | |
| | and income from similar sources | | | | | | |
| Ł | Unrelated business taxable income | | | |] | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| (| Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | ŀ | |
| | activities not included in line 10b, whether or not the business is | | | | | | |
| | regularly carried on | | | | | | |
| 12 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital assets (Explain in Part VI.) | | | 1 | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| | First five years. If the Form 990 is fo | r the organization's | s first, second, thi | rd, fourth, or fifth t | ax vear as a section | n 501(c)(3) organiz | ation. |
| • | | | | | | | > |
| Se | ction C. Computation of Publ | ic Support Pe | rcentage | | | | |
| | Public support percentage for 2016 (| | | column (fi) | | 15 | % |
| | Public support percentage from 2015 | | | | | 16 | % |
| * | ction D. Computation of Inve | | _ | | | | |
| 17 | | | | | | 17 | % |
| | Investment income percentage from | | | | | 18 | % |
| | a 33 1/3% support tests - 2016. If the | | | | | | |
| 191 | more than 33 1/3%, check this box a | | | | | | |
| | | | | | | | |
| ŀ | 33 1/3% support tests - 2015. If the | | | | | | |
| _ | line 18 is not more than 33 1/3%, cho | | | | | | |
| 20 | Private foundation. If the organization | on did not check a | box on line 14, 19 | a, or 19b, check t | nis dox and see in | structions , |) |

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. if you checked 12d of Part I, complete Sections A and D, and complete Part V.)

| Section A | ۱. All | Support | ing Or | ganizations |
|-----------|--------|---------|--------|-------------|
|-----------|--------|---------|--------|-------------|

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) numoses.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | Yes | No |
|-------------|-----|-------------|
| 1 | | |
| 2. | | |
| 3a | | |
| 3b | | |
| 3c | | |
| 4a | , | |
| 4b | | |
| | | |
| 4c | | |
| | | |
| 5a | | |
| 5b 5c | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9a | | |
| 9b | | |
| 9c | | |
| 10a | | |
| 10b | | |

632025 09-21-16

2b

3a

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supportin | g Orga | nizations | |
|------|---|----------------|--------------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g trust or | Nov. 20, 1970 (explain in | Part VI.) See instructions. A |
| | other Type III non-functionally integrated supporting organizations must co | mplete S | ections A through E. | |
| Sect | ion A - Adjusted Net Income | (A) Prior Year | (B) Current Year (optional) | |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions) | 4 | | · |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | y integra | ted Type III supporting org | anization (see |
| - | instructional | | | • |

Schedule A (Form 990 or 990-EZ) 2016

| Pa | t V Type III Non-Functionally Integrated 509 | (a)(3) Supporting Org | anizations (continued) | |
|----------|---|---|--------------------------------|-----------------|
| Sect | on D - Distributions | | | Current Year |
| _1 | Amounts paid to supported organizations to accomplish exe | | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpos | es of supported organization | ns | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | |
| _6_ | Other distributions (describe in Part VI). See instructions | | | |
| _7_ | Total annual distributions. Add lines 1 through 6 | *** | | |
| 8 | Distributions to attentive supported organizations to which t | he organization is responsiv | 8 | |
| | (provide details in Part VI). See instructions | | | |
| 9 | Distributable amount for 2016 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | |
| | | (i) | (ii) | (iii) |
| Secti | on E - Distribution Allocations (see instructions) | Excess Distributions | Underdistributions Pre-2016 | Distributable |
| | on E - Didd Dudiot Moodians (see that belond) | | F16-20 10 | Amount for 2016 |
| 1 | Distributable amount for 2016 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2016 (reason- | | | |
| | able cause required- explain in Part VI). See instructions | | | |
| 3 | Excess distributions carryover, if any, to 2016: | | | |
| а | | | | |
| <u>b</u> | ······································ | ······································ | | |
| c | From 2013 | | | |
| <u>d</u> | From 2014 | | | |
| e | From 2015 | | | |
| f | Total of lines 3a through e | | · · · · | |
| | Applied to underdistributions of prior years | 18 1 | | |
| h | Applied to 2016 distributable amount | | ļ | |
| i | Carryover from 2011 not applied (see instructions) | | | |
| | Remainder, Subtract lines 3g, 3h, and 3i from 3f. | | | <u> </u> |
| 4 | Distributions for 2016 from Section D, | | | · |
| | line 7: \$ | | | |
| a | Applied to underdistributions of prior years | | | |
| <u>b</u> | Applied to 2016 distributable amount | | | |
| | Remainder. Subtract lines 4a and 4b from 4 | | | |
| 5 | Remaining underdistributions for years prior to 2016, if | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | - | |
| | than zero, explain in Part VI. See instructions | | | |
| 6 | Remaining underdistributions for 2016. Subtract lines 3h | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | |
| | Part VI. See instructions | w | | |
| 7 | Excess distributions carryover to 2017. Add lines 3] | | | |
| ~~~ | and 4c | | | |
| 8 | Breakdown of line 7: | | | |
| 8 | | *************************************** | | |
| <u>b</u> | Excess from 2013 | M | | |
| c | Excess from 2014 | | | |
| d | Excess from 2015 | | | |
| e | Excess from 2016 | | | |

Schedule A (Form 990 or 990-EZ) 2016

| Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part III, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See Instructions.) | rt V, |
|---|-------------|
| PART II SECTION E LINE 13 | |
| THE FOUNDATION DATE OF INCEPTION WAS JANUARY 31,2014. | |
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Employer identification number Name of the organization 46-4950751 THE BARACK OBAMA FOUNDATION Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 IL. 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, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______ \$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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) (2016)

Name of organization

Employer (dentification number

| THE BAR | ACK ORAMA FOUNDATION | 46- | 46-4950751 | | | |
|------------|---|----------------------------|--|--|--|--|
| Part I | Contributors (See instructions). Use duplicate copies of Part I if addition | nal space is needed. | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) s Type of contribution | | | |
| 1 | CAMPION FOUNDATION 1904 THIRD AVENUE, SUITE 405 SEATTLE, WA 98101 | \$ 500,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 2 | DANIEL LEVIN & AMBASSADOR FAY HARTOG-LEVIN CHICAGO, IL 60654 | \$1,000,000. | Person X Payroli Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 3 | MARILYN AND JAMES SIMONS NEW YORK, NY 10010 | \$330,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 4 | GEORGE LUCAS FAMILY FOUNDATION SAN RAFAEL, CA 94912 | \$1,000,000. | Person X Payroll | | | |
| (B) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 5 | HUTCHINE FAMILY FOUNDATION MEW YORK, MY 10019 | \$1,000,000. | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 6 | AVRAM AND JILL GLAZER PALM BEACH, FL 33480 | \$ | Person X Payroll | | | |

Employer Identification number Name of organization

| THE BAR | ACK OBAMA FOUNDATION | | 46-4950751 |
|------------|--|---------------------------|---|
| Part I | Contributors (See instructions). Use duplicate copies of Part I if addition | nal space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) S Type of contribution |
| 7 | ANN & JOHN DOERR SAN CARLOS, CA 94070 | \$1,013, | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) s Type of contribution |
| 8 | AMBASSADOR LOUIS B. & MARJORIE SUSMAN \$ CHICAGO, IL 60610 | | Person X Payroli Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) s Type of contribution |
| 9 | NATIONAL PHILANTEROPIC TRUST 65 CASCADE CREEK LANE LAS VEGAS, NV 89113 | \$1,000, | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) s Type of contribution |
| 10 | NICHOLAS LOGOTHETIS NEW YORK, NY 10023 | \$ 295, | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) Type of contribution |
| 11 | P. C. BOX 77050% CINCINNATI, OH 45277 | \$1,003, | Person X Psyroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZiP + 4 | (c) Total contribution | (d) Type of contribution |
| 12 | SILICON VALLEY COMMUNITY FOUNDATION 2440 WEST EL CAMINO REAL, SUITE 300 MOUNTAIN VIEW, CA 94040-1498 | \$ 500,6 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

| Schedule | B (Form 990, 990-EZ, or 990-PF) (2016) | | Page | | |
|--|---|--------------------------------|-------------------------------|--|--|
| The same of the sa | rganization | Епър | mployer identification number | | |
| THE BAR | ACK CBAMA FOUNDATION | 4 | 6-4950751 | | |
| 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 | | |
| 13 | THE HAUPTMAN FAMILY FOUNDATION | \$ | Person X Payroll Noncash | | |

| 13 | THE HAUPTMAN FAMILY FOUNDATION BEVERLY HILLS, CA 90212 | \$1,000,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 14 | THE JOHN & MARCIA GOLDMAN FOUNDATION SAN FRANCISCO, CA 94105 | \$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 15 | THE MIAMI FOUNDATION 40 NW 3RD STREET, SUITE 105 MIAMI, FL 33128-1835 | \$1,000,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 16 | THE NEW YORK COMMUNITY TRUST 909 THIRD AVENUE NEW YORK, NY 10022 | \$330,000. | Person X Payroll |
| (a) | (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 |
| -1-9 | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

623452 10-18-16

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer Identification number

THE BARACK OBAMA FOUNDATION

46-4950751

| (a) No. from Part i | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|------------------------------|--|--|--|
| | STOCK | | |
| 7 | | | |
| | | \$ 1,013,232. | 04/25/16 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| | | \$ | Commence of the Commence of th |
| (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 |
| | | | · · · · · · · · · · · · · · · · · · · |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See Instructions) | (d) Date received |
| | | | *************************************** |
| | | \$ | |

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 6 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

| Des | t Organizations Maintaining Donor Advised Funds | or Other Cimilar Funds or A | 46-4950/5I |
|-------|---|--|--|
| Pai | | or Other Similar Funds of A | ACCOUNTS. Complete if the |
| | organization answered "Yes" on Form 990, Part IV, line 6. | Donor advised funds | b) Funds and other accounts |
| _ | | DOTO: AUVISEU IUTUS | b) Fullus and Onlei accounts |
| 1 | Total number at end of year | · · · · · · · · · · · · · · · · · · · | |
| 2 | Aggregate value of contributions to (during year) | | A |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that | Abo and being the state of the | |
| 5 | | | |
| _ | are the organization's property, subject to the organization's exclusive in | | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in v | | * |
| | for charitable purposes and not for the benefit of the donor or donor ad- | • • • • | |
| Par | impermissible private benefit? † II Conservation Easements. Complete if the organization a | | |
| · | Purpose(s) of conservation easements held by the organization (check a | · · · · · · · · · · · · · · · · · · · | , sitto 7. |
| 1 | Preservation of land for public use (e.g., recreation or education) | Preservation of a historically | impartant land area |
| | Protection of natural habitat | Preservation of a certified hi | • |
| | Preservation of open space | E Preservation of a certified fi | Stone Structure |
| | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified consen | vation commoution in the form of a co | |
| | day of the tax year. | | Heid at the End of the Tax Year |
| a | Total number of conservation easements | | 22 |
| þ | Total acreage restricted by conservation easements | | <u>2b</u> |
| c | Number of conservation easements on a certified historic structure inclu | | 2c |
| a | Number of conservation easements included in (c) acquired after 8/17/0 | • | |
| _ | listed in the National Register | | [2d] |
| 3 | Number of conservation easements modified, transferred, released, exti | nguished, or terminated by the organ | lization during the tax |
| | year | | |
| 4 | Number of states where property subject to conservation easement is lo | | |
| 5 | Does the organization have a written policy regarding the periodic monit | | n. n. |
| _ | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling o | r violations, and emorcing conservation | on easements during the year |
| | Amount of expenses incurred in monitoring, inspecting, handling of viola | tions and enforcing apparential as | and the state of the same |
| 7 | • | idons, and enforcing conservation ea | isements during the year |
| ~ | Does each conservation easement reported on line 2(d) above satisfy the | - vocation and marking 170(h)/4)/5 | n m |
| 8 | | | |
| _ | and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easeme | | |
| 9 | include, if applicable, the text of the footnote to the organization's finance | | |
| | | dai statements that describes the ort | janization's accounting for |
| Dat | conservation easements. t III Organizations Maintaining Collections of Art, His | torical Treasures or Other | Similar Accate |
| 1 (2) | Complete if the organization answered "Yes" on Form 990, Part I | - | Millia Flogoto. |
| 40 | If the organization elected, as permitted under SFAS 116 (ASC 958), no | | ad halanna choot works of act |
| 110 | historical treasures, or other similar assets held for public exhibition, edu | | |
| | the text of the footnote to its financial statements that describes these i | | public service, provide, in Fait Alli, |
| | | | signed about world of ort bistorical |
| đ | If the organization elected, as permitted under SFAS 116 (ASC 958), to | · | · |
| | treasures, or other similar assets held for public exhibition, education, or | research in turtherance or public ser | vice, provide the following amounts |
| | relating to these items: | | . |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | 4 |
| - | | All and the second seco | |
| 2 | If the organization received or held works of art, historical treasures, or o | | provide |
| | the following amounts required to be reported under SFAS 116 (ASC 95 | | |
| | Revenue included on Form 990, Part VIII, line 1 | | |
| | Assets included in Form 990, Part X | | № 5 |
| LHA | For Paperwork Reduction Act Notice, see the Instructions for Form | 990. | Schedule D (Form 990) 2016 |

632051 08-29-16

| Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets; continued so Labor to application's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply): | Sched | dule D (Form 990) 2016 THE BARACK | OBAMA FOUNDATIO | ON | | | | 4 | 6-4950 | 751 | Pa | ige 2 |
|--|--------------------------|--|------------------------|---------------|--------------|----------------|---|--------------|------------|-----------------|---------|-------|
| Check all that apply : | Par | | | | | | | | | | | |
| a | 3 | Using the organization's acquisition, accessi | on, and other record | ls, check a | ny of the t | following that | are a sig | nificant | use of its | collection | ı items | ŝ |
| b Scholarly research e | | (check all that apply): | | | | | | | - | | | |
| Peacrovation for future generations 4 Provide a discription of the organization's celections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or neceive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection? 1 Yes No Part IV I Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b if "Yes," explain the amangement in Part XIII and complete the following table: 1 Ending balance 2 Bold the organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability? 2 In the organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability? 3 Part V Endowment Funds. Complete if the organization has been provided on Part XIII 4 Exercise the extraction of the organization answered "Yes" on Form 990, Part X, line 10. 1a Beginning of year balance 1b Contributions 1c Not investment earnings, gains, and loses of Contributions 2 Not investment earnings, gains, and loses of Contributions 3 End of year balance 3 End of year balance 4 Exercise the estimated percentage of the current year end balance (line 1g, column (al) heid as: 2 Board designated or qualisandowment | а | ` , | | | | | | | | | | |
| 4 Provise a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 to be sold to raise studis rather than to be maintained as part of the organization's collection? | b | | | | | | | | | | | |
| Section of the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be amplitationed as part of the organization solicition? Yes No reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or line 1, yes, explain the arrangement in Part Xill and complete the following table: Beginning balance | | | | | | | | | | | | |
| to be sold for raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. In the organization and the part XIII and complete the following table: | | | | | | | | | se in Par | t XIII. | | |
| Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yec" on Form 990, Part IV, line 9, or reported an amount on Form 980, Part X ine 21. Is the organization an agent, futuree, custodial or other intermediary for contributions or other assets not included on Form 990, Part X ine 21. I | 5 | During the year, did the organization solicit of | r receive donations | of art, histo | orical treas | sures, or othe | r similar a | essets | | ٦. | | |
| reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If Yes,* explain the arrangement in Part Xill and complete the following table: C Beginning balance c Beginning balance d Additions during the year 1 te 1 c 4 Amount 1 d 2 Distributions during the year 1 te 1 f 2 Distributions during the year 1 te 1 f 2 Distributions during the year 1 te 2 Distributions during the year 1 te 2 Distributions during the year 1 te 2 Distributions during the year 1 to 3 Beginning of year balance 3 Beginning of year balance 4 Description of year balance 5 Contributions 6 Net investment earnings, gains, and losses G Grants or escholarships 6 Other expenditures for facilities and programs 7 Administrative expenses 9 End of year balance 9 Cother expenditures for facilities and programs 8 Administrative expenses 9 End of year balance 9 Temporally restricted endowment 5 Administrative expenses 9 End of year balance 9 Temporally restricted endowment 5 Administrative expenses 9 End of year balance on the current year end balance (line 1g, column (a)) held as: 1 a Begrid designated or quasi-endowment 8 Begrid designated or quasi-endowment 9 A three endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 5 If yes no line 3a(0), are the related organizations listed as required on Schedule R7 4 Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value 1 b Buildings 1 Land 1 Buildings 1 Land 1 Buildings 1 Land 1 Buildings 2 Lasehold improvements 2 Cother (c) Accumulated (d) Book value 2 Cother (e) Accumulated (d) Book value 2 Cother (e) Accumulated (d) Equipment (d) Book value 2 Cother (e) Accumulated (d) Book value 2 Cother (e) Accumulated (d) Equipment (e) Chern (e) Accumulated (e) Chern (e) Ac | | | aintained as part of t | he organiz | ation's co | llection? | | | , Ц | Yes | | No |
| 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If Yes,* explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If Yes,* explain the arrangement in Part XIII. Check here if the explaination has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered Yes* on Form 990, Part IV, line 10. Ta Beginning of year balance b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back If Administrative expenses g End of year balance b Cortex expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment // Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment // Administrative expenses g End of year balance If Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrative expenses g End of year balance Administrativ | Par | | | ete if the or | ganization | answered " | Yes" on F | orm 990 | , Part IV, | line 9, or | | |
| on Form 990, Part X7 b If Yes, "axplain the arrangement in Part XIII and complete the following table: Complete C | | | | | | | | | | . | | |
| b If "Yes," explain the arrangement in Part XIII and complete the following table: Armount | Ta | Is the organization an agent, trustee, custod | ian or other intermed | diary for co | ntribution | s or other ass | sets not in | rcluded | _ | 7 | | , |
| C Beginning balance 1c | | | | | | | | | L_ | J Yes | | No |
| c Beginning balance d Additions during the year 1 te 1 platification during the year 1 te 1 plating balance 2 bit the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability 1 part V plating balance 2 bit the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability 1 part V plating balance 2 bit fire year explain the armogement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al) heid as: a Board designated or quasilendowment | d | If "Yes," explain the arrangement in Part XIII | and complete the fo | illowing tab | le: | | | , | | | | |
| d Additions during the year E Distributions during the year E Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b if "Yes," explain the arrangement in Part XIII. Check here if the exclanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (f) Three years back (e) Four years back (f) Three years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Three years back (g) Four years back (g) Four years back (g) Three years back (g) Four years back (g) Four years back (g) Four years back (g) Three years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Four years back (g) Three years back (g) Four years | | | | | | | | | | Amount | | |
| e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Pervide the estimated percentage of the current year end balance (line 1g, coiumn (al) held as: a Beard designated or quasi-endowment % c Temporarily restricted endowment % c Temporarily restricted endowment % Temporarily restricted endowment % Temporarily restricted endowment % Temporarily restricted endowment % Temporarily restricted endowment % Temporarily restricted endowment % Temporarily restricted endowment % Description of line 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Ves No 3a(ii) related organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part IX, line 10. Description of property Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (a) Equipment (b) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated (d) Book value (e) Equipment (e) Accumulated (e) Equipment (e) Equipment (e) Accumulated (e) Equipment (e) Equipment (e) Accumulated (e) Equipment (e) Accumulated (e) Equipment (e) Accumulated (e) Equipment (e) Accum | ¢ | Beginning balance | | | | | | 1c | | | | |
| ## Ending balance 2a | đ | Additions during the year | | | | | | 10 | | | | : |
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| Bolif Yes, * explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part Y Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Contributions | | | | | | | | | | | | |
| Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Fo | | | | | | | | ۲۷ | ـــا , | Yes | | No |
| (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years (e) Four years (e) F | | | | | | | | | | ******* | | |
| Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations Sa(ii) as(iii) related organizations (iii) related organizations Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 305, 217, 37, 873, 267, 344, e Other Other | Par | t V Endowment Funds. Complete | | | | | | | | | | |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year belance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al) held as: a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related orga | | | (a) Current year | (b) Prio | ryear | (c) Iwo years | s Dack {c |) Inree y | ears dack | (e) Four | years t | Jack |
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| d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment \$\infty\$ % b Permanent endowment \$\infty\$ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 305,217, 37,873, 267,344. e Other 31,500, 21,403, 12,097. | | • | | | | | | | | | | |
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| a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | g | | | | | | | · | | <u></u> | | |
| b Permanent endowment % c Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | | | | e (line 1g, | column (a | i) neid as: | | | | | | |
| Temporarily restricted endowment | a | | | % | | | | | | | | |
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| Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (ii) unrelated organizations (iii) related or | ¢ | | | | | | | | | | | |
| Yes No (i) unrelated organizations 3a(i) unrelated unrelated organizations unrelated organ | | • | | | | | | | | | | |
| (i) unrelated organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment | За | | ession of the organiz | ation that a | are neid ai | no administer | rea for the | organiz | ation | г | | |
| (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment d Equipment Other 305,217, 37,873, 267,344. | | | | | | | | | | | res | IAO |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment Other Other 305,217, 37,873, 267,344. 212,097. | | | | | | | | | | | | |
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| Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation (c) Accumulated depreciation (d) Book value Buildings Leasehold improvements Equipment Equipment Other Other 305,217. 37,873. 267,344. | | | | | | | • | | ****** | 30 | | |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (investment) Description of property (b) Cost or other depreciation (c) Accumulated depreciation (d) Book value basis (investment) b Buildings c Leasehold improvements d Equipment Other 305,217 37,873 267,344 21,403 12,097 | - | | | owment fur | nas. | | | | ** | | - | |
| Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment Other Othe | Pa | | | 0 D-4 0/ 3 | inn dda D | as Esra ODA | Dort V S | 10 | | | | |
| basis (investment) basis (other) depreciation 1a Lend Buildings C Leasehold improvements C Lease | | | ····· | | | | | | | (A) E (| | |
| 1a Land b Buildings c Leasehold improvements 305,217. 37,873. 267,344. e Other 33,500. 21,403. 12,097. | | Description of property | , , , | 3 | • / | | | | a | (a) Rook | value | |
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| d Equipment 305,217. 37,873. 267,344. e Other 33,500. 21,403. 12,097. | | | | | A | | | | | | | |
| e Other 33,500. 21,403. 12,097. | | | | | | 205 217 | | 27 | 073 | | 267 3 | 164 |
| e Otio | | | | | | | | - | | | | |
| | CONTRACTOR OF THE PARTY. | | | V | /D1 15 4 | | | 41, | | · · · · · · · · | | |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2016

(7) (8)

SCHEDULE G (Form 990 or 990-EZ)

December of the Transport

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OM8 No. 1545-0047

| Internal Revenue Service Information | about Schedule G (Form 990 or 990-E2 | | s instr | uctions is at WWW.//s. | gov/form | 990. | Inspection |
|--|---|----------------|---------|------------------------|-------------|------------------------|----------------------------------|
| Name of the organization | | | | | | | ntification number |
| THE BARACE | OBAMA FOUNDATION | | | | 40 | 6-4950751 | |
| Part I Fundraising Activities required to complete this pa | Complete if the organization answ rt. | rered "Y | 'es" o | n Form 990, Part IV, | line 17. l | Form 990-E | Z filers are not |
| 1 Indicate whether the organization ra | sed funds through any of the follow | ing acti | vities. | Check all that apply | ٠. | | |
| a Mail solicitations | | | | overnment grants | | | |
| b Internet and email solicitation | | | - | nment grants | | | |
| c Phone solicitations | g L Specia | il fundra | using | events | | | |
| d 🔼 In-person solicitations | | | | | | | |
| 2 a Did the organization have a written | | | | | | X Yes | |
| key employees listed in Form 990, F b If "Yes," list the 10 highest paid Indi | | | | | | | |
| compensated at least \$5,000 by the | | iuani to | agree | ements under which | the fund | raiser is to t | D 8 |
| Compensated at least \$5,000 by the | e organización. | | | | , | | |
| (i) Name and address of individual | | (III) Nindi | Did | (iv) Gross receipts | (v) Am | ount pald | (vi) Amount paid |
| or entity (fundraiser) | (ii) Activity | have c | ustody | from activity | fun | stained by) draiser | to (or retained by) organization |
| , |) | contrib | utlons? | | listed | in col. (i) | Cryanizacon |
| LAKEFRONT STRATEGIES - | | Yes | No | | | | |
| * | SOLICITATION | | X | 13,085,286. | | 96,000. | 12,989,286. |
| GRENZEBACH, GLIER & | ADVISING/CONSULTING OF | | | | | | |
| ABSOCIATES - | SOLICITATION ACTIVITY | 1 | X | 0. | | 464,578. | -464,578. |
| SKY ADVISORY GROUP, INC | PLANNING OF FUTURE | | | | Ì | | |
| | SOLICITATION ACTIVITY | | X | O. | | 9,000. | -9,000. |
| PRATT'S LLC - | PLANNING OF FUTURE | | | | | | |
| | SOLICITATION ACTIVITY | ļ | X | 0, | | 9,000. | -9,000. |
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| Total | | | | 13,085,286. | | 578,578, | 12,506,708. |
| 3 List all states in which the organization | on is registered or licensed to solicit | contrib | utions | or has been notified | it is exe | mot from re | |
| or licensing. | | | | | | | 3 , |
| NE, MD, KA, NE, ME, NE, KJ, NE, NY, NG | C,ND,OH,OK,OR,PA,RI,SC,TN,U | T,VA, | W, AN | 7,WI | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2016

| | is G (Form 990 or 990-EZ) 2016 THE BARACK | OBAMA FOUNDATION | | | 4950751 Page |
|----------|--|--|--|--|--|
| ıt l | | | | | |
| | or fundraising event contributions and gr | | | | pts greater than \$5,00 |
| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) throug |
| | | (event type) | (event type) | (total number) | - col. (c)) |
| 1 | Gross receipts | | | | |
| 2 | Less: Contributions | | | | |
| 3 | Gross income (line 1 minus line 2) | | | | |
| 4 | Cash prizes | | | | |
| 5 | Noncash prizes | *************************************** | | | |
| 6 | Rent/facility costs | | | | |
| 7 | Food and beverages | | | | |
| | | | | | |
| 9 | Other direct expenses | | | | |
| 10 | Direct expense summary. Add lines 4 through | 9 in column (d) | A | | |
| 11 | Net income summary. Subtract line 10 from li | ne 3, column (d) | ************************************** | | |
| rt II | I Gaming. Complete if the organization a | inswered "Yes" on For | m 990, Part IV, line 19, or | reported more than | |
| | \$15,000 on Form 990-EZ, line 6a. | · · · · · · · · · · · · · · · · · · · | | | |
| | · | (a) Bingo | | (c) Other gaming | (d) Total gaming (ac |
| | | | pingo/brogressive pingo | | col. (a) through col. (|
| | | | | | |
| 1_ | Gross revenue | | | | |
| | | | | | |
| 2 | Cash prizes | | | | |
| 3 | Noncash prizes | | | | |
| 4 | Rent/facility costs | ······································ | | | |
| 5 | Other direct expanses | | | | |
| | 1 | Yes % | Yes % | Yes% | |
| • | | | | | |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| <u> </u> | wet gaming income summary, Subtract line / | irom ine i , column (0) | | ······································ | <u>!</u> |
| Ente | or the state(s) in which the organization condu | cts gaming activities: | | | |
| | | | | | Yes N |
| | | | | | |
| | | roked exemended or | terminated during the tax | year? | Yes N |
| Vere | e any of the organization's garning licenses rev | over anabetices to | • | | |
| | e any of the organization's gaming licenses re- es," explain: | | | | |
| | N | | | | |
| | 1 2 3 4 5 6 7 8 9 10 11 rt 1 2 3 4 5 6 7 8 | of fundraising event contributions and gr 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 11 Net income summary. Subtract line 10 from line in the income summary. Subtract line 10 from line in the organization of the summary. Subtract line 10 from line in the summary. Subtract line 10 from line in the income summary. Subtract line 10 from line in the summary. Subtract line 10 from line in the summary. Subtract line 10 from line in the summary. Subtract line 10 from line in the summary. Subtract line in the summary. Subtract line in the state (s) in which the organization conducts the organization licensed to conduct gaming action or summary. Subtract line in the organization licensed to conduct gaming action summary. | of fundraising event contributions and gross income on Form 9 (a) Event #1 (event type) 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) 11 Saming. Complete if the organization answered "Yes" on Fort \$15,000 on Form 990-EZ, line 6a. (a) Bingo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these | of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. Lie (a) Event #1 (b) Event #2 (event type) (event type) 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) 1 Net income summary. Subtract line 10 from line 3, column (d) 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(e) in which the organization conducts gaming activities: | of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 8b. List events with gross receipts (e) Event #1 (b) Event #2 (c) Other events (c) Other events (event type) (event type) (total number) 1 Gross receipts (event type) (event type) (total number) 2 Less: Contributions (event type) (event type) (total number) 3 Gross income (line 1 minus line 2) (event type) (total number) 5 Noncash prizes (event #2) (event type) (total number) 6 Rent/facility costs (event expenses summary. Add lines 4 through 8 in column (d) (event expense summary. Add lines 4 through 8 in column (d) (event expense summary. Add lines 2 through 8 in column (d) (event expenses summary. Add lines 2 through 8 in column (d) (event expenses summary. Add lines 2 through 8 in column (d) (event expenses summary. Add lines 2 through 8 in column (d) (event expenses summary. Add lines 2 through 8 in column (d) (event expenses summary. Add lines 2 through 5 in column (d) (event type) (event type) (forther gaming lines and the event expenses summary. Add lines 2 through 5 in column (d) (event type) (forther expenses summary. Subtract line 7 from fine 1, column (d) (event type) (forther expenses summary. Subtract line 7 from fine 1, column (d) (event type) (forther expenses summary. Subtract line 7 from fine 1, column (d) (event type) (forther expenses summary. Subtract line 7 from fine 1, column (d) (event type) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summary. Subtract line 7 from fine 1, column (d) (forther expenses summ |

| Schedule G (Form 990 or 990-EZ) 2016 THE BARACK OBAMA FOUNDATION | 46-49507 | 51 | Page 3 |
|--|--------------------------|-----------|-----------|
| 11 Does the organization conduct gaming activities with nonmembers? | L | Yes | No |
| 12 is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity f | ormed | | |
| to administer charitable gaming? | | Yes | ☐ No |
| 13 Indicate the percentage of gaming activity conducted in: | | | |
| a The organization's facility | 1 | 3a | % |
| b An outside facility | | 3b | % |
| 14 Enter the name and address of the person who prepares the organization's garning/special events books a | and records: | | |
| # Destroyed at the charge the annual hand and an annual function of the functi | | | |
| Name > | | · · | <u> </u> |
| Address > | | | |
| 15a Does the organization have a contract with a third party from whom the organization receives gaming rever | | Yes | ☐ No |
| b If "Yes," enter the amount of gaming revenue received by the organization > \$ and | the amount | | |
| of gaming revenue retained by the third party > \$ | | | |
| c If "Yes," enter name and address of the third party: | | | |
| | | | |
| Name > | | | |
| Address > | | | |
| Address | | | |
| 16 Gaming manager information: | | | |
| Name > | | | |
| Gaming manager compensation > \$ | | | |
| en (stur of an dam munided) | | | |
| Description of services provided > | | • | |
| | | | |
| | | ••• | |
| Director/officer Employee Independent contractor | | | |
| | | | |
| 17 Mandatory distributions: | | | |
| a is the organization required under state law to make charitable distributions from the gaming proceeds to | | | |
| retain the state garning license? | ******** | Yes | ☐ No |
| b Enter the amount of distributions required under state law to be distributed to other exempt organizations | or spent in the | | |
| organization's own exempt activities during the tax year > \$ | | | |
| Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and | (v); and Part III, lines | 9, 9b, 10 | 0b, 15b, |
| 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions | | | |
| | | | |
| SCHEDULE C, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS: | | | |
| | | | |
| | | <u></u> | |
| (I) NAME OF FUNDRAISER: LAKEFRONT STRATEGIES | | | |
| (1) NAME OF FUNDRALDER; INTERFACENT STREETED | | | |
| (I) ADDRESS OF FUNDRAISER: WASHINGTON, DC 20005 | | | |
| [4] UMANAMA As a management | | | |
| | | | |
| | | | |
| (I) NAME OF FUNDRAISER: GRENZEBACH, GLIER & ASSOCIATES | | | |
| | | | |
| (I) ADDRESS OF FUNDRAISER: CHICAGO, IL 60611 | | | |
| | | | |
| | | | |
| (I) NAME OF FUNDRAISER: SKY ADVISORY GROUP, INC. | | | |
| S S | chedule G (Form 99 | D or 990 | ·EZ) 2016 |

| Schedule G (Form 990 or 990-EZ) THE BARACK OBAMA FOUNDATION Part IV Supplemental Information (continued) | 46-4950751 | Page 4 |
|---|------------|--------------|
| | | |
| (I) ADDRESS OF FUNDRAISER: LOS ANGELES, CA 90049 | | |
| · · · · · · · · · · · · · · · · · · · | | |
| (II) AND THE WAY TO SEE THE PROPERTY OF THE | | |
| (I) NAME OF FUNDRAISER: PRATT'S LLC | | |
| (I) ADDRESS OF FUNDRAISER: , NEW YORK, NY 10001 | | |
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SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE BARACK OBAMA FOUNDATION

Employer identification number 46-4950751

| | art Questions Regarding Compensation | | Tv. | TNI |
|-----|--|------------------|--|----------------|
| 10 | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990 | , | Yes | No |
| HL. | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | · · | | |
| | First-class or charter travel Housing allowance or residence for personal states. | IF6 | 1 | |
| | Travel for companions Payments for business use of personal reside | 1 | 1 | |
| | Tax indemnification and gross-up payments Tax indemnification and gross-up payments Health or social club dues or initiation fees | ince . | | |
| | Discretionary spending account Personal services (such as, maid, chauffeur, c | heft | l | |
| | Discretionally sporting account | 1101) | Ì | |
| h | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or | | | |
| | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, | ID | | |
| • | trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | x | |
| | austees, and officers, and doing the OCO/Cxecutive Director, regarding the items offeched of thire 147 | | | - |
| 3 | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization | ' 6 | | 1 |
| v | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to | 1 | | l |
| | establish compensation of the CEO/Executive Director, but explain in Part III. | ا ا | | 1 |
| | | | ŀ | |
| | Compensation committee Independent compensation consultant Written employment contract Compensation survey or study | | | |
| | Tribependent compensation constitutions The pendent compensation constitution is a compensation | | | l |
| | Portri 990 of other organizations | ntee | | |
| 4 | Disting the year did any namen listed on Form DOC Boot Wil Continue & line to with assessment to the filling | , | | ĺ |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization: | | | x |
| | Receive a severance payment or change-of-control payment? | | | |
| | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | | | X |
| C | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | X |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | |
| | Mala - 20 - F04/-101 F04/-1/2) 1 F04/-1/20 | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | |
| Э | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | İ | |
| | contingent on the revenues of: | | | 7. |
| | The organization? | | | Х |
| b | Any related organization? | 5b | | ж |
| _ | If "Yes" on line 5a or 5b, describe in Part III. | | | |
| Ð | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of: | | | |
| a | The organization? | 6e | | <u> </u> |
| b | Any related organization? | 6b | | X |
| _ | If "Yes" on line 6a or 6b, describe in Part III. | | Ì | |
| 7 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments | | | |
| | not described on lines 5 and 6? If "Yes," describe in Part III | 7 | | <u> </u> |
| 8 | ······································ | | ı | |
| | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | | <u> </u> |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in | | | |
| | Regulations section 53.4958-6(c)? | 8 | | |
| LHA | For Paperwork Reduction Act Notice, see the Instructions for Form 990. | Schedule J (Form | 990) | 2016 |

632111 09-09-16

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual,

| | | (B) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | 3C compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|----------------------------|-------------|--------------------------|--|--|--------------------|--|--|---|
| (A) Name and Title | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | Denairs | (O)-(i)(g) | in column (B) reported as deferred on prior Form 990 |
| (1) ROBBIN COHEN | E | 490,627. | .0 | 0 | .0 | 21,784. | 512,411. | D |
| ron | Ξ | | 0 | 0 | 0 | 0 | 0 | |
| EANIS | 3 | 248,121. | | 0 | 0 | 18,364, | 266,485. | 0 |
| VP OF CIVIC ENGAGEMENT | (E) | | 0 | *0 | 0 | 0 | 0 | 0 |
| (3) ROARE A. FRANKEL | ε | | 0 | 0 | | 21,920. | 226,144. | 0 |
| AND CONSTRUCTION | 3 | | • 0 | 0 | 0 | 0 | .0 | 0. |
| (4) ELISABETH C. SICILIANO | (3) | 180,0 | °o | 0 | 0 | 6,945. | 186,945. | 0 |
| CHIRF OF STAFF | <u>(ii)</u> | | 0 | 0 | 0 | 0 | 0 | o |
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| | € | | | A principle of the management of the state o | | The state of the s | | |
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| | | | | 0 | | | Schedt | Schedule J (Form 990) 2016 |

632112 09-09-16

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2016

Department of the Treasury Internal Revenue Service Attach to Form 990.
 Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open To Public Inspection

Name of the organization

Employer identification number

Schedule M (Form 990) (2016)

THE BARACK OBAMA FOUNDATION 46-4950751 Part I Types of Property (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles ß 7 Boats and planes Intellectual property 1,264,293 MV ON DATE OF RECEIPT Securities - Publicly traded 9 Securities · Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory Drugs and medical supplies _____ 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts 25 Other 26 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 26, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash x contributions? b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

632141 08-23-16

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

| Schedule M | (Form 990) (2016) | THE BARACK OBAM | FOUNDATION | | | 46-4950751 | Page 2 |
|--|--|---|--|--|---|--|-----------------------|
| Part II | Supplemental is reporting in Part this part for any ac | THE BARACK OBAM I information. Pro I I, column (b), the nur dditional information. | vide the information of contribution | on required by Part ons, the number of | I, lines 30b, 32b, an items received, or a | d 33, and whether the org combination of both. Also | anization complete |
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Schedule M (Form 990) (2016)

632142 08-23-16

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization 46-4950751 THE BARACK OBAMA FOUNDATION

| 990 PART III LINE 1 |
|--|
| THE BARACK OBAMA FOUNDATION ("THE FOUNDATION") IS A NONPROFIT |
| FOUNDATION. IN THE MONTHS AND YEARS TO COME, OUR CHARGE IS TO CREATE |
| AN ENGAGING AND WELCOMING PLACE THAT WILL INSPIRE PEOPLE GLOBALLY TO |
| SHOW UP FOR THE MOST IMPORTANT OFFICE IN ANY DEMOCRACY - THAT OF |
| CITIZEN. |
| |
| THE FOUNDATION WILL DESIGN AND BUILD THE OBAMA PRESIDENTIAL CENTER |
| ("THE CENTER"), SET IN THE HEART OF HISTORIC JACKSON PARK, ON CHICAGO'S |
| SOUTH SIDE. THE CENTER WILL TELL THE STORY OF THE OBAMA ADMINISTRATION, |
| ITS ACHIEVEMENTS, CHALLENGES AND LESSONS LEARNED - AS WELL AS THE |
| MILLIONS OF AMERICANS, IN AND OUT OF GOVERNMENT, AT ALL LEVELS OF |
| SOCIETY, WHO MADE THEM POSSIBLE. THE CENTER WILL BE BASED ON THE SOUTH |
| SIDE OF CHICAGO BUT HAVE PROJECTS ALL OVER THE CITY, COUNTRY, AND THE |
| WORLD. |
| |
| FORM 990, PART VI, SECTION B, LINE 11B: |
| THE 990 IS PROVIDED TO AND REVIEWED BY THE FOUNDATION'S BOARD MEMBERS |
| BEFORE FILING. |
| |
| FORM 990, PART VI, SECTION B, LINE 12C: |
| THE FOUNDATION REQUIRES ALL DIRECTORS TO REVIEW AND SIGN A CONFLICT OF |
| INTEREST DISCLOSURE STATEMENT ON AN ANNUAL BASIS. THE FOUNDATION'S LEGAL |
| COUNSEL REVIEWS THE DISCLOSURES AND WORKS WITH THE BOARD OF DIRECTORS TO |
| RESOLVE ANY DISCLOSED CONFLICTS. |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

| Schedule O (Form 990 or 990-EZ) (2016) | Page 2 |
|--|---|
| Name of the organization THE BARACK OBAMA FOUNDATION | Employer identification number 46-4950751 |
| FORM 990, PART VI, SECTION B, LINE 15: | |
| THE BOARD OF DIRECTORS USES COMPARABILITY DATA TO REVIEW AND APPROVE THE | |
| COMPENSATION OF THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES ON AN ANNUAL | |
| BASIS. | |
| | |
| FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: | |
| AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC | |
| ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI | |
| | |
| FORM 990, PART VI, SECTION C, LINE 18: | |
| THE FOUNDATION MAKES ITS EXEMPT STATUS APPLICATION AND FORM 990 AVAILABLE | |
| FOR PUBLIC INSPECTION UPON WRITTEN REQUEST, THE FOUNDATION'S FORM 990 IS | |
| ALSO AVAILABLE ON THE FOUNDATION'S WEBSITE AND GUIDESTAR'S WEBSITE. | |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST | |
| POLICY AVAILABLE UPON WRITTEN REQUEST. THE FOUNDATION'S AUDITED FINANCIAL | |
| STATEMENTS ARE AVAILABLE ON THE FOUNDATION'S WEBSITE. | |
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2016 DEPRECIATION AND AMORTIZATION REPORT

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| PAGE |
| 990 |
| FORM |

| FORM 9 | FORM 990 PAGE 10 | | | | | | 990 | | | | | | | |
|---|-----------------------|------------------|--------|------|------------|-----------------------------|------------------|------------------------|-----------------------|---------------------------|--|-------------------------------|---------------------------|---------------------------------------|
| Asset No. | Description | Date Acquired | Method | E He | <u>E</u> | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
| | Machinery & equipment | · | | | | | | | | | | | | |
| T-1 | 1 COMPUTER | 08/22/14 SL | | 3,00 | <u> </u> | 2,118 | | | | 2,118. | 960 | | 706. | 1,666. |
| | 2 COMPUTER | 09/12/14 | SL | 3,00 | | 2,136. | | | | 2,136. | 926, | | 712. | 1,638. |
| 14.5 | 3 COMPUTER | 09/12/14 | SL | 3.00 | 브 | 2,136. | | | | 2,136. | 926. | | 712. | 1,638, |
| ************************************** | 4 COMPUTER | 09/15/14 | SL | 3,00 | <u></u> | 2,407. | | | *** | 2,407. | 1,037. | | 802. | 1,839. |
| 147 ************************************ | 5 COMPUTER | 11/20/14 | ZZ. | 3.00 | ᆸ | 1,637. | | | | 1,637. | 621., | 1 | 546 | 1,167. |
| Ψ | 6 COMPUTER | 08/03/15 | ST | 3,00 | <u>F</u> | 1,024, | | | | 1,024. | 142, | | 34. | 483, |
| | 7 Computer | 08/03/15 | SL | 3,00 | <u> </u> | 1,519 | | | | 1,519. | 211. | | .506 | 717. |
| E) | 8 COMPUTER | 10/12/15 | SL | 3,00 | | 1,156, | • | | | 1,156. | 80. | | 385. | 465. |
| 17 | 10 COMPUTER | 01/04/18 | SL | 3.00 | <u> </u> | 1,199. | | | | 1,199. | | | 383, | 383. |
| ed ed | 11 Computer | 05/05/16 | TS | 3.00 | | 1,629. | | | | 1,629. | | • | 339. | 339. |
| #-{ CA | 12 Computer | 05/21/16 | SL | 3.00 | 뻔 | 1,452, | | | · | 1,452. | | | 302. | 302. |
| ä | 13 COMPUTER | 04/07/16 | SL | 3.00 | <u> </u> | 1,579, | | | | 1,579. | | | 373, | 373. |
| 7 | 14 COMPUTER | 05/24/16 | 31 | 3.00 | 당 | 1,127 | | | | 1,127. | | | 235. | 235. |
| 버 | 15 COMPUTER | 06/21/16 | 7S | 3.00 | <u>. d</u> | 1,127, | | | | 1,127. | | | 204. | 204. |
| ři T | 16 COMPUTER | TS 91/80/60 | | 3.00 | <u> </u> | 1,127. | | | | 1,127. | | | 78. | 78. |
| H | 17 COMPUTER | 09/26/16 SL | | 3,00 | - 다 | 1,127. | | | | 1,127. | | | 78. | 78. |
| | MACHINERY & BOUIPHENT | | | | | 24,500, | | | | 24,500. | 4,903, | | 6,702. | 11,605. |
| 628111 (| 628111 04-01-16 | | | | | | T | | | | | | | |

41.1

(D) - Asset disposed

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

2016 DEPRECIATION AND AMORTIZATION REPORT

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|---|--|--|--|
| | | | |

| Description | Purposer Purpose Pur | ္က | FORM 990 PAGE 10 | | | | } | ŀ | | 990 | | | | | | |
|--|--|----|-----------------------------------|------------------|----------|------|-------------|-------------|----------------------------|-----|---------------------------|---------------------------|--|-------------------------------|---------------------------|---------------------------------------|
| 10.186/16 St. 5.00 16 13.500. 10,236. | TER 10.728/15 5L 3.00 16 33,500. PRK 03/18/16 5L 5.00 16 73,029. PRK 03/18/16 5L 5.00 16 70.2. PRK 03/18/16 5L 5.00 16 27,932. PROJED IMPROVEMENTS 03/18/16 5L 84.00 16 80,380. SHOLD IMPROVEMENTS 10/04/16 5L 84.00 16 80,380. SHOLD IMPROVEMENTS 10/04/16 5L 84.00 16 80,380. SHOLD IMPROVEMENTS 10/04/16 5L 84.00 16 97,774. SHO | | Description | Date Acquired | Method | Life | | | inadjusted ost Or Basis | | Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
| NETWORK NET | PRK PRK 03/18/15 5L 03/18/16 | | OTHER | 2 | | | | | | | | | | | | |
| NETWORK NET | NEX DEX DEX DEX DEX DEX DEX DEX | ę. | Website | 01/28/15 | | 3.00 | E | Vn. | 33,500. | | | 33,500. | 10,236. | | 11,167. | 21,403. |
| 10 JA18/16 St. 5.00 16 10,900. 10 JA18/16 St. 5.00 16 27,932. 10 JA4/16 St. 84.00 16 80,380. 10 JA18/16 St. 84.00 16 80,380. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/16 St. 84.00 16 80,774. 10 JA18/17 15,139. 10 JA18/18 JA18/17 15,139. 10 JA18/18 JA19/18 | NETWORK NETWORK NETWORK NETWORK 10/04/16 St. 5.00 16 10,900. LEASEHOLD IMPROVEMENTS 03/18/16 St. 5.00 16 27,932. LEASEHOLD IMPROVEMENTS 10/04/16 St. 84.00 16 80.380. LEASSHOLD IMPROVEMENTS 10/04/16 St. 84.00 16 87,774. * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL OTHER * GRAND TOTAL OT | | network | 03/18/16 | | 5.00 | | LC: | 73,029. | | | 73,029. | | | 11,563. | 11,563, |
| 10,04/16 SL 5.00 16 27,932 27,932 27,932 10,04/16 SL 84.00 16 80,380 80,380 87,774 87,774 87,774 10,236 314,217 10,236 318,717 15,139 47,633 80,380 80,380 81,774 | NRX 10/04/16 SL 5.00 16 27,932. SHOLD IMPROVEMENTS 10/04/16 SL 84.00 16 80.380. SHOLD IMPROV | | NETWORK | 03/18/16 | | 5,00 | | to: | 702. | | | 702. | | | - | |
| LEASENCLD IMPROVEMENTS 10/04/16 SL 5.00 16 80,380. 80, | HEX 10/04/16 SL 5.00 16 27,932. HOLD IMPROVEMENTS 03/18/16 SL 84.00 16 80,380. PROUD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. PROUD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOLD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOLD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. SHOULD IMPROVEMENTS 10/04/16 SL 84.00 16 80,7774. | NETWORK | 03/18/16 | S. L. | 5,00 | | \c | 10,900. | | | 10,900. | | | 1,726. | 1,726. |
| ILEASEHOLD IMPROVEMENTS 10/04/16 SL | HEOLD IMPROVEMENTS 10/04/16 SL 84.00 16 80.380. SHOLD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. STALL 990 PAGE 10 SALL 10/04/16 SL 84.00 16 87,774. STALL 10/04/16 SL 84 | | NETWORK | 10/04/16 | | 5.00 | | Vo. | 27,932. | | | 27,932. | | | 1,164, | 1,164. |
| * 990 FAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL OTHER * 980 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OF PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE 10 TOTAL 990 PAG | SHOLD IMPROVEMENTS 10/04/16 SL 84.00 16 87,774. 9 PAGE 10 TOTAL OTHER AND TOTAL 990 PAGE 10 GINNING BALANCE ACQUISITIONS DISPOSITIONS DING ACCUM DEPR DING ACCUM DEPR DING BOOK VALUE (D)-Asset disposed | | | 03/18/16 | | | | Vo. | 80,380. | | | 80,380. | | | 9,091, | 9,091. |
| NAD TOTAL OTHER NAD FOREL 10 TOTAL OTHER NAD FOREL 990 PAGE 10 SAY 717. SAY 717. SAY 717. SAY 717. SAY 717. SAY 717. SAY 717. SAY 717. SAY 718. SAY 717. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 718. SAY 717. SAY 718. SAY 718. SAY | AND TOTAL 990 PAGE 10 BND TOTAL 990 PAGE 10 BND TOTAL 990 PAGE 10 BND TOTAL 990 PAGE 10 BND TOTAL 990 PAGE 10 GINNING BALANCE BUSPOSITIONS DING BALANCE DING BALANCE DING ACCUM DEPR DING ACCUM DEPR DING ACCUM DEPR (D. Asset disposed | | LEASEHOLD IMPROVEMENTS | 10/04/16 | 78 | | | ve | 87,774. | | | 87,774. | | | 2,613. | 2,613. |
| NUT TOTAL 990 PAGE 10 SNY YEAR ACTIVITY AT, 633. ACQUISITIONS DISPOSITIONS DING BALANCE DING ACCUM DEPR DING ACCUM DEPR DING ACCUM DEPR 238,717. 15,139. 15,139. 0. 47,633. 291,084. 0. 291,084. 0. 0. 15,139. 15,139. 15,139. 15,139. 15,139. 16,139. 17,130. 18,130. 1 | AND TOTAL 990 PAGE 10 BNT YEAR ACTIVITY GINNING BALANCE ACQUISITIONS DISPOSITIONS DING RALANCE DING ACCUM DEPR DING BOOK VALUE (D) - Asset disposed | | * 990 PAGE 10 TOTAL OTHER | | | | | | 314,217. | | | 314,217. | 10,236. | | 37,435, | 47,671. |
| 47,633. 15,13 291,084. 0. 291,084. 0. 0. 0. 0. 338,717. 15,13 59,27 | ### YEAR ACTIVITY GINNING BALANCE ACQUISITIONS DISPOSITIONS DING RALANCE DING BOOK VALUE (D) - Asset disposed (C) - Asset disposed | | * GRAND TOTAL 990 PAGE 10 DEFR | | | | | | 338,717. | | | 338,717. | 15,139, | | 44,137. | 59,276. |
| 47,633. 0. 47,633. 15,13 291,084. 0. 291,084. 0. 291,084. 0. 338,717. 15,13 338,717. 15,13 | ### YEAR ACTIVITY GINNING BALANCE ACQUISITIONS DISPOSITIONS DING BALANCE DING ACCUM DEPR (D)-Asset disposed (D)-Asset disposed | | | | | | | | | | | | | | | |
| 47,633. 0. 47,633. 15,13 291,084. 0. 291,084. 0. 291,084. 0. 338,717. 15,13 338,717. 15,13 | ACQUISITIONS ACQUISITIONS DISPOSITIONS DING RALANCE DING ACCUM DEFR DING BOOK VALUE (D)-Asset disposed | | CURRENT YEAR ACTIVITY | | | | | | | | | | | | .v | |
| 291,084. 0. 291,084. 0. 291,084. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. | ACQUISITIONS DISPOSITIONS DING BALANCE DING ACCUM DEPR DING BOOK VALUE (D)-Asset disposed | | BEGINNING BALANCE | | | | | | 47,633. | | 0. | 47,633. | 15,139. | | | 31,016. |
| 338,717. 0. 338,717. 15,13 59,27 | DING BALANCE DING BALANCE DING ACCUM DEPR DING BOOK VALUE (D)-Asset disposed | | ACQUISITIONS | | | | | | 291,084. | | 0. | 291,084. | ċ | | | 28,260. |
| 338,717. 15 | DING BALANCE DING ACCUM DEFR DING BOOK VALUE (D)-Asset disposed | | DISPOSITIONS | | | | | | ° | , | Ö | ć | | | | ó |
| 2 5 9 | DING BOOK VALUE (D) - Asset disposed | | ENDING BALANCE | | | | | | 338,717. | | .0 | 338,717. | | | · | 59,276. |
| 523 | DING BOOK VALUE (D) - Asset disposed | | ENDING ACCUM DEPR | | | | | | | | | | 59,276. | | | |
| | (D) - Asset disposed | | ENDING BOOK VALUE | | | | | | : | | | | 279,441. | | | |

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