Form **990-PF**
Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation
Note *The organization may be able to use a copy of this return to satisfy state reporting requirements*

OMB No 1545-0052
2002

For calendar year 2002, or tax year beginning 07/01 **, 2002, and ending** 06/30/2003

G Check all that apply ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

Use the IRS label Otherwise, print or type See Specific Instructions	Name of organization MICHAEL REESE HEALTH TRUST		**A** Employer identification number 36-2170910
	Number and street (or P O box number if mail is not delivered to street address) 20 NORTH WACKER DRIVE	Room/suite 760	**B** Telephone number (see page 10 of the instructions) (312) 726-1008
	City or town, state, and ZIP code CHICAGO, IL 60606		**C** If exemption application is pending check here ▶ ☐ **D** 1 Foreign organizations check here ▶ ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II col (c), line 16)* ▶ 86,784,381

J Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) ________________
(Part I column (d) must be on cash basis)

E If private foundation status was terminated under section 507(b)(1)(A) check here ▶ ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B) check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a) (see page 10 of the instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts grants etc received (attach schedule)	2,984,328			
		Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	2	Distributions from split-interest trusts				
	3	Interest on savings and temporary cash investments	8,133	8,133.		
	4	Dividends and interest from securities	2,474,127	2,474,127		
	5a	Gross rents				
	b	(Net rental income or (loss) ______)				
	6a	Net gain or (loss) from sale of assets not on line 10	-11,014,925			
	b	Gross sales price for all assets on line 6a				
	7	Capital gain net income (from Part IV, line 2)				
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total Add lines 1 through 11	-5,548,337	2,482,260		
Operating and Administrative Expenses	13	Compensation of officers directors trustees etc	179,731	35,946		143,785
	14	Other employee salaries and wages	239,178	16,653		222,525.
	15	Pension plans, employee benefits	120,294	15,732		104,562.
	16a	Legal fees (attach schedule) STMT 1	8,936	NONE	NONE	8,936.
	b	Accounting fees (attach schedule) STMT 2	54,703.	32,046	NONE	22,657.
	c	Other professional fees (attach schedule) STMT 3	293,517.	258,470		35,047.
	17	Interest				
	18	Taxes (attach schedule) (see page 13 of the instructions) STMT 4	21,044.			
	19	Depreciation (attach schedule) and depletion	20,192.	4,038		
	20	Occupancy	51,945	10,389.		41,556
	21	Travel, conferences, and meetings	39,577			39,577.
	22	Printing and publications	52,366.			52,366.
	23	Other expenses (attach schedule) STMT 5	31,526	4,575		26,951.
	24	Total operating and administrative expenses Add lines 13 through 23	1,113,009	377,849.	NONE	697,962.
	25	Contributions, gifts, grants paid STMT 6	2,623,049			3,662,443
	26	Total expenses and disbursements. Add lines 24 and 25	3,736,058	377,849.	NONE	4,360,405
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-9,284,395.			
	b	Net investment income (if negative, enter -0-)		2,104,411		
	c	Adjusted net income (if negative, enter -0-)				

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For Paperwork Reduction Act Notice, see the instructions

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end of year amounts only (See instructions)

			Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	992,716.	824,075	824,075
	3	Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10 a	Investments U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land buildings and equipment basis ▶ Less accumulated depreciation (attach schedule) ▶			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) STMT 7	79,118,252	85,917,555	85,917,555
	14	Land buildings and equipment basis ▶ 159,922 Less accumulated depreciation (attach schedule) ▶ 148,608	30,210	11,314	11,314.
	15	Other assets (describe ▶ STMT 8)	40,954	31,437	31,437.
	16	Total assets (to be completed by all filers - see page 16 of the instructions Also see page 1 item I)	80,182,132	86,784,381	86,784,381
Liabilities	17	Accounts payable and accrued expenses	4,035,610	1,774,489.	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers directors trustees and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ STMT 9)	NONE	NONE	
	23	Total liabilities (add lines 17 through 22)	4,035,610	1,774,489	
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31**			
	24	Unrestricted	62,006,326	69,393,507	
	25	Temporarily restricted	5,345,833	4,092,841	
	26	Permanently restricted	8,794,363	11,523,544	
		Organizations that do not follow SFAS 117, check here and complete lines 27 through 31 ▶ ☐			
	27	Capital stock, trust principal, or current funds			
	28	Paid in or capital surplus or land bldg and equipment fund			
	29	Retained earnings accumulated income endowment or other funds			
	30	**Total net assets or fund balances** (see page 16 of the instructions)	76,146,522	85,009,892.	
	31	**Total liabilities and net assets/fund balances** (see page 16 of the instructions)	80,182,132	86,784,381.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	76,146,522
2	Enter amount from Part I, line 27a	2	-9,284,395
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 10	3	18,784,650
4	Add lines 1, 2, and 3	4	85,646,777
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 11	5	636,885
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	85,009,892

Part IV Capital Gains and Losses for Tax on Investment Income

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

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

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

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

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-11,014,925
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 12 and 17 of the instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period? . . ☐ Yes ☒ No

If "Yes," the organization does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 17 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2001	3,867,823	83,613,980	0 04625808986
2000	4,164,737	96,103,105.	0 04333613362
1999	3,740,581.	81,339,234.	0 04598741365
1998	3,126,621	71,826,758	0 04353003097
1997	2,620,678	69,899,294	0.03749219556

2	Total of line 1, column (d)	2	0 21660386366
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 04332077273
4	Enter the net value of noncharitable-use assets for 2002 from Part X, line 5	4	73,686,511
5	Multiply line 4 by line 3	5	3,192,157
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	21,044.
7	Add lines 5 and 6	7	3,213,201
8	Enter qualifying distributions from Part XII, line 4	8	4,361,442

If line 8 is equal to or greater than line 7 check the box in Part VI line 1b and complete that part using a 1% tax rate See the Part VI instructions on page 17

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 17 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 Date of ruling letter _________ (attach copy of ruling letter if necessary - see instructions)				
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here ▶ ☒ and enter 1% of Part I, line 27b			1	21,044
c	All other domestic organizations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			2	
3	Add lines 1 and 2			3	21,044.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			4	NONE
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-			5	21,044
6	Credits/Payments				
a	2002 estimated tax payments and 2001 overpayment credited to 2002	6a	20,116		
b	Exempt foreign organizations - tax withheld at source	6b	NONE		
c	Tax paid with application for extension of time to file (Form 8868)	6c	NONE		
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments Add lines 6a through 6d			7	20,116.
8	Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached			8	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed ▶			9	928.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶			10	
11	Enter the amount of line 10 to be Credited to 2003 estimated tax ▶ NONE Refunded ▶			11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year did the organization attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see page 18 of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b attach a detailed description of the activities and copies of any materials published or distributed by the organization in connection with the activities			
c	Did the organization file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the organization ▶ $ ________ (2) On organization managers ▶ $ ________			
e	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization managers ▶ $ ________			
2	Has the organization engaged in any activities that have not previously been reported to the IRS? *If "Yes" attach a detailed description of the activities*	2		X
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes" attach a conformed copy of the changes*	3		X
4a	Did the organization have unrelated business gross income of $1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the organization have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c) and Part XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ ILLINOIS			
b	If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No" attach explanation*	8b	X	
9	Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2002 or the taxable year beginning in 2002 (see instructions for Part XIV on page 25)? *If "Yes" complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		X
11	Did the organization comply with the public inspection requirements for its annual returns and exemption application?	11	X	

Web site address ▶ WWW FDNCENTER ORG/GRANTMAKER/HEALTH/

12 The books are in care of ▶ MICHAEL REESE HEALTH TRUST Telephone no ▶ (312)726-1008

Located at ▶ 20 N WACKER DR , CHICAGO, IL ZIP+4 ▶ 60606

13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 13

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

				Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies				
1 a	During the year did the organization (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the organization agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 19 of the instructions)?		1b		X
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐				
c	Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2002?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a	At the end of tax year 2002, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2002?	☐ Yes ☒ No			
	If "Yes," list the years ▶ ________ , ________ , ________ , ________				
b	Are there any years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 19 of the instructions)		2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ ________ , ________ , ________ , ________				
3 a	Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2002 as a result of (1) any purchase by the organization or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720 to determine if the organization had excess business holdings in 2002)*		3b		X
4 a	Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2002?		4b		X
5 a	During the year did the organization pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
	(3) Provide a grant to an individual for travel study, or other similar purposes?	☐ Yes ☒ No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	☐ Yes ☒ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		5b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐				
c	If the answer is "Yes" to question 5a(4), does the organization claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A ☐ Yes ☐ No			
	If "Yes " attach the statement required by Regulations section 53 4945-5(d)				
6 a	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
b	Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b		X
	If you answered "Yes" to 6b also file Form 8870				

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

1 List all officers, directors, trustees, foundation managers and their compensation (see page 20 of the instructions)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
SEE STATEMENT 16		179,731	29,080.	NONE

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 20 of the instructions) If none, enter "NONE "

(a) Name and address of each employee paid more than $50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
JENNIFER MCDONOUGH 20 NORTH WACKER DR CHGO IL	SR ROGRAM 40	65,051	10,593	NONE
ELIZABETH A LEE 20 NORTH WACKER DRIVE, CHGO IL	SR PROGRAM 40	98,380.	15,952	NONE
WENDY PETERSEN 20 NORTH WACKER DR CHGO IL	EXECUTIVE 40	61,254	9,198	NONE

Total number of other employees paid over $50,000 . . . . ▶ NONE

3 Five highest-paid independent contractors for professional services - (see page 20 of the instructions) If none, enter "NONE "

(a) Name and address of each person paid more than $50 000	(b) Type of service	(c) Compensation

Total number of others receiving over $50,000 for professional services ▶ NONE

Part IX-A Summary of Direct Charitable Activities

List the foundation s four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served conferences convened research papers produced, etc	Expenses
1 NONE	
2	
3	
4	

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Part IX-B Summary of Program-Related Investments (see page 21 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 21 of the instructions	
3 NONE	
Total Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see page 21 of the instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes				
a	Average monthly fair market value of securities			1a	74,151,569
b	Average of monthly cash balances			1b	657,072
c	Fair market value of all other assets (see page 22 of the instructions)			1c	NONE
d	**Total** (add lines 1a, b, and c)			1d	74,808,641
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e			
2	Acquisition indebtedness applicable to line 1 assets			2	NONE
3	Subtract line 2 from line 1d			3	74,808,641
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 22 of the instructions)			4	1,122,130.
5	**Net value of noncharitable-use assets** Subtract line 4 from line 3 Enter here and on Part V, line 4			5	73,686,511
6	**Minimum investment return** Enter 5% of line 5			6	3,684,326.

Part XI Distributable Amount (see page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	3,684,326
2 a	Tax on investment income for 2002 from Part VI, line 5	2a	21,044		
b	Income tax for 2002 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	21,044.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	3,663,282
4 a	Recoveries of amounts treated as qualifying distributions	4a	NONE		
b	Income distributions from section 4947(a)(2) trusts	4b			
c	Add lines 4a and 4b			4c	NONE
5	Add lines 3 and 4c			5	3,663,282
6	Deduction from distributable amount (see page 23 of the instructions)			6	NONE
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	3,663,282

Part XII Qualifying Distributions (see page 23 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	4,360,405
b	Program-related investments - Total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	1,037
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	**Qualifying distributions** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,361,442.
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	21,044
6	**Adjusted qualifying distributions** Subtract line 5 from line 4	6	4,340,398.

Note: *The amount on line 6 will be used in Part V column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years*

Part XIII Undistributed Income (see page 24 of the instructions)

			(a) Corpus	(b) Years prior to 2001	(c) 2001	(d) 2002
1	Distributable amount for 2002 from Part XI, line 7					3,663,282.
2	Undistributed income if any as of the end of 2001					
a	Enter amount for 2001 only				3,880,550	
b	Total for prior years ________, ________ ________			NONE		
3	Excess distributions carryover, if any, to 2002					
a	From 1997	NONE				
b	From 1998	NONE				
c	From 1999	NONE				
d	From 2000	NONE				
e	From 2001	NONE				
f	Total of lines 3a through e		NONE			
4	Qualifying distributions for 2002 from Part XII, line 4 ▶ $ 4,361,442					
a	Applied to 2001, but not more than line 2a				3,880,550	
b	Applied to undistributed income of prior years (Election required - see page 24 of the instructions)			NONE		
c	Treated as distributions out of corpus (Election required - see page 24 of the instructions)		NONE			
d	Applied to 2002 distributable amount					480,892.
e	Remaining amount distributed out of corpus		NONE			
5	Excess distributions carryover applied to 2002 *(If an amount appears in column (d) the same amount must be shown in column (a).)*		NONE			NONE
6	**Enter the net total of each column as indicated below**					
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5		NONE			
b	Prior years' undistributed income Subtract line 4b from line 2b			NONE		
c	Enter the amount of prior years undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			NONE		
d	Subtract line 6c from line 6b Taxable amount - see page 24 of the instructions			NONE		
e	Undistributed income for 2001 Subtract line 4a from line 2a Taxable amount see page 24 of the instructions					
f	Undistributed income for 2002 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2003					3,182,390.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see page 24 of the instructions)		NONE			
8	Excess distributions carryover from 1997 not applied on line 5 or line 7 (see page 25 of the instructions)		NONE			
9	**Excess distributions carryover to 2003** Subtract lines 7 and 8 from line 6a		NONE			
10	Analysis of line 9					
a	Excess from 1998	NONE				
b	Excess from 1999	NONE				
c	Excess from 2000	NONE				
d	Excess from 2001	NONE				
e	Excess from 2002	NONE				

Part XIV Private Operating Foundations (see page 25 of the instructions and Part VII-A, question 9) NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2002, enter the date of the ruling ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a b or c for the alternative test relied upon **a** "Assets" alternative test enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test Enter 2/3 of minimum investment return shown in Part X line 6 for each year listed					
c "Support" alternative test enter (1) Total support other than gross investment income (interest, dividends rents payments on securities loans (section 512(a)(5)) or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year - see page 25 of the instructions)

1 Information Regarding Foundation Managers

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

N/A

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

N/A

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

Check here ▶ ☐ if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the organization makes gifts, grants, etc (see page 25 of the instructions) to individuals or organizations under other conditions, complete items 2a b, c, and d

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

SEE STATEMENT 17

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

SEE STATEMENT 18

c Any submission deadlines

SEE STATEMENT 19

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

SEE STATEMENT 20

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SEE STATEMENT 21				
Total			▶ 3a	3,662,443
b Approved for future payment				
				1,427,334
Total			▶ 3b	1,427,334

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512 513 or 514		(e) Related or exempt function income (See page 26 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	8,133	
4 Dividends and interest from securities			14	2,474,127	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-11,014,925	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				-8,532,665	

13 Total Add line 12 columns (b) (d), and (e) . . . . . . 13 -8,532,665

(See worksheet in line 13 instructions on page 26 to verify calculations)

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

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the organization s exempt purposes (other than by providing funds for such purposes) (See page 26 of the instructions)
	NOT APPLICABLE

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting organization to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other Transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes, complete the following schedule Column (b) should always show the fair market value of the goods other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions and sharing arrangements

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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

[redacted]

cluding accompanying schedules and statements and to the best of my knowledge and
axpayer or fiduciary) is based on all information of which preparer has any knowledge

Form **2220**
Department of the Treasury
Internal Revenue Service

Underpayment of Estimated Tax by Corporations

▶ See separate instructions
▶ Attach to the corporation's tax return

OMB No 1545-0142
2002

Name
MICHAEL REESE HEALTH TRUST

Employer identification number
36-2170910

Note *In most cases, the corporation **does not** need to file Form 2220 (See Part I below for exceptions) The IRS will figure any penalty owed and bill the corporation If the corporation does not need to file Form 2220, it may still use it to figure the penalty Enter the amount from line 34 on the estimated tax penalty line of the corporation's income tax return but **do not** attach Form 2220*

Part I **Reasons for Filing** - Check the boxes below that apply to the corporation If any boxes are checked, the corporation must file Form 2220, even if it does not owe the penalty If the box on line 1 or line 2 applies, the corporation may be able to lower or eliminate the penalty

1 ☐ The corporation is using the annualized income installment method
2 ☐ The corporation is using the adjusted seasonal installment method
3 ☐ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax

Part II **Figuring the Underpayment**

4	Total tax (see instructions)			4	21,044.
5 a	Personal holding company tax (Schedule PH (Form 1120) line 26) included on line 4	5a			
b	Look-back interest included on line 4 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income forecast method	5b			
c	Credit for Federal tax paid on fuels (see instructions)	5c			
d	Total Add lines 5a through 5c			5d	
6	Subtract line 5d from line 4 If the result is less than $500, do not complete or file this form The corporation does not owe the penalty			6	21,044.
7	Enter the tax shown on the corporation s 2001 income tax return (see instructions) Caution *If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 6 on line 8*			7	25,776.
8	Enter the smaller of line 6 or line 7 If the corporation is required to skip line 7, enter the amount from line 6			8	21,044.

			(a)	(b)	(c)	(d)
9	**Installment due dates** Enter in columns (a) through (d) the 15th day of the 4th (*Form 990-PF filers* Use 5th month) 6th 9th and 12th months of the corporation s tax year	9	11/15/2002	12/15/2002	03/15/2003	06/15/2003
10	**Required installments** If the box on line 1 and/or line 2 above is checked, enter the amounts from Schedule A, line 40 If the box on line 3 (but not 1 or 2) is checked, see instructions for the amounts to enter If none of these boxes are checked, enter 25% of line 8 above in each column	10	5,261.	5,261.	5,261.	5,261.
11	Estimated tax paid or credited for each period (see instructions) For column (a) only, enter the amount from line 11 on line 15	11	10,116.	10,000.		
	Complete lines 12 through 18 of one column before going to the next column					
12	Enter amount, if any, from line 18 of the preceding column	12		4,855.	9,594.	4,333.
13	Add lines 11 and 12	13		14,855.	9,594.	4,333.
14	Add amounts on lines 16 and 17 of the preceding column	14				
15	Subtract line 14 from line 13 If zero or less, enter -0-	15	10,116.	14,855.	9,594.	4,333.
16	If the amount on line 15 is zero, subtract line 13 from line 14 Otherwise, enter -0-	16				
17	**Underpayment** If line 15 is less than or equal to line 10 subtract line 15 from line 10 Then go to line 12 of the next column Otherwise go to line 18	17				928.
18	**Overpayment** If line 10 is less than line 15, subtract line 10 from line 15 Then go to line 12 of the next column	18	4,855.	9,594.	4,333.	

Complete Part III on page 2 to figure the penalty If there are no entries on line 17, no penalty is owed

For Paperwork Reduction Act Notice, see separate instructions

Part III Figuring the Penalty

		(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year whichever is earlier (see instructions) *(Form 990-PF and Form 990-T filers* Use 5th month instead of 3rd month)	19				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20				
21 Number of days on line 20 after 4/15/2002 and before 1/1/2003	21				
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365}$ x 6%	22				
23 Number of days on line 20 after 12/31/2002 and before 4/1/2003	23				
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365}$ x 5%	24				
25 Number of days on line 20 after 3/31/2003 and before 7/1/2003	25	SEE PENALTY COMPUTATION WHITEPAPER DETAIL			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365}$ x *%	26				
27 Number of days on line 20 after 6/30/2003 and before 10/1/2003	27				
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365}$ x *%	28				
29 Number of days on line 20 after 9/30/2003 and before 1/1/2004	29				
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365}$ x *%	30				
31 Number of days on line 20 after 12/31/2003 and before 2/16/2004	31				
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{366}$ x *%	32				
33 Add lines 22 24 26 28 30 and 32	33				

34 Penalty Add columns (a) through (d), of line 33 Enter the total here and on Form 1120, line 33, Form 1120-A line 29, or the comparable line for other income tax returns . . . . . 34 20.

***For underpayments paid after March 31, 2003**: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin To obtain this information on the Internet, access the IRS Web Site at **www irs gov** You can also call 1-800-829-1040 to get interest rate information

PENALTY COMPUTATION DETAIL - FORM 2220

DATE PD	UNDERPAYMENT	BEG.DATE	END DATE	DAYS	%	PENALTY
QUARTER 4, RATE PERIOD 3 (06/15/2003 - 06/30/2003)						
	928.	06/15/2003	06/30/2003	15	5	2.
TOTAL FOR QUARTER 4, RATE PERIOD 3						2.
QUARTER 4, RATE PERIOD 4 (06/30/2003 - 11/15/2003)						
	928.	06/30/2003	11/15/2003	138	5	18.
TOTAL FOR QUARTER 4, RATE PERIOD 4						18.
TOTAL UNDERPAYMENT PENALTY						20.

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		INVESTMENT LOSS				P		
		PROPERTY TYPE SECURITIES						
							-11014925	

TOTAL GAIN(LOSS)		. .. .					-11014925	
							==========	

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No 1545 0047

2002

Name of organization
MICHAEL REESE HEALTH TRUST

Employer identification number
36-2170910

Organization type (check one)

Filers of.	**Section·**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule** (**Note** *Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General Rule and a Special Rule - see instructions)*

General Rule -

☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules -

☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to 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 Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of $5,000 or more during the year) . . . . ▶ $ ____________

Caution: *Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they* **must** *check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990 990-EZ, or 990-PF)*

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule B (Form 990, 990-EZ, or 990-PF) (2002)

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc , purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)) -

List in Part I each contributor whose contributions total more than $1,000 during the year that were for a religious, charitable, etc , purpose To determine the $1,000, aggregate all of a contributor's gifts for the year (regardless of amount) For a noncash contribution, complete Part II

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III

If a section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line **A** at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided The organization need not complete and attach Part III

Specific Instructions

Note. *You may duplicate Parts I II, and III if more copies are needed Number each page of each Part*

Part I. In column **(a)**, identify the first contributor listed as no 1 and the second contributor as no 2, etc Number consecutively Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e g , whether an individual, payroll, or noncash contribution) Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually)

Part II In column **(a)**, show the number that corresponds to the contributor's number in Part I Describe the noncash contribution fully Report on property with readily determinable market value (i e , market quotations for securities) by listing its fair market value (FMV) For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date See Regulations section 20 2031-2 to determine the value of contributed stocks and bonds When market value cannot be readily determined, use an appraised or estimated value To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value

Part III Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc , purposes must complete Parts I through III for those persons whose gifts totaled more than $1,000 during the year Show also, in the heading of Part III, total gifts that were $1,000 or less and were for a religious, charitable, etc , purpose *Complete this information only on the first Part III page*

If an amount is set aside for a religious, charitable, etc , purpose, show in column **(d)** how the amount is held (e g , whether it is mingled with amounts held for other purposes) If the organization transferred the gift to another organization, show the name and address of the transferee organization in column **(e)** and explain the relationship between the two organizations

Name of organization

MICHAEL REESE HEALTH TRUST

Employer identification number

36-2170910

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	FOREMAN TRUST C/O THE NORTHERN TRUST COMPANY 50 S LASALLE STREET, CHICAGO, IL 6	25,889	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	LAZARUS CHARITABLE FUND C/O THE NORTHERN TRUST COMPANY 50 S LASALLE STREET, CHICAGO, IL 6	23,545.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	KIRCHHEIMER TRUST C/O BANK OF AMERICA PRIVATE BANK PO BOX 830259, DALLAS, TX 75283	25,389	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	BECKY BLUM	30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	ANITA R ARNOLD REVOCABLE TRUST	20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BLUM TRUST	119,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Schedule B (Form 990 990-EZ or 990-PF) (2002) Page to of Part I

Name of organization

MICHAEL REESE HEALTH TRUST

Employer identification number

36-2170910

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	ROSE TRUST	2,735,453	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

FORM 990PF, PART I - LEGAL FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
LEGAL FEES	8,936.			8,936.
TOTALS	8,936.	NONE	NONE	8,936.

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES	35,175.	28,140.		7,035.
AUDITING	19,528.	3,906.		15,622.
TOTALS	54,703.	32,046.	NONE	22,657.

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
INVESTMENT MANAGEMENT	257,488.	257,488.	
PROGRAM CONSULTANT	27,564.		27,564.
OTHER	8,465.	982.	7,483.
TOTALS	293,517	258,470.	35,047.

FORM 990PF, PART I - TAXES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS
EXCISE TAX		21,044.
	TOTALS	21,044.

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
OFFICE SUPPLIES	12,429.	1,866.	10,563.
INSURANCE	10,328.	2,066.	8,262.
POSTAGE AND SHIPPING	5,556.		5,556.
COMPUTER SUPPLIES AND EXPENSE	3,213.	643.	2,570.
TOTALS	31,526.	4,575.	26,951.

FORM 990PF, PART I - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
SEE ATTACHED SCHEDULE	GRANTEES ARE PUBLIC CHARITIES	GENERAL	3,662,443
		TOTAL CONTRIBUTIONS PAID	3,662,443
GRANTS ACCRUED			
		GENERAL	1,427,334
		TOTAL APPROVED CONTRIBUTIONS ACCRUED	1,427,334
		TOTAL CONTRIBUTIONS PAID AND ACCRUED	5,089,777

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
FUNDS INVESTED IN THE JEWISH FEDERATION OF METROPOLITAN CHICAGO MANAGED FUNDS PROGRAM	79,118,252.	NONE	NONE
PARTNERSHIP INVESTMENTS	NONE	85,917,555.	85,917,555.
TOTALS	79,118,252.	85,917,555.	85,917,555.

FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
PREPAID EXPENSES	40,954.	31,437.	31,437.
TOTALS	40,954.	31,437.	31,437.

Michael Reese Health Trust

Form 990-PF, Part II - Other Labilities

Description	Beginning Book Value	Ending Book Value
Self-Insurance Trust		
Self-Insurance Trust Fund Investments	12,511,981	7,058 509
Less Accrued Self-Insurance Liability	12,511,981	7,058,509
Net Value of Self-Insurance Trust	-	-

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION		AMOUNT
NET UNREALIZED GAIN		11,524,377.
SELF INSURANCE ACCRUAL DECREASE		7,260,273.
	TOTAL	18,784,650.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION		AMOUNT
SELF INSURANCE TRUST		636,885.
	TOTAL	636,885.

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JOHN F. BENJAMIN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	CHAIRMAN	NONE	NONE	NONE
ROBERT J. GREENEBAUM C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
HERBERT S. WANDER C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	VICE CHAIRMAN	NONE	NONE	NONE
FRANK D. MAYER, JR. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
DOROTHY H. GARDNER C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	PRESIDENT	179,731.	29,080.	NONE
ENRIQUE BECKMAN, M.D., PH.D.	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606				
ANDREW K. BLOCK C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
JOHN C. COLMAN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
LESTER CROWN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
ROBERT G. DONNELLEY C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
SIDNEY EPSTEIN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SUITE 760 CHICAGO, IL 60606				
ALAN S. GRATCH C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
STEVEN A. HELFAND C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
SIDNEY J. HESS, JR. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
LUCILE ISH C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
FREDERICK J. MANNING C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MICHAEL M. MITCHEL C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
STEVEN B. NASATIR, PH.D. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
ELLARD PFAELZER, JR. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TREASURER	NONE	NONE	NONE
GORDON S. PRUSSIAN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
MARC H. SLUTSKY, M.D. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
DANIEL R. SWETT	TRUSTEE	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606				
WALTER R. NATHAN C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	SECRETARY	NONE	NONE	NONE
BILLIE WRIGHT ADAMS C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
HAROLD A. RICHMAN, PH.D. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
JOHN L. WILHELM, M.D. C/O MICHAEL REESE HEALTH TRUST 20 NORTH WACKER DRIVE SUITE 760 CHICAGO, IL 60606	TRUSTEE	NONE	NONE	NONE
	GRAND TOTALS	179,731.	29,080.	NONE

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

DOROTHY H. GARDNER, PRESIDENT
MICHAEL REESE HEALTH TRUST
20 NORTH WACKER DRIVE, SUITE 760
CHICAGO, IL 60606
TELEPHONE: (312) 726-1008

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

A LETTER OF INQUIRY SHOULD BE NO MORE THAN TWO PAGES IN LENGTH AND INCLUDE THE FOLLOWING INFORMATION:
* ANTICIPATED AMOUNT TO BE REQUESTED.
* PERIOD OF TIME FOR WHICH FUNDS ARE REQUESTED.
* PURPOSE OF THE PROJECT.
* PROBLEM OR ISSUE TO BE ADDRESSED.
* DESCRIPTION OF PROPOSED PROJECT.
* GENERAL THOUGHTS FOR EVALUATION OF PROJECT.
* ORGANIZATIONAL BACKGROUND AND QUALIFICATIONS.

THE LETTER OF INQUIRY ALSO SHOULD INCLUDE THE NAME, ADDRESS, PHONE, FAX, AND E-MAIL (IF AVAILABLE) OF THE GRANT-SEEKING ORGANIZATION, AS WELL AS THE NAME OF THE PRINCIPAL CONTACT PERSON FOR THE PROPOSED PROJECT.

IF THE LETTER OF INQUIRY MEETS THE INTERESTS OF THE MICHAEL REESE HEALTH TRUST THEN A LETTER REQUESTING A FORMAL PROPOSAL WILL BE SENT TO THE APPLICANT. SUCH LETTER WILL DETAIL THE PROPOSAL REQUIREMENTS.

990PF, PART XV - SUBMISSION DEADLINES

THE DEADLINE FOR RECEIVING LETTERS OF INQUIRY FOR THE FALL FUNDING CYCLE IS JUNE 15. LETTERS OF INQUIRY RECEIVED AFTER THAT DATE AND UNTIL DECEMBER 15 WILL BE PROCESSED FOR THE SPRING CYCLE.

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

ORGANIZATIONS MUST BE QUALIFIED UNDER SECTION 501(C)(3) AND HAVE A NON-PRIVATE FOUNDATION DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE. THE TAXPAYER FUNDS ORGANIZATIONS IN METROPOLITAN CHICAGO, WITH AN EMPHASIS ON THE CITY OF CHICAGO.
CURRENTLY, GRANTMAKING WILL EMPHASIZE THE DIRECT DELIVERY OF COMMUNITY BASED HEALTH SERVICES INTENDED TO REACH VULNERABLE AND UNDERSERVED POPULATIONS.

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

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SEE ATTACHED SCHEDULE		GENERAL	3,662,443
	GRANTEES ARE PUBLIC CHARITIES		
		TOTAL CONTRIBUTIONS PAID	3,662,443

Michael Reese Health Trust
Grants Paid by Fund
July 2002 through June 2003

Type	Date	Num	Name	Memo	Class	Amount
Unrestricted						
Check	7/1/2002	10287	Rush -Presbyterian-St Lukes	Responsive 2002 Award-3rd year of Adolescent Fellowship	Unrestricted	66 340 00
Check	7/1/2002	10290	Jewish Federation of Metropolitan Chicago	Proactive Award 2002 Chicago Center for Jewish Genetic Disorders	Unrestricted	67 500 00
Check	7/1/2002	10299	SSI Coalition for a Responsible Safety Ne	Community Response Award 02-03-IL Leadership Group Project	Unrestricted	10 000 00
Check	7/1/2002	10300	Institute of Medicine of Chicago	Community Response Award 02-03-Nat'l Conference on Quality Health Care for Culturally Diver	Unrestricted	10 000 00
Check	7/1/2002	10303	Hebrew Seminary of The Deaf	Community Response Award 02-03-Public Affairs Dissemination	Unrestricted	10 000 00
Check	7/1/2002	10304	Chicago Community Trust	Community Response Award 02-03-Healthy Steps Evaluation for Future	Unrestricted	5 000 00
Check	8/8/2002	10326	Grantmakers in Health	Community Response-GIH conference contribution	Unrestricted	5 000 00
Check	9/30/2002	10412	Foundation Center	Annual contribution to general fund	Unrestricted	1 000 00
Check	9/30/2002	10428	Donors Forum of Chicago	Grant Development Program-Annual contribution	Unrestricted	8,206 93
Check	10/15/2002	10445	The Ounce of Prevention Fund	Endowment honoring Irving B Harris	Unrestricted	333 333 00
Check	10/15/2002	10448	Grantmakers in Aging	Annual Membership Support	Unrestricted	500 00
Check	11/26/2002	10506	Interfaith Council for the Homeless	F02 Responsive-Shelter Graduates' Network	Unrestricted	20 000 00
Check	11/26/2002	10507	Chinese American Service League	F02 Responsive-Health Outreach Program	Unrestricted	15 000 00
Check	12/3/2002	10519	Family Focus	Healthy Families	Unrestricted	35 000 00
Check	12/3/2002	10521	Health & Medicine Policy Res Group	Schweitzer Fellows Program	Unrestricted	25 000 00
Check	12/3/2002	10522	Illinois Maternal & Child Health Coalitio	Kids and Families in IL	Unrestricted	35 000 00
Check	12/3/2002	10523	Lawndale Christian Health Center	Healthy environments for all babies in Lawndale	Unrestricted	40 136 00
Check	12/3/2002	10524	Metropolitan Chicago Healthcare Council (	Kidcare Outreach	Unrestricted	25 000 00
Check	12/3/2002	10525	North Shore Senior Center	F02 Responsive Grant Award	Unrestricted	50 000 00
Check	12/3/2002	10526	Rape Victim Advocates	Adolescent Program	Unrestricted	20 000 00
Check	12/3/2002	10527	Teen Living Programs, Inc.	Health Care for Homeless Youth	Unrestricted	35 557 00
Check	12/3/2002	10528	Board of Trustees of the University of Il	Project for Violence Prevention	Unrestricted	65 000 00
Check	12/3/2002	10537	Illinois Health Education Consortium	F02 Responsive Grant Award	Unrestricted	25,500 00
Check	12/9/2002	10549	Children's Home & Aid Society of Illinois	Infant and Child Development Program	Unrestricted	45 000 00
Check	12/9/2002	10550	Swedish Covenant Hospital	Roosevelt High School Health Center-Mental Health Services	Unrestricted	46 000 00
Check	12/9/2002	10551	Howard Area Community Center	Community Health Project	Unrestricted	25 000 00
Check	12/9/2002	10552	Thresholds	Client Assistant Fund	Unrestricted	15 000 00
Check	12/19/2002	10561	White Crane Wellness Center	F02 Responsive Award	Unrestricted	47 204 00
Check	12/19/2002	10562	Advocate Charitable Foundation	F02 Responsive Award	Unrestricted	42 230 00
Check	12/19/2002	10563	Community Counseling Centers of Chicago	F02 Responsive Award	Unrestricted	25 000 00
Check	1/16/2003	10597	Disability Funders Network	Annual Membership-General Operating	Unrestricted	2 500 00
Check	6/11/2003	10779	Access Living	S03 Responsive-De-Institutionalization Program	Unrestricted	20 000 00
Check	6/11/2003	10781	Centro San Bonifacio	S03-Responsive CoMadres Program	Unrestricted	20 000 00
Check	6/11/2003	10782	Chicago Crime Commission	S03 Responsive Community Youth Program	Unrestricted	50 000 00
Check	6/11/2003	10783	Chicago Youth Programs	S03 Responsive Children Teaching Children Peer Mentoring and Mentor Teen Females	Unrestricted	25 000 00
Check	6/11/2003	10784	Circle Family Care Inc.	S03 Responsive Mobile Health Team	Unrestricted	40 000 00
Check	6/11/2003	10785	Interfaith House	S03 Responsive Assessment/Respite Program	Unrestricted	25 000 00
Check	6/11/2003	10786	Metropolitan Family Services	S03 Responsive South Chicago Mentor Moms	Unrestricted	30 000 00
Check	6/11/2003	10787	The Night Ministry	S03 Responsive Outreach, Health Ministry	Unrestricted	25 000 00
Check	6/11/2003	10789	Trilogy	S03 Responsive Community Mental Health Resource	Unrestricted	21 300 00
Check	6/11/2003	10790	Westside Health Authority	S03 Responsive Healthy Lifestyles	Unrestricted	25 000 00
Check	6/11/2003	10791	Westside Health Partnership	S03 Responsive Women Transitioning from Prison	Unrestricted	34 800 00
Check	6/20/2003	10798	World Relief Corp. of Nat'l Assoc. of Ev	S03-Responsive	Unrestricted	45 175 00
Check	6/20/2003	10799	YMCA of Metropolitan Chicago	S03-Responsive	Unrestricted	25 000 00
Check	6/20/2003	10800	PCC Community Wellness Center	S03-Responsive	Unrestricted	68 503 00
Check	6/20/2003	10802	Health and Disability Advocates	S03-Responsive	Unrestricted	24 487 00
Check	6/20/2003	10805	Chicago Lighthouse	S03-Responsive	Unrestricted	20 000 00
Check	6/20/2003	10806	Chicago House and Social Service Agency	S03-Responsive	Unrestricted	25 000 00
Check	6/20/2003	10807	Chicago Center for Health Systems Develop	S03-Responsive	Unrestricted	50 000 00
Check	6/20/2003	10808	Chicago Christian Industrial League	S03-Responsive	Unrestricted	25 000 00
Check	6/20/2003	10809	Youth Guidance	S03-Responsive	Unrestricted	35 500 00
Check	6/20/2003	10810	Illinois College of Optometry	S03-Responsive	Unrestricted	25 000 00
Check	6/20/2003	10811	Hektoen Institute for Medical Research	S03-Responsive	Unrestricted	49 984 00
Check	6/20/2003	10812	Chicago Cook County Ambulatory Care Board	S03-Responsive	Unrestricted	33 444 00
Check	6/20/2003	10813	Chicago Hearing Society	S03-Responsive	Unrestricted	12 500 00
Check	6/20/2003	10814	Catholic Health Partners	S03-Responsive	Unrestricted	24 000 00
Check	6/20/2003	10819	Proyecto Linguistico Francisco Marroquin	Guatemala Indiginous Indian Support-	Unrestricted	405 00
Check	6/25/2003	10828	The Family Institute	S03 Responsive	Unrestricted	25 000 00
Check	1/3/2003	10584	Advocate Charitable Foundation	Proactive-Improving Access to Health and Mental Health Care for Deaf etc.	Unrestricted	17 297 48
Total Unrestricted						1 980 403 41
Unrestricted Board Designated						
Fund for Innovation						
Check	1/9/2003	10586	Jewish Federation of Metropolitan Chicago	Fund for Innovation in Health-annual payment	Unrestricted Board Designated Fund for Innovation	198 400 00
Total Fund for Innovation						198 400 00
Total Unrestricted Board Designated						198,400 00
Temporarily Restricted						
Edelstone Northwestern						
Check	4/29/2003	10723	Northwestern Memorial Foundation	Annual Bendix Lecture	Temporarily Restricted Edelstone Northwestern	18 000 00
Total Edelstone Northwestern						18 000 00
Goldsmith						
Check	5/30/2003	10756	AA Goldsmith Award Payable to Dr Jyothi	Annual Goldsmith Award	Temporarily Restricted Goldsmith	1 000 00
Total Goldsmith						1 000 00

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10/13/03

Accrual Basis

Michael Reese Health Trust
Grants Paid by Fund
July 2002 through June 2003

Type	Date	Num	Name	Memo	Class	Amount
Kissel UofC						
Check	10/21/2002	10455	University of Chicago	Annual Special Purpose-Kissel	Temporarily Restricted Kissel UofC	10 000 00
Total Kissel UofC						10 000 00
Baer						
Check	1/3/2003	10583	AIDS Foundation of Chicago	Proactive-Chicago Housing for health Partnership	Temporarily Restricted Baer	45 000 00
Total Baer						45 000 00
Kuppenheimer						
Check	1/3/2003	10581	Illinois Center for Violence Prevention	Proactive-Advancing Violence Prevention Through Eval Capacity	Temporarily Restricted Kuppenheimer	75 000 00
Total Kuppenheimer						75 000 00
Morris						
Check	1/3/2003	10584	Advocate Charitable Foundation	Proactive-Improving Access to Health and Mental Health Care for Deaf etc.	Temporarily Restricted Morris	19 202 52
Total Morris						19 202 52
Regensburg						
Check	11/26/2002	10501	Children's Place Association	F02 Responsive-Advocacy for children of Incarcerated Parents	Temporarily Restricted Regensburg	15 000 00
Check	12/9/2002	10548	Beth Emet Foundation Inc.	Planning grant for Health Care and Jewish Ethics program	Temporarily Restricted Regensburg	48 072 00
Check	12/19/2002	10564	Health and Disability Advocates	Proactive-Project Access	Temporarily Restricted Regensburg	75 000 00
Check	1/3/2003	10580	Jewish Federation of Metropolitan Chicago	Proactive-Chicago Center for Jewish Genetic Disorders	Temporarily Restricted Regensburg	67,500 00
Total Regensburg						205,572 00
Stern						
Check	1/3/2003	10582	University of Chicago-Chapin Hall Ctr	Proactive-Illinois Medicaid REsearch Project	Temporarily Restricted Stern	75 000 00
Total Stern						75 000 00
Stone						
Check	7/1/2002	10288	Advocate Charitable Foundation	"Improving Access & Quality for Deaf & Hard of Hearing	Temporarily Restricted Stone	36 799 00
Check	7/1/2002	10289	Mount Sinai Hospital Medical Center	Proactive Award 2002 "Improving Access-Quality for Deaf and Hard of Hearing"	Temporarily Restricted Stone	37 074 00
Check	7/1/2002	10291	Illinois Center for Violence Prevention	Proactive Award 2002 "Advancing Violence Prevention Through Education"	Temporarily Restricted Stone	75 000 00
Check	7/1/2002	10292	University of Chicago	Proactive Award 2002-Chapin Hall Center for Children/IL Medicaid Research Project	Temporarily Restricted Stone	75 000 00
Check	8/6/2002	10328	AIDS Foundation of Chicago	Proactive-Mini Continuum of Care for Chronically Ill and Homeless Adults	Temporarily Restricted Stone	100 000 00
Check	11/13/2002	10493	Council For Jewish Elderly	Proactive-Partners in Care-Final Payment	Temporarily Restricted Stone	31 243 00
Check	11/13/2002	9263	Council For Jewish Elderly	Community Response Fund	Temporarily Restricted Stone	10 000 00
Check	12/3/2002	10518	Center for Impact Research	Girls and Women in Prostitution Project	Temporarily Restricted Stone	60 000 00
Check	12/3/2002	10520	The University of Chicago	Chapin Hall	Temporarily Restricted Stone	50 000 00
Check	1/3/2003	10579	Mount Sinai Hospital	Proactive-Improving Access to Health and MEntal Health Care for Deaf etc.	Temporarily Restricted Stone	36,499 00
Check	1/16/2003	10595	Jewish Federation of Metropolitan Chicago	Proactive-Informing Public Policy for Public Health	Temporarily Restricted Stone	64 779 00
Check	2/27/2003	10662	Abraham A. Low Institute	Community Response-Managing Anger and Fear Program for Prisoners and Ex-Prisoners in Chic.	Temporarily Restricted Stone	10 000 00
Check	4/29/2003	10722	Mount Sinai Hospital	Proactive-Urban Health Institute	Temporarily Restricted Stone	84 000 00
Check	6/11/2003	10780	AIDS Foundation of Chicago	S03 Responsive-Healthcare Expansion Initiative	Temporarily Restricted Stone	15 000 00
Check	6/11/2003	10786	Planned Parenthood	S03 Responsive Colposcopy Program	Temporarily Restricted Stone	20 000 00
Check	6/20/2003	10801	National Center on Poverty Law	S03-Responsive	Temporarily Restricted Stone	50 000 00
Check	6/20/2003	10803	Environmental Law and Policy Center	S03-Responsive	Temporarily Restricted Stone	25 000 00
Check	6/20/2003	10804	Hektoen Institute for Medical Research	S03-Responsive	Temporarily Restricted Stone	44 073 00
Check	6/20/2003	10815	AIDS Foundation of Chicago	S03-Proactive	Temporarily Restricted Stone	50 000 00
Check	6/25/2003	10827	University of Chicago	Proactive-S03 approval	Temporarily Restricted Stone	50 000 00
Check	6/25/2003	10829	Advocate Charitable Foundation	Proactive S03	Temporarily Restricted Stone	24 895 00
Check	6/25/2003	10830	Mount Sinai Hospital	Proactive-Urban Health Institute	Temporarily Restricted Stone	12 503 00
Check	6/30/2003	10831	Health and Disability Advocates	Proactive S03-Project Access	Temporarily Restricted Stone	75 000 00
Total Stone						1 036,865 00
Total Temporarily Restricted						1 466 639 52
TOTAL						3,862 442 93

All recipients are public charities as described in section 509(a)(1),(2), or (3)

All of the above contributions are for the general charitable, religious, scientific, literary or educational activities of each donee

FEDERAL FOOTNOTES

PART X:
THE FAIR MARKET VALUE OF ASSETS EXCLUDES ASSETS HELD IN THE SELF INSURANCE TRUST SINCE THE VALUE, NET OF LIABILITIES, OF THE TRUST IS EQUAL TO ZERO.