

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2024, or tax year beginning 01-01-2024, and ending 12-31-2024

Name of foundation: CONANT FAMILY FOUNDATION
A Employer identification number: 36-3820887
B Telephone number: (312) 543-4015
C If exemption application is pending, check here
D 1. Foreign organizations, check here
D 2. Foreign organizations meeting the 85% test, check here and attach computation ...
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
I Fair market value of all assets at end of year: \$ 90,521
J Accounting method: Cash

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

Table with 4 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26), leading to Excess of revenue over expenses and disbursements (27a) of 17,273 and Adjusted net income (27c) of 0.

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	1,758	90,521	90,521
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .	0	0	
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____	0	0	
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)		0	
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	0	0	
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .		0	
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			0
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .		0	
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			0
<b>15</b> Other assets (describe ▶ _____)	0	0	0	
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,758	90,521	90,521	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	13,452	8,499	
	<b>18</b> Grants payable . . . . .	0	0	
	<b>19</b> Deferred revenue. . . . .	0	0	
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons . . . . .	0	0	
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .		0	
	<b>22</b> Other liabilities (describe ▶ _____)	0	0	
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	13,452	8,499	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds . . . . .	-11,694	82,022	
<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	-11,694	82,022		
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,758	90,521		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	-11,694
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	17,273
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	76,443
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	82,022
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29.	<b>6</b>	82,022

Part IV Capital Gains and Losses for Tax on Investment Income

Table with 5 columns: (a) List and describe the kind(s) of property sold, (b) How acquired, (c) Date acquired, (d) Date sold, (e) Gross sales price, (f) Depreciation allowed, (g) Cost or other basis, (h) Gain or (loss), (i) F.M.V. as of 12/31/69, (j) Adjusted basis, (k) Excess of col. (i) over col. (j), (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)).

Summary table for capital gains and losses with rows 2 and 3, including descriptions like 'Capital gain net income or (net capital loss)' and 'Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)'. Includes a bracketed instruction: 'If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7'.

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table for excise tax calculations with rows 1a through 11. Includes descriptions for exempt operating foundations, tax under section 511, subtitle A (income) tax, and credits/payments. Includes a bracketed instruction: 'If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7'.

Part VI-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition.
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation. (2) On foundation managers.
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
By language in the governing instrument, or
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered (see instructions)
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the taxable year beginning in 2024?
10 Did any persons become substantial contributors during the tax year?
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)?
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address

Table with 3 columns: Question ID, Yes, No. Rows 1a through 13.

14 The books are in care of CONANT FAMILY FOUNDATION Telephone no. (312) 543-4015
Located at 200 W MADISON ST FL 2 CHICAGO IL ZIP+4 60606

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year. 15

16 At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country

Table with 3 columns: Question ID, Yes, No. Rows 16.

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

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

- 1a** During the year did the foundation (either directly or indirectly):
  - (1)** Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .
  - (2)** Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .
  - (3)** Furnish goods, services, or facilities to (or accept them from) a disqualified person?
  - (4)** Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
  - (5)** Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .
  - (6)** Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
- b** 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 instructions
- c** Organizations relying on a current notice regarding disaster assistance check here. . . . .
- d** Did the foundation 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 2024? . . . . .
- 2** Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
  - a** At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? . . . . .  
If "Yes," list the years ► 20\_\_\_, 20\_\_\_, 20\_\_\_, 20\_\_\_
  - b** Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions.) . . . . .
  - c** If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here.  
► 20\_\_\_, 20\_\_\_, 20\_\_\_, 20\_\_\_
- 3a** Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .
- b** If "Yes," did it have excess business holdings in 2024 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969; **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2024.) . . . . .
- 4a** Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
- b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2024?











	Yes	No
<b>1a(1)</b>		No
<b>1a(2)</b>		No
<b>1a(3)</b>		No
<b>1a(4)</b>	Yes	
<b>1a(5)</b>		No
<b>1a(6)</b>		No
<b>1b</b>		
<b>1d</b>		No
<b>2a</b>		No
<b>2b</b>		
<b>3a</b>		No
<b>3b</b>		
<b>4a</b>		No
<b>4b</b>		No

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

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

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

**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MASON GEORGE  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	PRESIDENT 1.00	0	0	0
MONICA GEORGE  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	VICE PRESIDENT 1.00	0	0	0
ANDREW FRANK  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	TREASURER 1.00	0	0	0
MEREDITH GEORGE  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	SECRETARY 1.00	0	0	0
LESLIE RAMYK  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	EXECUTIVE DIRECTOR 40.00	173,628	27,863	0
SARAH FRANK  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	DIRECTOR 1.00	0	0	0
KYLE JOHNSON  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	DIRECTOR 1.00	0	0	0
MADELYN GEORGE  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	DIRECTOR 1.00	0	0	0
RACHEL CONANT  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	DIRECTOR 1.00	0	0	0
PAM CONANT  200 WEST MADISON SUITE 200 CHICAGO, IL 60606	DIRECTOR 1.00	0	0	0

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

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

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

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

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

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

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

**Part VIII- 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	
2	
3	
4	


**Part VIII- Summary of Program-Related Investments** (see instructions)

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

	Amount
1	
2	
All other program-related investments. See instructions.	
3	

**Total.** Add lines 1 through 3 . . . . . ▶


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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	696,688
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	696,688
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)  . . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	696,688
<b>4</b>	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	10,450
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. . . . .	<b>5</b>	686,238
<b>6</b>	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5. . . . .	<b>6</b>	34,312

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part IX, line 6. . . . .	<b>1</b>	34,312
<b>2a</b>	Tax on investment income for 2024 from Part V, line 5. . . . .	<b>2a</b>	118
<b>b</b>	Income tax for 2024. (This does not include the tax from Part V.). . . . .	<b>2b</b>	0
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	118
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	34,194
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	34,194
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1. . . . .	<b>7</b>	34,194

**Part XI Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	1,547,977
<b>b</b>	Program-related investments—total from Part VIII-B	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule) 	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions:</b> Add lines 1a through 3b. Enter here and on Part XII, line 4. . . . .	<b>4</b>	1,547,977

**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
<b>1</b> Distributable amount for 2024 from Part X, line 7				34,194
<b>2</b> Undistributed income, if any, as of the end of 2024:				
<b>a</b> Enter amount for 2023 only. . . . .			0	
<b>b</b> Total for prior years: 20 ____, 20 ____, 20 ____				
<b>3</b> Excess distributions carryover, if any, to 2024:				
<b>a</b> From 2019. . . . .	1,695,935			
<b>b</b> From 2020. . . . .	1,688,124			
<b>c</b> From 2021. . . . .	1,509,361			
<b>d</b> From 2022. . . . .	1,428,117			
<b>e</b> From 2023. . . . .	1,628,791			
<b>f</b> <b>Total</b> of lines 3a through e . . . . .	7,950,328			
<b>4</b> Qualifying distributions for 2024 from Part XI, line 4: ▶ \$ <u>1,547,977</u>				
<b>a</b> Applied to 2023, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2024 distributable amount				34,194
<b>e</b> Remaining amount distributed out of corpus	1,513,783			
<b>5</b> Excess distributions carryover applied to 2024. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	9,464,111			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions)	1,695,935			
<b>9</b> <b>Excess distributions carryover to 2025.</b> Subtract lines 7 and 8 from line 6a	7,768,176			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2020	1,688,124			
<b>b</b> Excess from 2021	1,509,361			
<b>c</b> Excess from 2022. . . . .	1,428,118			
<b>d</b> Excess from 2023	1,628,791			
<b>e</b> Excess from 2024	1,513,783			



**Part** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> AMERICAN NEAR EAST REFUGEE AID 1111 14TH STREET NW STE 400 WASHINGTON,DC 20005	NONE	P C	GENERAL SUPPORT	15,000
CHRISTIANAIRE 2101 S MICHIGAN ST APT 1010 CHICAGO,IL 60616	NONE	P C	GENERAL SUPPORT	3,000
FETZER INSTITUTE FOR FAITH & PHILANTHROPY POOLED FUND 21300 W EIGHT MILE ROAD KALAMAZOO,MI 49009	NONE	P C	GENERAL SUPPORT	20,000
INTERNATIONAL CHILDRENS MEDIA CENTER 625 N KINGSBURY ST CHICAGO,IL 60654	NONE	P C	GENERAL SUPPORT	25,000
PALESTINE LEGAL 637 S DEARBORN ST FLOOR 3 CHICAGO,IL 60605	NONE	P C	GENERAL SUPPORT	5,000
WOMENS HEALTH CENTER WEST VIRGINIA 510 W WASHINGTON ST CHARLESTON,WV 25302	NONE	P C	GENERAL SUPPORT	5,000
ABORTION CARE NETWORK 1300 I STREET NW STE 400E WASHINGTON,DC 20005	NONE	P C	GENERAL SUPPORT	10,000
ACCESS REPRODUCTIVE CARESOUTHEAST PO BOX 570132 ATLANTA,GA 30357	NONE	P C	GENERAL SUPPORT	10,000
ALIANZA LEADERSHIP INSTITUTE DBA ALLIANCE OF THE SOUTHEAST 8944 S COMMERCIAL AVE 1 CHICAGO,IL 60617	NONE	P C	GENERAL SUPPORT	25,000
ALLIANCE OF FILIPINOS AFIRE 4300 N CALIFORNIA AVE STE 200B CHICAGO,IL 60618	NONE	P C	GENERAL SUPPORT	15,000
ALTERNATIVES 4730 N SHERIDAN RD CHICAGO,IL 60640	NONE	P C	GENERAL SUPPORT	30,000
BLOCK CLUB CHICAGO NFP 1132 S WABASH 200 CHICAGO,IL 60605	NONE	P C	GENERAL SUPPORT	25,000
CHICAGO ABORTION FUND 333 W NORTH AVE 267 CHICAGO,IL 60610	NONE	P C	GENERAL SUPPORT	60,000
CHICAGO COALITION FOR THE HOMELESS 70 EAST LAKE STREET SUITE 720 CHICAGO,IL 60601	NONE	P C	GENERAL SUPPORT	5,000
CHICAGO EM COLLECTIVE	NONE	P C	GENERAL SUPPORT	25,000

4056 W 31ST ST CHICAGO,IL 60623				
CHICAGO FRONTLINES FUNDING INITIATIVE  2445 S SPAULDING AVE CHICAGO,IL 60623	NONE	P C	GENERAL SUPPORT	150,000
CHICAGO IWOC  332 S MICHIGAN AVE NO 121B CHICAGO,IL 60604	NONE	P C	GENERAL SUPPORT	25,000
CHICAGO PUBLIC MEDIA INC  848 E GRAND AVE CHICAGO,IL 60611	NONE	P C	GENERAL SUPPORT	50,000
CIRCESTEEM INC  4760 N SHERIDAN RD CHICAGO,IL 60640	NONE	P C	GENERAL SUPPORT	20,000
COALITION TO END PERMANENT PUNISHMENT  644 E 79TH ST CHICAGO,IL 60619	NONE	P C	GENERAL SUPPORT	25,000
EQUITY AND TRANSFORMATION  10 W 35TH ST SUITE 10F4 2 CHICAGO,IL 60616	NONE	P C	GENERAL SUPPORT	20,000
FEMHEALTH DBA CARAFEM  1001 CONNECTICUT AVENUE NW 80 WASHINGTON,DC 20036	NONE	P C	GENERAL SUPPORT	5,000
FEMINIST WOMENS HEALTH CENTER  1924 CLIFF VALLEY WAY NE ATLANTA,GA 30329	NONE	P C	GENERAL SUPPORT	35,000
FRIENDS OF THE PARKS  67 E MADISON ST 1817 CHICAGO,IL 60602	NONE	P C	GENERAL SUPPORT	25,000
GOLDIN INSTITUTE FOR CHICAGO PEACE FELLOWS  1235 A N CLYBOURN AVE NO 327 CHICAGO,IL 60610	NONE	P C	GENERAL SUPPORT	30,000
HUMAN RIGHTS WATCH  400 N WELLS ST 200 CHICAGO,IL 60654	NONE	P C	GENERAL SUPPORT	50,000
HYDE PARK ART CENTER  5020 S CORNELL AVE CHICAGO,IL 60615	NONE	P C	GENERAL SUPPORT	35,000
IN OUR NAME  120 BROADWAY STE 3475 NEW YORK,NY 10271	NONE	P C	GENERAL SUPPORT	2,500
KENTUCKY HEALTH JUSTICE NETWORK  625 N KINGSBURY CHICAGO,IL 60654	NONE	P C	GENERAL SUPPORT	30,000
MAMAS  4300 N CALIFORNIA AVE CHICAGO,IL 60618	NONE	P C	GENERAL SUPPORT	26,000
MEMPHIS CENTER FOR REPRODUCTIVE HEALTH DBA CHOICES  1203 POPLAR AVE MEMPHIS,TN 38104	NONE	P C	GENERAL SUPPORT	35,000
	NONE	P C	GENERAL SUPPORT	30,000

MIDWEST ACCESS COALITION PO BOX 408363 CHICAGO,IL 60640				
MIDWEST ACCESS PROJECT 5215 NORTH RAVENWOOD AVE STE 206 CHICAGO,IL 60640	NONE	PC	GENERAL SUPPORT	10,000
MOUNTAIN ACCESS BRIGADE PO BOX 11032 CHARLESTON,WV 25339	NONE	PC	GENERAL SUPPORT	30,000
NOT ME WE 602 E 61ST ST CHICAGO,IL 60637	NONE	PC	GENERAL SUPPORT	26,000
ONE FOR ONE CHICAGO 14 W SUPERIOR CHICAGO,IL 60654	NONE	PC	GENERAL SUPPORT	2,500
ORGANIZED COMMUNITIES AGAINST DEPORTATIONS 4811 N CENTRAL PARK AVE CHICAGO,IL 60625	NONE	PC	GENERAL SUPPORT	15,000
PROVIDE PO BOX 8265 ROUND ROCK,TX 78683	NONE	PC	GENERAL SUPPORT	10,000
SASS PO BOX 1280 AMHERST,MA 01004	NONE	PC	GENERAL SUPPORT	20,000
SWEET WATER FOUNDATION INC 5749 S PERRY AVE CHICAGO,IL 60621	NONE	PC	GENERAL SUPPORT	25,000
THE CHICAGO COMMUNITY FOUNDATION FOR CHICAGO FUND PSPC 225 N MICHIGAN AVE STE 2200 CHICAGO,IL 60601	NONE	PC	GENERAL SUPPORT	10,000
WEST ALABAMA WOMENS CENTER 535 JACK WARNER PKWY I TUSCALOOSA,AL 35404	NONE	PC	GENERAL SUPPORT	10,000
CROSSROADS FUND FOR THE CHICAGO RACIAL JUSTICE POOLED FUND 3411 W DIVERSEY AVENUE NO 20 CHICAGO,IL 60647	NONE	PC	GENERAL SUPPORT	25,000
REPARATIONS STAKEHOLDER AUTHORITY OF ASHEVILLE 37 MONTFORD AVENUE STE 201 ASHEVILLE,NC 28801	NONE	PC	GENERAL SUPPORT	10,000
SOUTHSIDE COMMUNITY GARDEN 133 LIVINGSTON STREET ASHEVILLE,NC 28801	NONE	PC	GENERAL SUPPORT	10,000
CHICAGO FOUNDATION FOR WOMEN 140 S DEARBORN STREET NO 400 CHICAGO,IL 60603	NONE	PC	GENERAL SUPPORT	50,000
CENTER FOR THIRD WORLD ORGANIZING ON BEHALF OF DISSIDENTS 900 ALICE ST STE 300 OAKLAND,CA 94607	NONE	PC	GENERAL SUPPORT	20,000
	NONE	PC	GENERAL SUPPORT	10,000

NEO PHILANTHROPY ON BEHALF OF ILLINOIS COMMUNITY POWER FUND 1001 AVENUE OF THE AMERICAS FL 12 NEW YORK, NY 10018				
LIBERATION LIBRARY 2040 N MILWAUKEE AVENUE CHICAGO, IL 60647	NONE	PC	GENERAL SUPPORT	27,000
PLANNED PARENTHOOD OF ILLINOIS 17 N STATE STREET 5TH FLOOR CHICAGO, IL 60602	NONE	PC	GENERAL SUPPORT	50,000
SOCIAL & ENVIRONMENTAL ENTREPRENEURS ON BEHALF OF THE FINAL 5 CAMPAIGN 23564 CALABASAS RD STE 201 CALABASAS, CA 91302	NONE	PC	GENERAL SUPPORT	25,500
<b>Total . . . . .</b>			<b>▶ 3a</b>	<b>1,257,500</b>
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	





## Additional Data

[Return to Form](#)

**Software ID:** 24020569

**Software Version:** V2.0

**Form 990PF - Special Condition Description:**

Special Condition Description

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization CONANT FAMILY FOUNDATION	<b>Employer identification number</b> 36-3820887
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**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
 CONANT FAMILY FOUNDATION

Employer identification number  
 36-3820887

**Part I**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CONANT INCOME CHARITABLE FUND <hr/> 736 GREENACRES <hr/> GLENVIEW, IL 60025	<hr/> \$ 1,556,565	<input checked="" type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-	<hr/> <hr/> <hr/>	<hr/> \$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-	<hr/> <hr/> <hr/>	<hr/> \$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-	<hr/> <hr/> <hr/>	<hr/> \$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-	<hr/> <hr/> <hr/>	<hr/> \$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-	<hr/> <hr/> <hr/>	<hr/> \$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)

Name of organization  
CONANT FAMILY FOUNDATION

Employer identification number  
36-3820887

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

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

Name of organization CONANT FAMILY FOUNDATION	Employer identification number 36-3820887
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**Part III** **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c) (7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

<b>(a)</b> <b>No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
	_____	_____	_____
	_____	_____	_____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
<b>(a)</b> <b>No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
	_____	_____	_____
	_____	_____	_____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
<b>(a)</b> <b>No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
	_____	_____	_____
	_____	_____	_____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
<b>(a)</b> <b>No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
	_____	_____	_____
	_____	_____	_____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

# TY 2024 IRS 990 e-File Render

**Name:** CONANT FAMILY FOUNDATION

**EIN:** 36-3820887

**Software ID:** 24020569

**Software Version:** V2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	9,644	0	0	9,644

# TY 2024 IRS 990 e-File Render

**Name:** CONANT FAMILY FOUNDATION

**EIN:** 36-3820887

**Software ID:** 24020569

**Software Version:** V2.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MEMBERSHIP DUES	27,350	0	0	27,350
PROGRAM EXPENSES	5,501	0	0	5,501
OFFICE EXPENSES	3,476	0	0	3,476
INSURANCE	1,505	0	0	1,505

# TY 2024 IRS 990 e-File Render

**Name:** CONANT FAMILY FOUNDATION

**EIN:** 36-3820887

**Software ID:** 24020569

**Software Version:** V2.0

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
IRS TAX REFUND	182	0	0

## TY 2024 IRS 990 e-File Render

**Name:** CONANT FAMILY FOUNDATION

**EIN:** 36-3820887

**Software ID:** 24020569

**Software Version:** V2.0

Description	Amount
PRIOR PERIOD ADJUSTMENT	76,443

## TY 2024 IRS 990 e-File Render

**Name:** CONANT FAMILY FOUNDATION

**EIN:** 36-3820887

**Software ID:** 24020569

**Software Version:** V2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GENERAL CONTRACTORS	10,265	0	0	10,265