ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

Attorney General KWAME RAOUl State of Illinois
Charitable Trust Bureau, 100 West Randolph
11th Floor, Chicago, Illinois 60601

Report for the Fiscal Period:

Beginning 07/01/2020
& Ending 06/30/2021

Federal ID # 36-3382973
Are contributions to the organization tax deductible? X Yes No
Date Organization was created: 04/01/1985

I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:

D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)
E) GOVERNMENT GRANTS & MEMBERSHIP DUES
F) OTHER REVENUES

G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)

II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:

H) OPERATING CHARITABLE PROGRAM EXPENSE

I) EDUCATION PROGRAM SERVICE EXPENSE

J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)

J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):

K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS

L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)

M) MANAGEMENT AND GENERAL EXPENSE

N) FUNDRAISING EXPENSE

O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)

III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:

(Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)

PROFESSIONAL FUNDRAISERS:

P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS

Q) TOTAL FUNDRAISERS FEES AND EXPENSES

R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)

PROFESSIONAL FUNDRAISING CONSULTANTS:

S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS

IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:

T) NAME, TITLE: AUDREY THOMAS, CHIEF EXECUTIVE OFFICER

U) NAME, TITLE: KATHARINE BOOTON WILSON, CHIEF STRATEGY OFFICER

V) NAME, TITLE: SUSAN GRIES, CHIEF FINANCIAL OFFICER

V. CHARITABLE PROGRAM DESCRIPTION:

CHARITABLE PROGRAM (3 HIGHEST BY $ EXPENDED)

CODE CATEGORIES

List on back side of instructions

W) DESCRIPTION: SERVICES FOR THE POOR

X) DESCRIPTION: HOUSING FOR THE POOR

Y) DESCRIPTION:
1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT? _______________ 1. X

2. HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY? _______________ 2. X

3. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION? _______________ 3. X

4. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES? _______________ 4. X

5. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION? _______________ 5. X


7b. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS $ _______________; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES $ _______________; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL $ _______________; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING $ _______________

8. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES? _______________ 8. X

9. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY? _______________ 9. X

10. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS? _______________ 10. X

11. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:

- JP MORGAN CHASE BANK, 10 SOUTH DEARBORN STREET, CHICAGO, IL 60603
- NORTHERN TRUST, 50 S LASALLE ST, B-2, CHICAGO, IL 60603
- FIRST EAGLE BANK, 1201 W. MADISON, CHICAGO, IL 60607

12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: AUDREY THOMAS - 773-722-5080

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS


BE SURE TO INCLUDE ALL FEES DUE:
1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
2.) FOR FEES DUE SEE INSTRUCTIONS.
3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A $100.00 PENALTY.

JANEL SAAR
PRESIDENT or TRUSTEE (PRINT NAME) SIGNATURE DATE

LAURA ETCHEN
TREASURER or TRUSTEE (PRINT NAME) SIGNATURE DATE

CAROLE A. BUDYAK
PREPARER (PRINT NAME) SIGNATURE DATE