or Office Use Only	<u>I</u> LLINOIS CHARITABLE ORGANIZ	ATION ANNUA	L REPORT		Form AG990-IL
PMT #	Attorney General KWAME RA				Revised 1/19
	Charitable Trust Bureau, 10			20500	; , ;
MT	11th Floor, Chicago, I	illuois 6060.1	CO# <u>0102</u>	20528 Check all item	es attached:
AIVI I	Report for the Fiscal Period	od:	X	Copy of IRS Re	
	5	0.1.0	Make Checks X	Audited Finance	
NIT	Beginning <u>07/01/20</u>		Payable to the Illinois	Copy of Form I	
	& Ending 06/30/20	า้า ด	Charity X		Report Filing Fee
Federal ID# 36-366695	- -	YR	Bureau Fund		Report Filing Fee
Are contributions to the organiz		Da	ate Organization wa		0 DAY YR 05/31/1989
			Year-end		
LEGAL			amounts		
_	. Me Cobe		A) ASSETS	A) \$	972,264
MAIL	uth Only Donly Asso		·		
ADDRESS 17728 So CITY,STATE Tinley P	outh Oak Park Ave Park IL		B) LIABILITIES	B) \$	72,615
ZIP CODE 60477-27		•	C) NET ASSETS	C) \$	899,649
					经上生物情况
I. SUMMARY OF ALL	REVENUE ITEMS DURING THE YEA	R:	PERCENTAGE	AM	OUNT
D) PUBLIC SUPPORT.	CONTRIBUTIONS & PROGRAM SERVICE REV	. (GROSS AMTS.)	83%	D) \$ 2	2,825,892
	NTS & MEMBERSHIP DUES		. 17%	E) \$	580,435
,			0%		5,387
F) OTHER REVENUES	4000000	PROPERTY WAS	AF	F) \$	7
· ·	NCOME AND CONTRIBUTIONS RECEIVED (AI		100%		3,411,714
	EXPENDITURES DURING THE YEAR				图由数别等。
H) OPERATING CHARI	TABLE PROGRAM EXPENSE		86%	H) \$ 2	2,985,924
i) EDUCATION PROGI	RAM SERVICE EXPENSE		415 t.a. %	ral) \$: : - n:	13
J) TOTAL CHARITABL	E PROGRAM SERVICE EXPENSE (ADD H & I)		86%		985,924
J¹) JOINT COSTS ALLO	CATED TO PROGRAM SERVICES (INCLUDED) IN J): \$	grg v hrvi - U	Party and the second	
K) GRANTS TO OTHER	R CHARITABLE ORGANIZATIONS	•	E++2%+++	(K) \$: 1:	5,66,272
L) TOTAL CHARITABL	E PROGRAM SERVICE EXPENDITURE (ADD .	J & K)	188%	L)\$ 3	3,052,196
M) MANAGEMENT AND		•	1 7%		245,299
N) FUNDRAISING EXP			1 :51%	N) \$	165,097
·	RES THIS PERIOD (ADD L., M, & N)		100%		3,462,592
1 .	AID FUNDRAISER AND CONSULTANT A	CTIVITIES.		<u> Ψ/Ψ </u>	8 10 11 11 11 11 11 11 11 11 11 11 11 11
	oort of Individual Fundraising Campaign- Form IFC. One			64	
PROFESSIONAL FUND			** ** ** ** * * * * * * * * * * * * *		
P) TOTAL AMOUNT RA	ISED BY PAID PROFESSIONAL FUNDRAISER	RS	100%	P) \$	The thing as an a
Q) TOTAL FUNDRAISE	RS FEES AND EXPENSES	1.77 P. A.	13%	Q) \$	5. H. A. S. F.
R) NET RECEIVED BY	THE CHARITY (P MINUS Q=R)		%	Ř) \$	# 15 1
·	RAISING CONSULTANTS:			ika mu	a de la seguidada de la composição de la c
<u> </u>	AID TO PROFESSIONAL FUNDRAISING CONS	ULTANTS	Taring and the second s	S) \$	
·	O THE (3) HIGHEST PAID PERSONS	A.,	EAR:	Tanana da San da Sa	A San Markey of Warrant
T) NAME, TITLE: Kath	• •	i.	Director	T)\$	93,337
		i.	ogram Mgr	U) \$	60,522
U) NAME, TITLE: Gina V) NAME, TITLE: Kait			Client Sys.	V) \$	53,232
	RAM DESCRIPTION: CHARITABLE PROGRAM (3)			List on back s	ide of instructions"
	·	ACIDED DI PENERUEU	, Jose Galegonies	e 2 pri 4 4 a 2 3 1 - 2 4 4 1 1 a 1	111
	mily and Individual Services		19 4	W) #	: e 191
	ousing for the Needy		Para Talan	X)#) (1: 1-3-1 (1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1
Y) DESCRIPTION:			7	Y) #	, <u></u>

	rogether we cope		36-366952 Form	AG99	0-IL, Pa	<u> 1ge 2</u>
11	F THE ANSWER TO ANY OF	THE FOLLOWING IS YES, ATTA	ACH A DETAILED EXPLANATION:	. :	YES	NO
1	. WAS THE ORGANIZATION TH	IE SUBJECT OF ANY COURT ACTI	ION, FINE, PENALTY OR JUDGMENT?	1.		X
١,	HAS THE ORGANIZATION OR	A CURRENT DIRECTOR TRUSTE	EE, OFFICER OR EMPLOYEE THEREOF,	•	, v	
~			IOR INVOLVING THE MISUSE OR			
1	MISAPPROPRIATION OF FUN		CICHTOCEVING THE MICOGE CIC	2.	1	X
			······································	٠,	87.191	
3	. DID THE ORGANIZATION MAR	(E A GRANT AWARD OR CONTRIE	BUTION TO ANY ORGANIZATION IN WHICH			
	ANY OF ITS OFFICERS, DIRE	CTORS OR TRUSTEES OWNS AN	INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION	,		2
	IN WHICH ANY OF ITS OFFICE	ERS, DIRECTORS OR TRUSTEES	HAS A MATERIAL FINANCIAL INTEREST; OR DID			
	ANY OFFICER, DIRECTOR OF	R TRUSTEE RECEIVE ANYTHING O	OF VALUE NOT REPORTED AS COMPENSATION?	3. `		X
			•	٠:	6. 1	
4			OCK IN WHICH ANY OFFICER, DIRECTOR OR			
	TRUSTEE OWNS MORE THAN	N 10% OF THE OUTSTANDING SHA	ARES?	4.	ļ.,ļ	X
_	(0.44)/ DD0DEDT/ OF THE O					
5			E OF OR COMMINGLED WITH THE	-		
	PROPERTY OF ANY OTHER F	PERSON OR ORGANIZATION?		5.	inga jih j	X
۱ ۾	. DID THE ORGANIZATION USE	THE SERVICES OF A PROFESSION	ONAL FUNDRAISER? (ATTACH FORM IFC)	. , 6.		X
ľ	. DID THE ONO. WIE (NOW OOL	. THE SERVICES OF AT ROTEOUR	ONALT ONDIVIOLITE (TETATOTTE OTTATE O)	٠.		-21
7	a. DID THE ORGANIZATION ALL	OCATE THE COST OF ANY SOLIC	CITATION, MAILING, ADVERTISEMENT OR			
		EN PROGRAM SERVICE AND FUN		. .7. ;		Х
					Jake	Fal. 7.
7	b. IF "YES", ENTER (i) THE AGGI	REGATE AMOUNTE OF THESE LOID	NT COSTIS ;(ii) THE AMOUNT			F
		ERVICES \$	(iii) THE AMOUNT ALLOCATED TO MANAGEMENT	٠,		
	AND GENERAL \$	AND (iv) THE AMOUN	NTALLOCATED TO FUNDRAISING \$			
١.	DID THE ODGANIZATION EVE	DEND ITC DECEDED FUNDOUS	R PURPOSES OTHER THAN RESTRICTED			
l °	PURPOSES?			8.		X
ĺ	TORTOGES:			Ų.		
9			ON OR HAD ITS REGISTRATION OR TAX EXEMPTION			-1
	SUSPENDED OR REVOKED B	Y ANY GOVERNMENTAL AGENCY	Y? A TAK SETT OLDER OLDER TAKE TO THE THE COLOR OF THE TOTAL OLDER OLDER TO THE TAKE THE TOTAL OLD THE TOTAL OLD THE TAKE THE TAKE THE TAKE T	9.		Х
					1 4 .	
10			CKBACK, BRIBE, OR ANY THEFT, DEFALCATION	: .		
	MISAPPROPRIATION, COMMI	NGLING OR MISUSE OF ORGANIZ	ZATIONAL FUNDS?	10.	Щ	X
1,,	LIST THE NAME AND ADDRES	SS OF THE FINANCIAL INSTITUTION	ONS WHERE THE ORGANIZATION MAINTAINS ITS			
[' '	THREE LARGEST ACCOUNTS		SHO WHERE THE SHORMENTON WARRY WAS TO	••]	
			ero Ave., Oak Förest, IL 60452;		!	
			`	Ç.		
	<u> Byline Bank - 8</u>	801 W. 183rd St.,	Tinley Park, IL 60477			
				C.		
12	. NAME AND TELEPHONE NUM	BER OF CONTACT PERSON:	Kathryn Straniero 708-	200		00
Ļ	LI ATTACUMENTO MILET ACCO	MPANY THIS REPORT - SEE INST		<u> 203</u>	<u>5-03</u>	<u>U.Z.</u>
,	ALL ATTACHMENTS MUST ACCC	WIFANT THIS REPORT - SEE INST	INDUTIONS		:	
UN	DER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLAR	RE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANN	UAL F	REPOR	π:
AN	D THE ATTACHED DOCUMENTS	I, INCLUDING ALL THE SCHEDULE	ES AND STATEMENTS, AND THE FACTS THEREIN STATE BENERAL FOR THE PURPOSE OF HAVING THE PEOPLE O) ARE		
			DRIZE AND AGREE TO SUBMIT MYSELF AND THE REGIST			
	REBY TO THE JURISDICTION OF					
			2.10 可能力不到14.10 全型2.20			
			ALANA IN INC.	i,	<u> </u>	<u>.</u>
	SURE TO INCLUDE ALL FEES DUE:	PRESIDENT or TRUSTEE (PRINT NA	AME) SIGNATURE		DAT	C
1.)	REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.			!.		"
2.)		TREASURER OF TRUSTEE (PRINT NA	AME) / SIGNATURE		DAT	E
3.)	REPORTS THAT ARE LATE OR	· · · · · · · · · · · · · · · · · · ·	The state of the s	9	h. J	۱). ۸
	INCOMPLETE ARE SUBJECT TO A \$100,00 PENALTY.	John C. Williams, C.P.	.A SWAU. WNMI.	<u> </u>	1141	\sqrt{N}
	- · · · · · · · · · · · · · · · · · · ·	PREPARER (PRINT NA	AME) // SIGNATURĚ	T	DAT	Έ
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ıF	ogether We Cope	<u>e 36-3666952</u> Fo	m AG9	90-IL, Pag
	THE ANSWER TO ANY C	OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES N
1.	WAS THE ORGANIZATION	N THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.	
2.	HAS THE ORGANIZATION	OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF,		
	EVER BEEN CONVICTED B	BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR		
	MISAPPROPRIATION OF F	FUNDS OR ANY FELONY?	2.	
_			••••	3-
J.	ANY OF ITS OFFICERS OF	MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH		
	IN WHICH ANY OF ITS OF	RECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION FICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID	NC	
	ANY OFFICER, DIRECTOR	R OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.	52.774 vs
		****	J.	
4.	HAS THE ORGANIZATION	INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR		
	TRUSTEE OWNS MORE TH	HAN 10% OF THE OUTSTANDING SHARES?	4.	
5	IS ANY PROPERTY OF THE	IE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE		and the second
٠.	PROPERTY OF ANY OTHE	R PERSON OF ORGANIZATIONS	-	
		IN ENGOY ON ONGANIZATION	5.	1.25
6.	DID THE ORGANIZATION U	USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.	
70	DID THE ODGANIZATION A	ALLOCATE THE COOR OF COMME		2.1.2
ra.	LITERATURE COSTS BETV	ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR WEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	_	
		***************************************	7.	
7b.	IF "YES", ENTER (i) THE AG	GGREGATE AMOUNT OF THESE JOINT COSTS \$;(ii) THE AMOUNT		
	ALLOCATED TO PROGRAM	M SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT		
	AND GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$		
8	DID THE ORGANIZATION E	EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED		1.0014
.	PURPOSES?	THE THO THE THICHED FOR PORPOSES OTHER (HAM RESTRICTED	Ω	1.0832
	***************************************	······································		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9.	HAS THE ORGANIZATION E	EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION		
	SUSPENDED OR REVOKED	D BY ANY GOVERNMENTAL AGENCY?	9.	
0.	WAS THERE OR DO YOU H	HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION		
	MISAPPROPRIATION, COM	MMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.	2
			•••	<u></u>
1.		RESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS		
	TUDEE I ADOLECT ACCOUNT	RESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS		
	THREE LARGEST ACCOUN MB Financial B	NTS:	· >•	
	MB Financial B	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452	2;	· · · · · · · · · · · · · · · · · · ·
	MB Financial B	NTS:	2;	
	MB Financial B Byline Bank -	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477	2;	
	MB Financial B Byline Bank -	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 NUMBER OF CONTACT PERSON: <u>Kathryn</u> Straniero	· · · · · · · · · · · · · · · · · · ·	
2.	MB Financial B Byline Bank - NAME AND TELEPHONE NO	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero	· · · · · · · · · · · · · · · · · · ·	3-030
2. ALL	MB Financial B Byline Bank - NAME AND TELEPHONE NO. ATTACHMENTS MUST ACC	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero 708	3-263	
2. ALL NDE	MB Financial B Byline Bank - NAME AND TELEPHONE NO ATTACHMENTS MUST ACC R PENALTY OF PERJURY,	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero COMPANY THIS REPORT - SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND	3-263	REPORT
2. ALL NDE	MB Financial B Byline Bank - NAME AND TELEPHONE NU ATTACHMENTS MUST ACC R PENALTY OF PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero COMPANY THIS REPORT - SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE	NUAL FED ARE	REPORT
2. ALL NDE	MB Financial B Byline Bank - NAME AND TELEPHONE NU ATTACHMENTS MUST ACC R PENALTY OF PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE E OF ILLINOIS RELY THERE	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero COMPANY THIS REPORT - SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE EUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGIS	NUAL FED ARE	REPORT
2. ALL NDE	MB Financial B Byline Bank - NAME AND TELEPHONE NU ATTACHMENTS MUST ACC R PENALTY OF PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE E OF ILLINOIS RELY THERE	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero COMPANY THIS REPORT - SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE	NUAL FED ARE	REPORT
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ALL NDE ND T RUE TAT ERE	MB Financial B Byline Bank - NAME AND TELEPHONE NU ATTACHMENTS MUST ACC R PENALTY OF PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE E OF ILLINOIS RELY THERE	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 UMBER OF CONTACT PERSON: Kathryn Straniero COMPANY THIS REPORT - SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE EUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGIS	NUAL FED ARE	REPORT
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ALL NDE ND TAT ERE	MB Financial B Byline Bank - NAME AND TELEPHONE NO. ATTACHMENTS MUST ACCORD PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE E OF ILLINOIS RELY THERE BY TO THE JURISDICTION RETOINCLUDE ALL FEES DUE: FORTS ARE DUE WITHIN SIX DINTHS OF YOUR FISCAL YEAR END.	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 SUMBER OF CONTACT PERSON: Kathryn Straniero CCOMPANY THIS REPORT-SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE SCHEDULES AND STATEMENTS, AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE EUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTOR THE STATE OF ILLINOIS. PRESIDENT OF TRUSTEE (PRINT NAME) SIGNATURE LVA LLLL LVA LLLL SIGNATURE	NUAL FED ARE	REPORT
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2. ALL NDE ND TAT ERE RE MO FO RE INC	MB Financial B Byline Bank - NAME AND TELEPHONE NO. ATTACHMENTS MUST ACCORD PERJURY, THE ATTACHED DOCUMENT AND COMPLETE AND FILE E OF ILLINOIS RELY THERE BY TO THE JURISDICTION RETOINCLUDE ALL FEES DUE: PORTS ARE DUE WITHIN SIX DITHS OF YOUR FISCAL YEAR END. REFEES DUE SEE INSTRUCTIONS.	NTS: Bank - 15533 S. Cicero Ave., Oak Forest, IL 60452 8801 W. 183rd St., Tinley Park, IL 60477 SUMBER OF CONTACT PERSON: Kathryn Straniero CCOMPANY THIS REPORT-SEE INSTRUCTIONS I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS AND THE SCHEDULES AND STATEMENTS, AND THE FACTS THEREIN STATED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE EUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTOR THE STATE OF ILLINOIS. PRESIDENT OF TRUSTEE (PRINT NAME) SIGNATURE LVA LLLL LVA LLLL SIGNATURE	NUAL FED ARE	REPORT