EXTENDED TO AUGUST 15, 2016

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2015 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For th	ne 2015 calendar year, or tax year beginning and en	ding	F NEW KNOW	LEIGH IN THE
В	Check is applicated Address	TREE RESEARCH AND EDUCATION ENDOWMENT		D Employer identi	fication number
H	chan				
F	chan	4 CONTROL OF THE PROPERTY OF T	veta n.tr.		1018692
E	Final return termi	552 S WASHINGTON STREET 10	oom/suite 09	E Telephone numb	er -369-8300
	ated	City or town, state or province, country, and ZIP or foreign postal code	Any pros	G Gross receipts \$	1,113,686.
F	return	NAPERVILLE, IL 60340		H(a) Is this a group	return
	tion	F Name and address of principal officer: JUHN ERIC SMITH	est progra	for subordinate	es? Yes X No
_	8.8	SAME AS C ABOVE	s and allo	H(b) Are all subordinates	included? Yes No
		xempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or (527	If "No," attach	a list. (see instructions)
		ite: ► WWW.TREEFUND.ORG	133,7	H(c) Group exempti	ion number
300000	00000000000	f organization: Corporation X Trust Association Other ▶	L Year o		M State of legal domicile: II
	art I	THE PROPERTY OF THE PROPERTY O	SSEAR		S THE TRUST'S
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SUPPOR AND ENVIRONMENTAL STEWARDSHIP	RT SU	STAINABLE (COMMUNITIES
, L	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net a	assets
0	3	Number of voting members of the governing body (Part VI, line 1a)	RTIN	3	1.0
S S	4	Number of independent voting members of the governing body (Part VI, line 1b)	moar.	ANCE OF 4	
es	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	rokka.	5	_
Vit.	6	Total number of volunteers (estimate if necessary)	TERR I		
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			
_	b	Net unrelated business taxable income from Form 990-T, line 34			
				Prior Year	Current Year
0	8	Contributions and grants (Part VIII, line 1h)		1,123,046	
nue	9	Program service revenue (Part VIII, line 2g)		0.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		30,559.	
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-151,693.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,001,912.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	298,640.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		325,049.	332,463.
Sus	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) > 395,003			
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		243,169.	397,637.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		866,858.	
	19	Revenue less expenses. Subtract line 18 from line 12		135,054.	
Net Assets or Fund Balances	En	Controlling 2011	Begi	nning of Current Year	End of Year
set	20	Total assets (Part X, line 16)		3,425,095.	3,423,629.
A A	21	Total liabilities (Part X, line 26)		292,703.	180,788.
		Net assets or fund balances. Subtract line 21 from line 20		3,132,392.	
	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules an	d statemer	nts, and to the best of n	ny knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer h	as any knowledge.	
Sig		Signature of officer		Date	
Her	е	JOHN ERIC SMITH, PRESIDENT/CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Da		PTIN
Paid		KAREN OLSON Kalen M. Olson	5-	If Iself-employ	P00085441
	arer	Firm's name DUGAN & LOPATKA, CPA'S PC		Firm's EIN ▶	36-2886485
Use	Only	Firm's address 104 E. ROOSEVELT ROAD SUITE 102	Himeines		
160	108	WHEATON, IL 60187-5267		Phone no.63	0-665-4440
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
		IIIA F B. I B I W I I I I			

	ther program services (Describe in Schedule O.) xpenses \$ including grants o otal program service expenses > 2	including grants of \$	100 X
	ther program services (Describe in Schedule O.)	The property of the property o	10 X
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b. V <u>/</u>	Stationa (p. Parts St. Warts)	The State of the San Veneral Kalyon Amprovious	
8			Professional Section S
ie p	The profit is an indicate consider the surface and	der Sty \$6 (ASC 740)7 if "Yes," complete School is U. Best X.	
2	University of the second of th	E all strategies for the tax tree lock to a factor as motival segues.	
e (1	a the consequence report an are sent for other liabilities	5 in Part School 257 if West Engineering School as D. Sund V	
. 10	art X, Small 167 in West Springland School of the Post St.	# Two states on 10 at its 60% or more of the total messate opposition	
	restriction of the first section of the community of the	Janet de El Ford Will	
4b (d	Code:) (Expenses \$	including grants of \$) (Revenue \$	
	isets recorded to Park Killing 1992 is then the extension to	than to the Property Administration of the Control	
-	The draw paid a report an emers of the investment	Contract representation in Proceed Vision Contract	198 1
_	HIGH SCHOOL. PROGRAMS ALSO ARBORICULTURE.	DESCRIBE THE CAREER OPPORTUNITI	ES IN
Ī	ROLE OF TREE RESEARCH. PRO	GRAMS INCLUDE INFORMATION FOR PF	RE-SCHOOL TO
I	PRESENTATIONS AND MEDIA INT	ERVIEWS ON THE IMPORTANCE OF TRE	EES AND THE
į	THE TOUR DES TREES PROVIDES	PPORT NUMEROUS PUBLIC EDUCATION EDUCATIONAL OPPORTUNITIES THROU	ENDEAVORS.
Ē	THE EDUCATIONAL DROCEAMS ST	DDODE NUMEDOUG DUDT TO DEVICE TO	ENDERTOS
1	PURPOSE.	Projects he enter an employed to make the project of the control o	
1	AND ORGANIZATIONS PERFORMIN	G TREE-RELATED RESEARCH WHICH IS	THE TRUST'S
,	Code:) (Expenses \$284,652 RESEARCH SUPPORT AND EDUCAT	including grants of \$ 133,789.) (Revenue \$ TON - PROVIDE RESEARCH GRANTS TO	12,068.
-	evenue, if any, for each program service reported. Code:) (Expenses \$ 284,652	122 700	12 060
5	Section 501(c)(3) and 501(c)(4) organizations are requ	ired to report the amount of grants and allocations to others, the	total expenses, and
		shments for each of its three largest program services, as measi	ured by expenses.
	f "Yes," describe these changes on Schedule O.	icant changes in how it conducts, any program services?	
	f "Yes," describe these new services on Schedule O.		la or
t	he prior Form 990 or 990-EZ?	art. II	Yes X N
2 [Did the organization undertake any significant prograr	m services during the year which were not listed on	
	25 108 Once 1000 Should be direct or indicate public	al Certification behinds an include of action provinted to a section (200).	2,500
	FIELDS OF ARBORICULTURE AND	URBAN FORESTRY.	
	SUPPORT SCIENTIFIC DISCOVER	RY AND DISSEMINATION OF NEW KNOW	LEDGE IN THE
1	Check it Schedule O contains a response or no Briefly describe the organization's mission:	te to any line in this Part III	1 1 2 2 2
	III Statement of Program Service According Check if Schedule O contains a response or no	te to any line in this Part III	

FUND Part IV Checklist of Required Schedules

2 Is the organ 3 Did the organ 4 Section 50 th during the ta 5 Is the organ similar amout 6 Did the organ provide advit 7 Did the organ the environn 8 Did the organ amounts not If "Yes," com 10 Did the organ endowments 11 If the organi as applicable a Did the organ assets report c Did the organ assets report d Did the organ part VI b Did the organ assets report c Did the organ part X, line 10 e Did the organ part X, line 10 e Did the organ f Did the organ b Was the organ It "Yes," and it Is the organizat 12a Did the organ foreign organi foreign organi foreign organi column (A), line 18 Did the organ	organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	200	Ye	s No
3 Did the organ public office 4 Section 50 during the ta 5 ls the organ similar amount of the environm 8 Did the organ amounts not lf "Yes," com 10 Did the organ assets report of Did the	" complete Schedule A	-	X	-
public office public office during the ta section 50 during the ta similar amou life organ provide advi provide advi provide advi life organ amounts not life organ amounts not life organ amounts not life organ amounts not life organ as applicable a Did the organ as applicable a Did the organ assets report b Did the organ assets report c Did the organ assets report d Did the organ assets report d Did the organ assets report life Did the organ for Did the organ life organ schedule D, life life organ investment, a or more? Ife organ foreign organi life Did the organ or for foreign i Did the organ or for foreign i Did the organ column (A), lin life Did the organ life organi	organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 50° during the tate of the organ similar amounts and the environments of the organ amounts not lif "Yes," community of the organ assets reported the organ assets re	organization engage in direct or indirect political campaign activities on behalf of or in apposition to condidate a few	100	_ ^	
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5 Is the organ similar amounts and the environments of the organ amounts not a	100 (c)(d) organizations. Did the organization engage in lobbying activities, or have a section 501/h) clootion in effect		FX	
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similar amounts and the environman bid the organ amounts not if "Yes," commod bid the organ assets reported bid the organ bid the organ assets reported bid	rganization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues assessments or	1 33		
provide advi provi	amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C. Part III	5		X
7 Did the organ the environm 8 Did the organ Schedule D, 9 Did the organ amounts not If "Yes," com 10 Did the organ as applicable a Did the organ as applicable a Did the organ assets report c Did the organ assets report d Did the organ assets report d Did the organ assets report d Did the organ f Did the organ f Did the organ f Did the organ Schedule D, I b Was the organ If "Yes," and I ls the organia b Did the organ investment, a or more? If "Y Did the organ foreign organi foreign organi column (A), lin Did the organ column (A), lin Did the organ	organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
sthe environm bid the organ schedule D, bid the organ amounts not lf "Yes," com bid the organ as applicable bid the organ assets report cid bid the organ assets report did bid the organ bid the organ fid bid the organ schedule D, lid bid the organ investment, a or more? If "y bid the organ foreign organi bid the organ foreign organi column (A), lin bid the organ column (A), lin bid the organ	advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part L	6		X
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amounts not If "Yes," com 10 Did the organize and applicable a Did the organize assets report comments of Did the organize assets report downward assets report downward assets report downward Did the organizet	organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete le D, Part III	8		х
amounts not If "Yes," com 10 Did the organize endowments 11 If the organize as applicable a Did the organizes assets reported Did the organizes	organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	246		1
10 Did the organia sa applicable a Did the organia as applicable a Did the organia assets report b Did the organiassets report c Did the organiassets report d Did the organiate f Did the organiate lia Did the organiate lia Did the organiaste lia Did the organia b Did the organian or more? If "Y lia Did the organian or for foreign organia or for foreign organiate lia Did the organian or for foreign organian or for foreign organial old the organian or for foreign organial old the organian or for foreign organial Did the organian organian organial Did the organian org	s not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	1000		1
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as applicable a Did the organ Part VI b Did the organ assets report c Did the organ assets report d Did the organ Part X, line 10 e Did the organ the organizat Did the organ the organizat Did the organ b Was the organ Is the organizat Jis the organizat Did the organ investment, a or more? If "Y Did the organ foreign organi Did the organ or for foreign or Column (A), lin Did the organ column (A), lin Did the organ	nents, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
b Did the organ assets report of Did the organ the organizate Did the Or	garrization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
b Did the organ assets report of Did the organ the organizate Did the Or	organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
assets report bid the organ assets report d Did the organ Part X, line 16 e Did the organ f Did the organ the organizat Did the organ Schedule D, I b Was the organ If "Yes," and I ls the organizat Did the organ investment, a or more? If "Y Did the organ foreign organi Did the organ foreign organi Old the organ or for foreign i Did the organ column (A), lin Did the organi column (A), lin Did the organi column (A), lin Did the organi	Organization report on amount for investment.	11a	Х	1
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assets report d Did the orgar Part X, line 16 e Did the orgar f Did the orgar the organizat 12a Did the orgar Schedule D, l b Was the organ If "Yes," and l 13 Is the organi 14a Did the organ investment, a or more? If "Y 15 Did the organ foreign organi foreign organi Old the organ or for foreign i Did the organ column (A), lin Did the organi	eported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	X
assets report d Did the organ Part X, line 16 e Did the organ f Did the organ the organizat Did the organ Schedule D, I b Was the organ If "Yes," and I ls the organ Did the organ investment, a or more? If "Y Did the organ foreign organi Did the organ foreign organi Old the organ or for foreign i Did the organ column (A), lin Did the organi	organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		1
Part X, line 16 Part X, line 17 Part X, line 1	eported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		X
Part X, line 16 e Did the organ f Did the organ the organizat Did the organ Schedule D, I b Was the organ If "Yes," and I ls the organ b Did the organ investment, a or more? If "Y Did the organ foreign organi foreign organi Oid the organ or for foreign i Did the organ column (A), lin Did the organi	organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
f Did the organizat the organizat the organizat 12a Did the organizat Schedule D, I b Was the organizat 13 Is the organizat 14a Did the organizat 15 Did the organizate or more? If "Y Did the organizate or for foreign organizate or for foreign organizate organizate organizate Did the Organizate Did	ne 16? If "Yes," complete Schedule D, Part IX	11d		X
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the organization the organization the organization in the organiza	organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
b Was the organ If "Yes," and I Is the organ If "Yes," and I Is the organ Did the organ investment, a or more? If "Y Did the organ foreign organi Or for foreign Column (A), lin Did the organ column (A), lin Did the organ	nization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part V	11f	Х	K
If "Yes," and it is the organizate Did the Organiza	organization obtain separate, independent audited financial statements for the tax year? If "Ves." complete	19	R	
If "Yes," and it is the organizate Did the Organiza	e D, Parts XI and XII	12a	X	
14a Did the organiant bid the organiant investment, a or more? If "Y Did the organiant foreign organiant bid the organiant or for foreign or for foreign column (A), lin Did the organiant bid the organiant column (A), lin Did the organiant bid bid the organiant bid bid the organiant bid	organization included in consolidated, independent audited financial statements for the tay year?	30		X
14a Did the organiant bid the organiant investment, a or more? If "Y Did the organiant foreign organiant bid the organiant or for foreign or for foreign column (A), lin Did the organiant bid the organiant column (A), lin Did the organiant bid bid the organiant bid bid the organiant bid	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
investment, a or more? If "Y Did the organ foreign organi Did the organ or for foreign in Did the organ column (A), lin Did the organi column the organi	ganization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
or more? If "Y Did the organ foreign organi Did the organ or for foreign i Did the organ column (A), lin Did the organi	organization maintain an office, employees, or agents outside of the United States?	14a		X
for more? If "Y Did the organ foreign organi Did the organ or for foreign i Did the organ column (A), lin Did the organi	organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	32		X
foreign organi foreign organi or for foreign or for foreign or for foreign occlumn (A), lin Did the organi	ent, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
foreign organi Did the organi or for foreign i Did the organi column (A), lin Did the organi	If "Yes," complete Schedule F, Parts I and IV	14b	X	1
or for foreign in or foreign in or foreign in or for foreign in or	rganization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
or for foreign of the organical column (A), lin Did the organical Did the organical Did the organical organical organical Did the organical Did the organical organica	rganization? If "Yes," complete Schedule F, Parts II and IV rganization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
column (A), lin Did the organi	eign individuals? If "Yes " complete Schedule F. Porte III and IV.	355		
column (A), lin 18 Did the organi	rganization report a total of more than \$15,000 of expenses for a refusion life.	16	X	
Did the organi	rganization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	300	-	
10 000 000 16	rganization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		X
ic and 8a? If	a? If "Yes," complete Schedule G, Part II	30_	17	
19 Did the organi	rganization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	X	
complete Sch	Schedule G, Part III	19		X

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Form 990 (2015) FUND Part IV Checklist of Required Schedules (continued)

20a	Tes, complete schedule H	20a	Yes	No X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	10		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	7		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete	25	1	
	Schedule J	23		X
24a		Ja		L.X.
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	96		
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X.
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	Sh		, y
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	6.0		X
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	Gh		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	76	X	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	.0000000000	Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer.	78	V	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	0.		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	OZ.		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
	Part V, line 1	34		X
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	ooa		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
	If "Yes," complete Schedule R, Part V, line 2	36		X
1	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
	Did the expenientian complete Oct and	01		
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O			

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V		netzuctions.			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			7	Yes	N
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1a		(
C		1b	(4		
	(gambling) winnings to prize winners?	eportal	ble gaming			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	······		1c		
	filed for the calendar year ending with or within the year covered by this return		1.	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	2a	4.	-		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	ns?		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?)	A managamining			
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule (^		3a		Σ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a			3b		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	utnori	ty over, a			
b	If "Yes," enter the name of the foreign country:	ccoun	it)?	4a		Σ
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac		(EDAD)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ccount	s (FBAR).			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5a	-	X
c	If "Yes." to line 5a or 5b, did the organization file Form 8886.To	ction?		5b		>
6a	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			5c		
- 6	any contributions that were not tax deductible as charitable contributions?	e orga	nization solicit			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution			6a	22	X
	were not tax deductible?	ons or	gifts	0.0		-
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
a	Did the organization receive a payment in excess of \$75 made partly as a centribution and and the first section 170(c).					
b	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	rices pr	ovided to the payor?		X	-
C	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7b	X	1100
10	to file Form 8282?	s requ	ired	1100	Name of the last	.,
d	It "Voo " indicate the asset of F cooc "			7c		X
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	7d	• filtram than towns to			.,
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ntract	7	7e		X
g	If the organization received a contribution of qualified intellectual property, did the organization file For	ct?		7f		X
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	m 889	9 as required?	7g		
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	ion file	a Form 1098-C?	7h		
	sponsoring organization have exceen husiness heldings to the contract of the c					
9	Sponsoring organizations maintaining donor advised funds.			8		
	Did the sponsoring organization make any taxable distributions under posting 40000			_		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a		
)	Section 501(c)(7) organizations. Enter:			9b		
	Initiation food and conital antillation in the same of					
b	Gross receipts included on Form 000 Part VIII II - 40 C	10a				
	Section 501(c)(12) organizations. Enter:	10b				
	Gross income from mombors or charabaldana					
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11a				
	amounts due or received from thom		area and a second			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	11b	e includence.			
b	f "Yes " enter the amount of tox axempt interest in a find			12a		
100	Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
a	s the organization licensed to issue qualified health plans in more than one state?			46		
8	Note. See the instructions for additional information the organization must report on Schedule O.		us ROS Indiana	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
,	organization is licensed to increase life at a large	21	ara da 190			
С	enter the amount of reconces on head	3b	Antoniosi sutt			
а	Did the organization receive any payments for indoor tapping convices duving the tay was a	3c				v
b	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule (······		14a		X
	Schedule (J		14b		100

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management		Marine to	in the second			
	encine the table to all calsons required to be letter. Report examplementation for the calcular was surface transported to be setted.		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 18	3					
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 18	3					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	antza	on.				
Liar p	of officers, directors, or trustees, or key employees to a management company or other person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Ser years	X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6	100	X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Es	unate				
	more members of the governing body?	7a	bunt e	X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		stree	.,			
	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v				
a	The governing body?	8a	X				
ь	Each committee with authority to act on behalf of the governing body?	8b	X	1/9			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v			
Sac	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Jec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		· ·				
102	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	Tua		Λ			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120					
	in Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
14	Did the organization have a written document retention and destruction policy?	14	X	2			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
a	The organization's CEO, Executive Director, or top management official	15a	Х				
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
ev s	exempt status with respect to such arrangements?	16b					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶IL			14			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole				
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial				
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			0			
	JOHN ERIC SMITH - 630-369-8300						
	552 S WASHINGTON STREET, NAPERVILLE, IL 60540						

Form 990 (2015)

37-1018692

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

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

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

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

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

Check this box if neither the organize (A) Name and Title	(B)	(C) Position						(D)	(E)	(F)
realle and Title	Average hours per week	box	(do not check more box, unless person i officer and a directo			e than	th an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RANDALL MILLER CHAIRMAN	10.00	x		X				0.	0.	0
(2) RAY HENNING TREASURER	4.00	Х		X				0.	0.	0
(3) MICHAEL ROBINSON	4.00				-		700	0.	0.	0
INTERIM TREASURER (4) BRIAN SAYERS	4.00	X		X			989	0.	0.	0.
VICE-CHAIRMAN (5) BRENT ASPLUNDH	ing but hot aimled to	Х	in the	X	100	381 1	/tio	0.	0.	0.
TRUSTEE	1.00	Х						0.	0.	0.
(6) JAMES BARBORINAS TRUSTEE	1.00	х		ay I		O P	E, 0	0.	0.	0.
(7) SCOTT DIFFENDERFER TRUSTEE	1.00	Х		lefe		iri a Nadi	id ci	0.	0.	0.
(8) HALLIE DOZIER TRUSTEE	1.00	х	dies Jan	lie suc	n ai Loc	ny dia	201	0.	0.	
(9) BARBARA FAIR TRUSTEE	1.00	Х	26014	New co	GE ST	trac	ters	0.	\$100.000 or 000 0 .	O.
(10) PAUL FLETCHER TRUSTEE	1.00	X	.80	aute.	94.5	c (a)		0.	1000	0.
(11) STEVEN GEIST TRUSTEE	1.00	X	RZS.	-				0.	0.	0.
(12) DOUG GOBER TRUSTEE	1.00	X						0.		0.
(13) GEORGE HUDLER	1.00	X	1					0.	0.	0.
(14) WILBUR NUTTER	1.00	X							0.	0.
(15) ROGER PHELPS	1.00	X						0.	0.	0.
(16) WILLIAM SCHLEIZER	1.00	X	Smit	eq:	o ti	084	liste:	0.	0.	0.
(17) JAMES URBAN	1.00	X		-		Q.		0.	0.	0.

532007 12-16-15

(Δ)	,ustees, key E	mple	yee	s, an	nd H	ighe	st C	ompensated Employe	es (continued)	8692	Pag
Name and title	Average hours pe	Position (do not check more that box, unless person is b officer and a director/tr					one	(D) Reportable compensation from	(E) Reportable compensation	Estin	F) nated unt of
b Nember of Descriptions d Descriptions of Descriptions d Descriptions of Descriptions	(list any hours for related organization below line)	ndividual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compe	n the ization elated
(18) THOMAS WOLF TRUSTEE	1.00) X									
(19) M. JANET BORNANCIN	60.00		188					0.	0		(
FORMER PRESIDENT/CEO (20) JOHN ERIC SMITH			1	Х	, 0			57,172.	0.	1	236
PRESIDENT/CEO	60.00)	Ge	v						1 1,	230
				X			-	40,987.	0.		(
							-				
1 All cross of upragraefytos foyaris							-				
o Tribul in of these pactors	den la interest		3								
a la office qualification (a)	All the Parket Connection		9	4		23	48	14.		297	184
Section Section	1.0000000000000000000000000000000000000		8								
th Cultural	1 101 6										
1b Sub-total c Total from continuation sheets to Par								98,159.	0.	1,2	236
d Total (add lines 1b and 1c)						-		98,159.	0.		0
2 Total number of individuals (including b compensation from the organization	ut not limited to the	nose l	istec	abo	ove)	who	rece	ived more than \$100,00	0.00 of reportable	1,2	236
The state of the s										12/	1
Did the organization list any former office line 1a? If "Yes," complete Schedule 1.f.	cer, director, or tru	ıstee,	key	emp	oloye	e, o	r high	nest compensated emp	lovee on	Yes	No
of the contract of the contract of the	JI SUCH INGIVIAHAL									3	Х
For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive		" 000	npen	satio	on a	na o	ther	compensation from the	organization		
below listed of life ta receive	or accrue comper	neatio	n fra	mar	21/11/	aval-	41 -		al for services	4	X
rendered to the organization? If "Yes," c	omplete Schedule	J for	suc	h pe	rson				arior services	5	Х
	compensated inc	lepen	dent	con	tract	tors	that	received more than \$1/	20.000 6		
. The for your live mignest	The street of His		1				trict	received more than \$10	00,000 of compensa	tion from	
Complete this table for your five highest the organization. Report compensation f	or the calendar ye	ear en	ding	with	ory	vithi	n the	organization's tax yea	r.		
(A)	or the balendar ye	al el	ung	with	orv	vitni	n the	(B)		(C)	2 % 7
	or the balendar ye	NOI	ung	with	orv	Withi	n the			(C) mpensatio	n
(A)	or the balendar ye	al el	ung	with	n or v	Withi	n the	(B)			'n
(A)	or the balendar ye	al el	ung	with	n or v	Withi	n the	(B)			n
(A)	or the balendar ye	al el	ung	with	ory	Withi	n the	(B)			'n
(A)	or the balendar ye	al el	ung	with	ory	Withi	n the	(B)			'n
(A) Name and busine	ss address	NOI	NE	Witr	i or (2.	5 3 4	(B) Description of serv	ices Co		en.
(A)	ss address	NOI	NE	• tho	i or (2.	5 3 4	(B) Description of serv	ices Co		'n

b c d	Federated campaigns Membership dues			Total revenue	Related or exempt function	Unrelated business	Revenue excluded from tax under
1 a b c d				\$100 State	revenue	revenue	sections 512 - 514
b c d		1a					
c d e		The second secon	18,88				
d e	Fundraising events		615,452.				
е	Related organizations		14,90				
	Government grants (contribut						
f	All other contributions, gifts, grant			1			
	similar amounts not included above		400,597.				
g			66,186.				
h	Total. Add lines 1a-1f			1,016,049.			
Artist	ere, and rowersployees		Business Code	***************************************			
2 a	representation are included above, to disperse	grafified					
b	ing the Peters I distar esetten 4988)	(yra)) and					
2 a b c d e	ns concept to section 465886734	6)					
d	resistant di Mapes.		173,57	7.1 33,	167.1 6	3,378,	80,032
е	or places, was and photographers.						
f	All other program service reve		3,65		172.	991.	2,194
g	Total. Add lines 2a-2f			2.1 4.1			
3	Investment income (including	dividends, intere	est, and		715.	3,847.	12,320
Fores	other similar amounts)			29,484.			29,484
4	Income from investment of tax	x-exempt bond p	proceeds				
5	Royalties			T at			3,477
Adop		(i) Real	(ii) Personal				
6 a	Gross rents						
b	Less: rental expenses	art IV issa 17					
	Rental income or (loss)		5,80				
	Net rental income or (loss)	of Box 25	•				
	Gross amount from sales of	(i) Securities	(ii) Other				
Actor	assets other than inventory	(//	12.86				
b	Less: cost or other basis		100000000000000000000000000000000000000				
totaz	and sales expenses		15.53				
C	Gain or (loss)						
	Net gain or (loss)		8.0		5 (c. L. 1)		16.820
	Gross income from fundraisin						
Person	including \$ 615,4	152 · of					
1	contributions reported on line						
Const	Part IV, line 18		56,085.				
b	Less: direct expenses		89,309.				
	Net income or (loss) from fund		>	-33,224.			-33,224
1000	Gross income from gaming ac			55,2216			33,221
- 4	Part IV, line 19		1 11 27				
h	Less: direct expenses		The state of the s	1			
	Net income or (loss) from gam						
10/11/20 60	Gross sales of inventory, less						
	and allowances		34.01				
h	Less: cost of goods sold			1			
	Net income or (loss) from sale			0.1000000000000000000000000000000000000	100.4		
-	Miscellaneous Revenu		Business Code				
	GRANT REFUNDS	10	900099	9,634.	9,634.		9 44.0
11 0	MISCELLANEOUS		900099	2,434.		5 738 1	200 000
			200033	2/434.	2,434.		3141070
b							25 1 25 1 2 2 2
b	coss. Consider this Energy is the	CONTRACTOR OF THE PROPERTY OF					
b c d			•	12,068.			

Part IX Statement of Functional Expenses

1 2 3	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		expenses	general expenses	expenses
	and domestic dovernments. See Part IV, line 21	10 000	10 000		
		18,883.	18,883.		
3	Grants and other assistance to domestic	04 006	04 006		
3	individuals. See Part IV, line 22	94,906.	94,906.		
	Grants and other assistance to foreign	ensateri employees, Qo	mpleta		
	organizations, foreign governments, and foreign	20 000	20 000		
	individuals. See Part IV, lines 15 and 16	20,000.	20,000.		
4 5	Benefits paid to or for members	Social Sections and	contributing in the		
5	Compensation of current officers, directors,	99,395.	18,909.	24 494	16 000
6	trustees, and key employees	99,393.	10,909.	34,484.	46,002
0	를 보고 있는데 그런 사람들이 있는데 보고 있는데 보고 있는데 보고 있다. 그런데 이번 사람들이 있는데 사람들이 되었다면 없는데 사람들이 없다면 하다면 하다면 다른데		A Comment		
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	173,577.	33,167.	60,378.	80,032
8	Other salaries and wages Pension plan accruals and contributions (include	1/3,3//.	33,107.	00,370.	00,032
0		3,657.	472.	991.	2 10/
9	section 401(k) and 403(b) employer contributions)	34,952.	4,515.	9,467.	2,194
0	Other employee benefits	20,882.	2,715.	5,847.	
100	Payroll taxes	20,002.	2,713.	3,047.	12,320
1	Fees for services (non-employees):	(A)		13	
	Management	3,477.		- 14.1	2 477
	Legal	15,755.	2 021	1 171	3,477
	Accounting	13,733.	2,021.	4,471.	9,263
d	Lobbying			22.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	39,181
	Professional fundraising services. See Part IV, line 17	0 000		0 000	140,000
f	Investment management fees	8,800.		8,800.	×
	Other. (If line 11g amount exceeds 10% of line 25,	655		425	220
	column (A) amount, list line 11g expenses on Sch O.)	655.	2 606	425.	230
	Advertising and promotion		3,686.	24.	9,159
	Office expenses	46,340.	4,736.	5,703.	35,901
	Information technology	15,522.	10,799.	562.	4,161
	Royalties	10 404	2 261	F 222	10 000
	Occupancy	18,404.	2,361.	5,223.	10,820
	Travel	140,559.	27,976.	524.	112,059
	Payments of travel or entertainment expenses	Hee 17:44. Complets F	art X of		
	for any federal, state, or local public officials	1 620	0.2	165	1 200
	Conferences, conventions, and meetings	1,638.	83.	165.	1,390
0	Interest	956 cosoli bare 🎮	A see		
	Payments to affiliates	Land L		100 100	
	Depreciation, depletion, and amortization	0 276	1 420	005	6 000
3	Insurance	8,376.	1,438.	905.	6,033
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	E0 025	0.740	10 561	27 626
	RECRUITMENT	59,935.	8,748.	13,561.	37,626
	BAD DEBT	20,966.	20 000	20,966.	
	BOARD EXPENSES	20,000.	20,000.	10 001	003
		14,511.	2,693.	10,921.	897
	All other expenses	9,830.	6,544.	817.	2,469
	Total functional expenses. Add lines 1 through 24e	863,889.	284,652.	184,234.	395,003
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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art	/	Balance Sheet		- I- this D. AV			Г
	-	Check if Schedule O contains a response or not	e to any lin	ne in this Part X			
					(A) Beginning of year		(B) End of year
2.1	1	Cash - non-interest-bearing		144,024.	1	134,232	
	2	Savings and temporary cash investments		3,154,924.	2	3,176,80	
	3	Pledges and grants receivable, net		120,547.	3	103,12	
	4	Accounts receivable, net		4	-50.03		
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensations	ated emplo	yees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied persor	ns (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)	(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)((9) voluntary	100		
100		employees' beneficiary organizations (see instr).	Complete	Part II of Sch L		6	
	7	Notes and loans receivable, net	ta in this Rest XI		7		
	8	Inventories for sale or use			8	Yes	
	9	Prepaid expenses and deferred charges		Control of the Contro	5,600.	9	9,46
1	10a	Land, buildings, and equipment: cost or other	rocs a prio	r year or sheeked TO:			
		basis. Complete Part VI of Schedule D	10a	30,120.	0.000		
	b	Less: accumulated depreciation	10b	30,120.	0.	10c	
-	11	Investments - publicly traded securities				11	
-	12	Investments · other securities. See Part IV, line	esperato filman	12			
0	13	Investments · program-related. See Part IV, line		13			
	14	Intangible assets			se perférencia conscience	14	
-	15	Other assets. See Part IV, line 11				15	
1	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		3,425,095.	16	3,423,62
5 4	17	Accounts payable and accrued expenses	37,199.	17	34,18		
1	18	Grants payable	255,504.	18	146,60		
1	19	Deferred revenue		as year wastan sa fashio	19		
1	20	Tax-exempt bond liabilities		acimpo an auditoria (to be not inthe to the first	20	
1	21	Escrow or custodial account liability. Complete		30		21	
1	22	Loans and other payables to current and former	officers, d	lirectors, trustees,			
		key employees, highest compensated employee	es, and disc	qualified persons.			
						22	Essa BAA or
1	23	Secured mortgages and notes payable to unrela				23	
1	24	Unsecured notes and loans payable to unrelate				24	
1	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		Schedule D			202 702	25	100 70
- 2	26	Total liabilities. Add lines 17 through 25			292,703.	26	180,78
		Organizations that follow SFAS 117 (ASC 958		ere 🕨 🔼 and			
	-	complete lines 27 through 29, and lines 33 an		4	707 753		724 50
	27	Unrestricted net assets			787,753. 1,088,104.	27	734,58
	28	Temporarily restricted net assets		1,256,535.	28	1,275,81	
1	29				1,230,333.	29	1,275,01
		Organizations that do not follow SFAS 117 (A	neck nere				
	20	and complete lines 30 through 34.				20	
1	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or ed				31	
	32	Retained earnings, endowment, accumulated in			3,132,392.	33	3,242,84
,	33 34	Total net assets or fund balances			3,425,095.		3,423,62
	U-4	Total liabilities and fiet assets/fund balances	**************		3, 123,033.	34	Form 990 (2)

	n 990 (2015) FUND	37-10	18692	P	age 12
Pa	rt XI Reconciliation of Net Assets		-00	11	age 12
-	Check if Schedule O contains a response or note to any line in this Part XI			1.4	
1	Total revenue (must equal Part VIII, column (A), line 12)	ro q 880	1,02	4.3	377.
2	Total expenses (must equal Part IX, column (A), line 25)	2			389.
3	Revenue less expenses. Subtract line 2 from line 1	3			188.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,13		
5	Net unrealized gains (losses) on investments	5			39.
6	Donated services and use of facilities	6		0,0	, 55.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	a hokeda	No. of Local	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	9			0.
150	column (B))	10	3,24	2 8	2/1
Pa	rt XII Financial Statements and Reporting	10	3/24	2,0	,41.
10	Check if Schedule O contains a response or note to any line in this Part XII				X
	And an union cation that not hely receives a superioristic part of its superior from a upper overnet unit or from the	a Pohanti re	redir visco	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			103	140
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	0.	0-		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		2a		Λ
	separate basis, consolidated basis, or both:	ona			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		0.	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		2b	Λ	
	consolidated basis, or both:	basis,			
	X Separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?	audit,		v	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		2c	X	
3a	As a result of a federal award, was the organization required to undersonable the result of a federal award.	dule O.			
-	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Act and OMB Circular A-133?	gle Audit			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi		3a	V	X
-	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audit			13.00
	or addits, explain why in Scriedule O and describe any steps taken to undergo such audits		3b		

