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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2010

OMB No 1545-0047

Open to Public
Inspection

A Fo	r the :	2010 ca	alendar year, or tax year begi	nning 01-01-2010 and ending 12-31-2	2010			
B Ch	eck ıf a	pplicable	C Name of organization CNT Energy			D Empl	loyer i	dentification number
☐ Add	Iress ch	nange	Doing Business As			36-4	14430	093
☐ Nai	ne cha	nge	Doing business As			E Telep	hone	number
☐ Init	ıal retu	rn		ıf mail is not delivered to street address)	Room/	suite (773	3)269	9-4037
Ter	minate	d	2125 W North Avenue					
┌ Am	ended	return	City or town, state or country, a	and ZIP + 4		G Gross	receip	ts \$ 5,662,958
Г Арр	lication	n pending	Chicago, IL 60647					
			F Name and address of	principal officer	H(a)	Is this a group return	for affili	ates? Yes No
			Anne Evens 2125 W North Avenue			J ,		
			Chicago, IL 60647		1 -	Are all affiliates in		
						If "No," attach Group exempt		t (see instructions)
I Ta	x-exem	npt status	501(c)(3) 501(c) (4)	◀ (insert no)	H(c)	Group exempt	.1011 11	umber F
J W	ebsit e	e: ► www	w cntenergy org					
K For	n of or	ganization	Corporation Trust Assoc	lation ☐ Other ►	L Yea	ar of formation 20	001	M State of legal domicile IL
	rt I		nmary		- 13			
				ssion or most significant activities				
				elps communities control energy costs				
Activities & Governance	-							
<u> </u>	-							
氢	2	Check th	his box 🕶 if the organization	n discontinued its operations or dispose	ed of more t	han 25% of its	neta	assets
ŝ			•	erning body (Part VI, line 1a)			з	11
2 6				ers of the governing body (Part VI, line			4	9
Ĕ				ın calendar year 2010 (Part V, line 2a			5	33
₹			ımber of volunteers (estimate	, , ,	,		6	18
a व				m Part VIII, column (C), line 12			7a	0
				ne from Form 990-T, line 34			7b	0
				·		Prior Year		Current Year
	8	Contri	butions and grants (Part VII	I, line 1h)		160,	504	436,375
를	9	Progra	am service revenue (Part VII	I, line 2g)		2,876,	934	5,217,478
Raven	10	Invest	tment income (Part VIII, col	umn (A), lines 3, 4, and 7d)		5,548		6,097
æ	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		17		3,008
	12			11 (must equal Part VIII, column (A),	line	3,043,	003	5,662,958
	13			art IX, column (A), lines 1-3)		190,	-	257,102
	14			rt IX, column (A), line 4)	•		0	0
	15			loyee benefits (Part IX, column (A), line	es 5-			<u>-</u> _
\$		10)	,,,	(,		1,037,	053	1,630,704
Expenses	16a	Profes	ssional fundraising fees (Part	IX, column (A), line 11e)			0	0
ਡੋ	ь	Total fu	undraising expenses (Part IX, columi	n (D), line 25) 🕨 43,221	_			
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,250,	017	3,457,657
	18			must equal Part IX, column (A), line 25		2,477,		5,345,463
	19	Reven	nue less expenses Subtract I	ine 18 from line 12		565,	-	317,495
Net Assets or Fund Balances					Beg	inning of Curre Year	nt	End of Year
60 kg	20	Totala	assets (Part X, line 16) .			1,406,	185	3,586,313
t As id B	21					316,	_	2,307,609
200	22			act line 21 from line 20		1,089,		1,278,704
Pai	t II		nature Block			· · · · · ·		<u> </u>
Unde know	· penal	ties of po	perjury, I declare that I have exa	mined this return, including accompanying ete. Declaration of preparer (other than of				
		****				2011-11-08		
Sign		Signa	ature of officer			Date		
Here	2		Evens Executive Director					
		<u> </u>	e or print name and title					_
		Print/Type preparer's		Preparer's signature Hugh J Ahern CPA	Date 2011-10-25	Check if se employed		PTIN
Paid	ŀ		ame Desmond & Ahern Ltd	1	ZUII-10-ZS	, , , , , , , , , , , , , , , , , , , ,		Firm's EIN
Prepa		Fırm's add	Idress 10827 S Western Ave					
Use (Only		Chicago, IL 60643					Phone no ► (773) 779- 4720

-огп	n 990 (2010)				Page Z
Par	rt IIII Statement of Prog Check if Schedule O co			Part III	F
1	Briefly describe the organizati	-	, 4		
- Prom redu	notes innovative place-based er	ergy strategies to efficient energy us	se, and retrofits of exist	strengthen local economies, ene ing buildings to substantially low	
2	Did the organization undertake the prior Form 990 or 990-EZ		ogram services during t	he year which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new se	ervices on Schedul	e O		
3	Did the organization cease corservices?		ignificant changes in h	ow it conducts, any program	⊤Yes ▼ No
	If "Yes," describe these chang	es on Schedule O			
4		(4) organizations a	nd section 4947(a)(1)	s three largest program services trusts are required to report the a ogram service reported	• •
4a	(Code) (Ex	penses \$ 4	,722,106 including grants	of \$ 257,102) (Revenue	\$ 5,220,486)
				gy costs and to reduce energy usage by d programs that help them manage ene	offering up-to-date information on
4b	(Code) (Ex	penses \$	ıncludıng grants o	of \$) (Revenue \$)
	-				
4c	(Code) (Ex	penses \$	including grants o	of \$) (Revenue \$)
	-				
	-				
4d	Other program services (Des (Expenses \$		O) grants of \$) (Revenue \$)
4e	Total program service expens	es ⊧ -\$ 4	,722,106		

Part IV	Checklist	of Red	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νo
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νo
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		Νο
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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 Schedule L, Part I	25b		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νο
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νο
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Dart V	Statements Regarding Other IRS Filings and Tax Compliance
raity	Statements Regarding Other 1K3 Finnigs and Tax Compliance

Form	990 (2010)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		165	110
_	1a 19	₹		
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	٦.,	Yes	
2a	gaming (gambling) winnings to prize winners?	1c	res	
	Statements filed for the calendar year ending with or within the year covered by this			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
h	account)?	4a		No
ь	If "Yes," enter the name of the foreign country 🕨	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
_	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
	Section 501(c)(12) organizations. Enter Gross Income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
Ь	Enter the amount of reserves the organization is required to maintain by the states			
	ın which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1/2017:
		F	orm 99 0	1/2010

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		N o
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Ke	evenue Code.)		Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a	163	No.
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10ь		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		No
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply			

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization Adam Goldstein

2125 W North Avenue Chicago, IL 60647

(773) 269-4037

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

Check if Schedule O contains a response to any question 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, and **current** key employees 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

ation nor any rel	ated or	ganız	atıo	n co	mpens	ate	d any current office	r, dırector, or trust	e e
(B) Average hours		tıon (che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
per week (describe hours for related organizations in Schedule O)	Institutional Trustee Individual trustee or director		Officei	Key employee	Former lighest compensated imployee		from the organization (W- 2/1099-MISC)	rrom related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
50 00	Х		х				84,744	0	9,024
5 00	х		х				0	0	0
2 00	Х		х				0	115,167	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
1 00	х						0	0	0
	(B) A verage hours per week (describe hours for related organizations in Schedule O) 50 00 2 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00	(B) Average hours per week (describe hours for related organizations in Schedule O) 50 00 X 2 00 X 1 00 X	(B) A verage hours per week (describe hours for related organizations in Schedule O) 50 00 X 2 00 X 1 00 X	(B) A verage hours per week (describe hours for related organizations in Schedule O) 50 00 X 2 00 X 1 00 X	Average hours per week (describe hours for related organizations in Schedule O) 50 00	(B) A verage hours per week (describe hours for related organizations in Schedule O) (C) Position (check all that apply) 50 00 X X 200 X X 100 X X	A verage hours per week (describe hours for related organizations in Schedule O) 50 00	(B) Average hours per week (describe hours for related organizations in Schedule O) 50 00	A verage hours per week (describe hours for related organizations in Schedule O)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours		tion that a			II		Repo compe	D) rtable nsation	(E) Reportable compensation from related		(F Estim amount o compen	ated of other
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organiza	n the ation (W- 9-MISC)	organizations (W- 2/1099- MISC)	5	from organizat relat organiz	the ion and ed
								<u> </u>						
1b c	Sub-Total						· ·	•				_		
d	Total (add lines 1b and 1c) .						•	 -		84,744	115,16	67		9,024
	Total number of individuals (incl \$100,000 in reportable compen	-				ted	above) who	received	d more tha	in			
													Yes	No
	Did the organization list any fori on line 1a? <i>If "Yes," complete Sch</i>					ey e	mploy •	ee, o	r highest	compens	ated employee	3		No
	For any individual listed on line 1 organization and related organiza													No
	Individual			•	•	•		•		• •		4		No
	Did any person listed on line 1a services rendered to the organiz						•		_		•	5		No
Sec	ction B. Independent Con	tractors												
	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	ontra	ctors	that rec	eived mor	e than			
	Nan	(A) ne and business ad	dress							Desci	(B) ription of services		(C Compe	
455 Wa	y Busch ashington Blvd rk, IL 60302									Consulting/R			•	108,800

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ► 1

	90 (2010)			P	age 9
Part \	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue		
					513, or 514
इ इ	1a Federated campaigns 1a				514
Contributions, gifts, grants and other similar amounts	b Membership dues 1b				
s,g am∡	c Fundraising events 1c				
भूति अर	d Related organizations 1d				
ıŝ, (⊞ij	e Government grants (contributions) 1e 436,	375			
lon r sí					
e de la	f All other contributions, gifts, grants, and 1f similar amounts not included above				
d do	g Noncash contributions included in lines 1a-1f \$				
3 E	h Total. Add lines 1a-1f	436,37	5		
a	Business C	ode			
Program Service Revenue	2a See for conuce	5 24 7 47			
ie ve	Fee for service 90	5,217,47	5,217,478	3	
}e F					
31. VI	d				
30	e				
gran	f All other program service revenue				
Ž.					
	g Total. Add lines 2a-2f	5,217,47	8		
	Investment income (including dividends, interest	6,09	7		6.00
	and other similar amounts)	0,03	<u> </u>		6,09
	5 Royalties				
	(i) Real (ii) Person	al			
	6a Gross Rents				
	b Less rental				
	expenses c Rental income				
	or (loss) d Net rental income or (loss)				
	(i) Securities (ii) Other				
	Gross amount from sales of assets other than inventory b Less cost or				
	other basis and sales expenses				
	c Gain or (loss)				
	d Netgain or (loss)				
2	8a Gross income from fundraising events (not including				
oniei nevalue	\$ of contributions reported on line 1c)				
-	See Part IV, line 18				
	b Less direct expenses b				
)	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19 . a				
	b Less direct expenses				
	c Net income or (loss) from gaming activities►				
	10a Gross sales of inventory, less returns and allowances .				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business C	ode	1		
		3,00	3,008	3	
	b		1		
	с		1		
	d All other revenue				
	e Total. Add lines 11a–11d	2			
	▶	3,00			
	12 Tatal savanus Cas Instructions	ı	1	i	i

	990 (2010)				Page 10
Part	Statement of Functional Expenses		- 1		
А	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c	-		(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	257,102	257,102		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	93,768	89,736	3,376	656
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$,			
7	Other salaries and wages	1,273,829	1,140,875	104,022	28,932
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	165,697	143,898	16,946	4,853
10	Payroll taxes	97,410	92,223	4,068	1,119
а	Fees for services (non-employees) Management	189,123		189,123	
ь	Legal				
С	Accounting	10,646		10,646	
d	Lobbying				_
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	2,154,967	2,035,398	115,224	4,345
12	Advertising and promotion	17,718	17,298	420	<u> </u>
13	Office expenses	244,491	219,433	25,058	
14	Information technology	319,545		1,745	
15	Royalties	•	,	,	
16	Occupancy	138,775	124,631	10,974	3,170
17	Travel	53,549	28,278	25,271	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2572.12		25,212	
19	Conferences, conventions, and meetings	16,153	9,974	6,033	146
20	Interest	·			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	38,515	25,000	13,515	
23	Insurance	20,816		20,816	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Program expense	160,900	160,900		
ь	Dues and subscriptions	36,219	23,464	12,755	
С	Staff development	31,920	15,755	16,165	
d	Bad debt expense	22,396	20,341	2,055	
е	Miscellaneous	1,924		1,924	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	5,345,463	4,722,106	580,136	43,221
26	Joint costs. Check here ► □ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2010)

Part X Balance Sheet (A) (B) Beginning of year End of year 1 2,996 323.376 2 1.733.664 2 3 33,350 3 846,217 4 863,151 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 7 8 8 9,197 9 1,325 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 343,246 10a Part VI of Schedule D 266.492 ь Less accumulated depreciation 10b 89.701 l 10c 76,754 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 134,698 15 878,069 15 16 1,406,185 16 3,586,313 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 193.890 17 782.633 17 Accounts payable and accrued expenses . 18 18 113.110 19 19 1.524.976 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 9.368 25 0 Other liabilities Complete Part X of Schedule D 26 316.368 26 2,307,609 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1.089.817 1,278,704 Unrestricted net assets Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 1,089,817 33 1,278,704 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 1,406,185 3,586,313

Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5.6	562,95
2	Total expenses (must equal Part IX, column (A), line 25)	2			345,46
3	Revenue less expenses Subtract line 2 from line 1	3			317,49!
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,0	089,81
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 1	128,60
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,2	278,70
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in	n			
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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DLN: 93493312021171

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization made? Complete if the organization is exempt under section 501(c) except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Find a verification activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Substitution activities Find a verification made payments for each organization is listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds contributions received and promptly and directly delivered to a separate political organization's funds and promptly and directly delivered to a separate political organization's funds and promptly and directly delivered to a separate political organization's funds and promptly and directly delivered to a separate political expension or an anount of political expension in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds contributions received and green the amount paid from filing organization's funds and promptly and directly delivered to separate political expension to the filing organization's funds and promptly and dire		ction 501(c)(4), (5), or (6) organi me of the organization r Energy	·		Emplo	yer ide	entification number
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization managers under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3). 1 Enter the amount of the formative in the amount of the filing organization for section 501 (c) except section 501(c)(3). 1 Enter the amount of the filing organization is exempt under section 501(c) except section 501(c)(3). 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b exempt function made payments. For each organization listed, enter the amount paid from the filing organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization in Part IV. (e) Amount of political contributions received that were promptly and directly delivered to a separate political organization in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization in Part IV. (e) Amount of political contributions received that were promptly and directly delivered to a separate political organization in Part IV. (a) Name (b) Address (b) Address (c) EIN (d) Amount paid from separate political organization In Part IV. (e) Amount of political contributions received that were promptly and created the political organization in Part IV. (a) Name (b) Address (b) Address (c) EIN (d) Amount paid from	_						
Point a expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organizations received that were promptly and directly delivered to a separate political organization such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- ontributions received that were promptly and directly delivered to a separate political organization in Part IV (e) Amount of political contributions received that were promptly and directly delivered to a separate political organization in Part IV	ar	Complete if the or	ganization is exempt unde	er section 501(c) or is a section	on 52	27 organization.
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization managers under section 4955	1	Provide a description of the or	janızatıon's dırect and ındırect po	litical campaign ac	tivities in Part IV		
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955		Political expenditures				•	\$
Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization made? Tyes Yes Aa Was a correction made? Complete if the organization is exempt under section 501(c) except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization or secritor in point contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate political contributions received that were promptly and directly delivered to a separate segregated fund or a political contributions received that were promptly and directly delivered to a sepa	3	V olunteer hours					
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Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) A mount paid from filing organization's funds. If none, enter -0 - and promptly and directly delivered to separate political organization. If nore organization. If nore organization.	2	-	rganization's funds contributed to	other organization	s for section 527	.	\$
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) A mount paid from filing organization's funds. If none, enter -0- and promptly and directly delivered to separate political organization. If nore organization.	3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b	-	\$
organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) A mount paid from filing organization's funds. If none, enter -0- and promptly and directly delivered to separate political organization. If nore organization.		Did the filing organization file I	Form 1120-POL for this year?				⊤ Tes □ N
filing organization's funds If none, enter -0- and promptly and directly delivered to separate politica organization If none.	4	Enter the names addresses as	nd employer identification number	•	•		_
		organization made payments l amount of political contribution	ns received that were promptly and	d directly delivered	to a separate polit		ganızatıon, such as a
		organization made payments l amount of political contribution separate segregated fund or a	ns received that were promptly and political action committee (PAC)	d directly delivered If additional space	to a separate polit is needed, provide (d) A mount pai filing organiza	inform d from tion's	ganization, such as a nation in Part IV (e) A mount of politicontributions received and promptly and directly delivered to separate political organization. If non
		organization made payments l amount of political contribution separate segregated fund or a	ns received that were promptly and political action committee (PAC)	d directly delivered If additional space	to a separate polit is needed, provide (d) A mount pai filing organiza	inform d from tion's	ganization, such as a nation in Part IV (e) A mount of politicontributions received and promptly and directly delivered to separate political organization. If non

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

	(election under section 501(h)).					
		(a)		-	(b)	
		Yes	No	/	A moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	V olunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i		•			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		•	1		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
	501(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		٦	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		l	2	Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		r	3		Νo
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	II-A,			ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a	<u> </u>			
	Carryover from last year	2b				
	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pä	art IV Supplemental Information	1				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

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DLN: 93493312021171

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Open to Public

Name o CNT Ener	f the organization rav		Employer identification number
			36-4443093
Part I	Organizations Maintaining Donor Accordance organization answered "Yes" to Form 99	0, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
	al number at end of year		
	gregate contributions to (during year)		
	gregate grants from (during year)		
A g g	gregate value at end of year		
	t the organization inform all donors and donor advids are the organization's property, subject to the o		or advised Yes No
us e c o r	the organization inform all grantees, donors, and ed only for charitable purposes and not for the ben offerring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny other purpose Yes No
Part II			o Form 990, Part IV, line 7.
Г Г г с °	rpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space mplete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of a c	historically importantly land area certified historic structure
eas	sement on the last day of the tax year	ı	1
- Tot	tal number of conservation easements	+	Held at the End of the Year
_	tal acreage restricted by conservation easements	-	2a 2b
	mber of conservation easements on a certified his		
_	mber of conservation easements included in (c) ac	` '	2c 2d
		· · · · ·	
	mber of conservation easements modified, transfe taxable year 🕨	rred, released, extinguisned, or terminate	d by the organization during
l Nu	mber of states where property subject to conserva	ition easement is located ►	<u></u>
	es the organization have a written policy regarding forcement of the conservation easements it holds?		dling of violations, and
Sta	aff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year ►
' A m	nount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during the year ► \$
	es each conservation easement reported on line 2 O(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion Yes No
bal	Part XIV, describe how the organization reports co lance sheet, and include, if applicable, the text of t e organization's accounting for conservation easen	he footnote to the organization's financial	·
art II	Organizations Maintaining Collectio Complete if the organization answered "		or Other Similar Assets.
art	he organization elected, as permitted under SFAS , historical treasures, or other similar assets held ovide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
hıs	the organization elected, as permitted under SFAS torical treasures, or other similar assets held for povide the following amounts relating to these items	public exhibition, education, or research in	·
(i)	Revenues included in Form 990, Part VIII, line 1		▶ \$
(ii)	Assets included in Form 990, Part X		▶ \$
Ift	the organization received or held works of art, histo owing amounts required to be reported under SFA		or financial gain, provide the
a Rev	venues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

Part	••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or Otl	<u>her</u>	Similar Ass	ets (continued)
	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing	that are	a sıgnıfıcan	t us	e of its collecti	on	
а	Public exhibition		d	Γ	Loan	orexch	ange progra	ms			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
	Provide a description of the organization's co	ollections and expla	ain hov	w the	y furthe	er the o	rganızatıon's	exe	empt purpose ir	ı	
	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Part	Part IV, line 9, or reported an an						answered	"Ye	s" to Form 99	90,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	itions o	r other asset	ts no		Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	/ıng t	able				Am	ount	
c	Beginning balance						1	c			
d	Additions during the year							d			
e	Distributions during the year						F	e			
f	Ending balance						1				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?						Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV								,		,
Par			n ans	wer	ed "Ye	s" to F	orm 990. F	Part	TV. line 10.		
		(a)Current Year) Prior						(e)Four	Years Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and ac	dministered 1	for t	he		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a(i		
	(ii) related organizations							•	3a(i)	
	If "Yes" to 3a(II), are the related organizatio Describe in Part XIV the intended uses of th	•						•	3b		
- Pari						QN Da	rt V line 1	<u></u>			
	Threstments Land, bandings	, and Equipme	, III C. J		a) Cost o		(b)Cost or ot		(c) Accumulated		
	Description of investment				sis (inve		basis (other		depreciation	(d)	Book value
	and		•	\vdash				_			
	Buildings		•	-			58,2	283	21,6	56	36,627
	easehold improvements		•	\vdash							
d E	Equipment			1			169,4	477	141,8	50	27,627
				-			<u> </u>	- 1		1	
e 0	Other		•				115,4	486	102,9	36	12,500 76,754

	Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b)Book value		d of valuation
(1)Financial derivatives		Cost of elia-of	-year market value
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12	
Part VIII Investments—Program Related. See	Form 990, Part X, line		d of volumes
(a) Description of investment type	(b) Book value		d of valuation - year market value
			, car market rare
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion		(b) Book value
(1) Due from Center for Neighborhood Technology			878,069
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		878,069
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X			878,069
			878,069
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		878,069
Part X Other Liabilities. See Form 990, Part X	, line 25.		878,069
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		878,069
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		878,069

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,662,958
Total expenses (Form 990, Part IX, column (A), line 25)	2	5,345,463
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	317,495
4 Net unrealized gains (losses) on investments	4	
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	-128,608
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 - 8	9	-128,608
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	188,887
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	turn
Total revenue, gains, and other support per audited financial statements	1	
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 A mounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a]	
b Other (Describe in Part XIV)	1 1	
c Add lines 4a and 4b	4c	
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments	1	
c Other losses		
d Other (Describe in Part XIV)	1	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Part XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Description of Uncertain Tax Positions Under FIN 48		Fin 48 Footnote CNT Energy is exempt from income taxes under Section 501(c)(4) of the Internal Revenue Code. The tax exempt purpose of the Organization and the nature in which it operates is described above. The Organization continues to operate in compliance with its approved tax-exempt purpose. The Organization's annual information and income tax returns filed with the federal and state governments are subject to examination for the statutory period.

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493312021171

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number CNT Energy 36-4443093 Part General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be (c) IRC Code section 1 (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applicable grant valuation non-cash assistance orassistance cash (book, FMV, appraisal, or government assistance other) 36-2967283 501(C)(3) 257.102 (1) Center for Neighborhood Contribution Technology2125 W North Avenue Chicago, IL 60647

	·
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grant made to a related party The use of funds are monitored on an ongoing basis
O ther Information		Grant was approved by the Board of Directors and documented in the board minutes. The grant was also recorded in the Organization's accounting records

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DLN: 93493312021171

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

	Employer identification number
CNT Energy	
	36-4443093

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The 990 is reviewed by the CFO along with the Executive Director/Board member. A copy is then provided to the full Board for a final review and their approval

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	The Board reaffirms the Organization's conflict of interest policy annually when each member completes a conflict of interest disclosure form

ldentifier	Return Reference	Explanation
	Section B, line 15	An annual review of the Executive Director is performed by the independent officers of the board. The chairperson of the board provides a written report to the board to substantiate compensation, duties and goals for the coming year. The Executive Director conducts the annual performance review for all other officers and key employees.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	The Organization makes its governing documents, conflict of interest policy and financial statements available upon request

ldentifier	Return Reference	Explanation				
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Prior period adjustments -128,608				

ldentifier	Return Reference	Explanation
	Form 990, Page 1, #5	CNT Energy employs thirty-three people w ho are paid through Center for Neighborhood Technology, a related tax exempt organization (FEIN 36-2967283)

DLN: 93493312021171

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization **CNT Energy** 36-4443093

Part I	Identification of Disregarded Entities (Complete	ıf the organization	answered "Yes" o	n Form 990, Par	t IV, line 33.)	
	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II	Identification of Related Tax-Exempt Organizat or more related tax-exempt organizations during the		the organization a	nswered "Yes" o	on Form 990, Part	IV, line 34 because it had one

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	g) 12(b)(13) rolled ızatıon
						Yes	No
(1) Center for Neighborhood Technology 2125 W North Avenue Chicago, IL 60647 36-2967283	Strengthen underdeveloped Chicago neighborhoods	IL	501(C)(3)	170(B)(1)(A)(VI)	N/A		No
(2) I-Go Alternative Transportation for Chicagoland Inc 2125 W North Avenue Chicago, IL 60647 68-0493308	Affordable transportation through car sharing	IL	501(C)(3)	170(B)(1)(A)(VI)	N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for Form 990.	Cat No 50	135Y		Schedule R (F	orm 990)	2010

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total incom	e Share of e		(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 2 Schedule K-1 (Form 1065)	0 of	(j Gener mana partr	alor ging	(k) Percentage ownership
(1) myHomeEQ LLC	Residential real estate energy score development	IL		related				Yes	No No			Yes	No No	
				able as a Corpor zations treated as						n answered "Y	'es" o	n Fo	rm 99	90, Part IV,
Name, address, a	(a) nd EIN of related organiza	ation	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direc	(d) t controlling entity	Type ((C corp	e) of entity o, S corp rust)		(f) re of total income	en	(g) Share of d-of-y assets	ear	(h) Percentage ownership

q O ther transfer of cash or property to other organization(s)

 ${f r}$ O ther transfer of cash or property from other organization(s)

b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) it Exchange of assets it Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) it Performance of services or membership or fundraising solicitations for other organization(s) it Performance of services or membership or fundraising solicitations by other organization(s) in Sharing of facilities, equipment, mailing lists, or other assets o Reimbursement paid to other organization for expenses		Рa	ge 3	
Part \	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
Not	te. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Re	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gif	ft, grant, or capital contribution to other organization(s)	1b	Yes	
c Gıf	ft, grant, or capital contribution from other organization(s)	1 c		No
d Lo	ans or loan guarantees to or for other organization(s)	1d	Yes	
e Lo	ans or loan guarantees by other organization(s)	1e	Yes	
f Sa	le of assets to other organization(s)			No
g Pu	ırchase of assets from other organization(s)	1g		No
h Ex	change of assets	1h		No
i Lea	ase of facilities, equipment, or other assets to other organization(s)	1i		No
j Lea	ase of facilities, equipment, or other assets from other organization(s)	1j		No
k Pe	rformance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
I Per	rformance of services or membership or fundraising solicitations by other organization(s)	11		No
m Sh	aring of facilities, equipment, mailing lists, or other assets	1m		No
n Sh	naring of paid employees	1n		No
o Re	elmbursement paid to other organization for expenses	10	Yes	
p Re	eimbursement paid by other organization for expenses	1р		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including	g covered relationships and transaction thresholds
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(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Center for Neighborhood Technology	В	257,102	
(2) Center for Neighborhood Technology	R	1,331,559	
(3) Center for Neighborhood Technology	D	878,069	
(4) Center for Neighborhood Technology	К	50,738	
(5) Center for Neighborhood Technology	0	327,898	
(6) I-Go Alternative Transportation for Chicagoland Inc	D	117,759	

No

1r Yes

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Return Reference	Explanation

Schedule R (Form 990) 2010

Software ID: Software Version:

EIN: 36-4443093 **Name:** CNT Energy

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	Center for Neighborhood Technology	В	257,102	
(2)	Center for Neighborhood Technology	R	1,331,559	
(3)	Center for Neighborhood Technology	D	878,069	
(4)	Center for Neighborhood Technology	К	50,738	
(5)	Center for Neighborhood Technology	0	327,898	
(6)	I-Go Alternative Transportation for Chicagoland Inc	D	117,759	