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Form **990**

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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For the 2	011 calend	dar year, or ta	x year beg	ginning Sep	1	, 20°	I1, and	d ending	Aug	31		<u>, 2012</u>	<u>!</u>		
В	Check if app	olicable	C Name of orga	inization T	ownship C	fficial	s of Il	linc	ois		D Emplo	yer Identi	ification N	umber		
	Addres	s change	Doing Busine	ss As							37-	0629	163			
	Name	change	Number and	street (or P C	box if mail is not	delivered to stre	et addr)		Room/su	te	E Telephone number					
	Initial r	•	3217 Nor	thfiel	d Drive						(21	7) 7	44-22	12		
	Termin		City, town or				Sta	te ZIP	code + 4		 	., .				
	\vdash	led return	Springfi	•			т.	ւ 62	2702		G Gross	racciate '	\$1 3/	5 957		
	\vdash		_		anal afficar			0 02		(a) is this	a group retu			Yes	X No	
	Applica	ation pending		•	*	Constant		TT 60	I		affiliates inc			Yes	A No	
_	T	-1-1-1			Northfield Dri				2702		attach a list		tructions)			
<u></u>		ıpt status		X 501(c)	(4) (insert no)	4947(a)(1)	or	527				_			
<u>1</u>	Websit		w.toi.org	_		<u> </u>	I				exemption n					
K		organization	X Corporation	Trust	Association	Other ►		L Year o	of Formatio	n 190	/ M	State of I	egal domic	ile. 보고		
Pa		<u>Summar</u>						<u> </u>		4 - T						
	1 Bri	efly descri	be the organiz	ation's mi	ssion or most :	significant ac	ctivities:	<u>Eauc</u>	ation	- <u>F</u> O -	TTIDO	<u>is go</u>	vern	nents		
9						 _								- -		
Activities & Governance																
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ĝ			ting members					posed	or more	man 25	76 OF ILS II	3	:15		34	
ಷ			dependent voti					e 1b)			•	4			34	
ţį	1		of individuals	_	_					• • •		5			5	
Ę			of volunteers					-, .				6		1	1,987	
¥			ed business re		-	umn (C), line	e 12					7a				
	b Net	t unrelated	business taxa	ible incom	ne from Form 9	90-T, line 34	1				•	7ь			0.	
										P	rior Year		Cu	rrent Ye	ar	
	8 Contributions and grants (Part VIII, line 1h)										823,	519.		854,	144.	
Ę	9 Program service revenue (Part VIII, line 2g)										434,	769.		486,	881.	
Revenue	10 Inv	estment in	come (Part VI	II, column	(A), lines 3, 4	, and 7d)					6,3	369.		4,	932.	
æ	11 Oth	ner revenu	e (Part VIII, co	lumn (A),	lines 5, 6d, 8d	c, 9c, 10c, ar	nd 11e)									
	12 Tot	al revenue	e – add lines 8	through	11 (must equal	Part VIII, co	ilumn (A), i	ine 12)	1	,264,	657.	1	,345,	<u>957.</u>	
	13 Gra	ants and si	milar amounts	paid (Pa	rt IX, column (A), lines 1-3) .									
	14 Bei	nefits paid	to or for mem	bers (Par												
_	15 Sal	laries, othe	er compensation	n_emplo	yee-benefits_(E	428,317.				450,	270.					
363	16a Pro	fessional	essional fundraising fees (Part IX) column (A), line 11e)													
Expenses	h Tot		raising expenses (Part IX, column (D), line 25) ►													
纽	17 Oth		es (Patr X, co										904,059.			
	10 To	iel expens	es. Add l <u>ine</u> s 1	2.17 /~~	5"2012" 19	, 111-24e)	\ line 25\			841,638. 1,269,955.			1	,354,		
	1					4	y, iine 25)		•	┝──┷					372.	
_ •		veriue iess	expenses Su			<u>yz</u>			•	D		298.				
16 or	20 Tot	tal accate	(Part X, line 16		v, U	1				Beginnin	ng of Currer 946,		ER	of Ye	246.	
90	21 Tot		s (Part X, line	-	•	•	•	•		}		308.		930, 8,		
Net Assets Fund Balanc	21 101		•	-				•			•					
			fund balances	s. Subtrac	t line 21 from I	ine 20		-		l	935,	690.]		921,	318.	
-		Signatur														
Und acom	er penalties (plete Declar	of perjury, 1 de ation of prepa	eclare that I have e arer (other than offi	xamined this cer) is based	return, including a log all information	ccompanying sci of which prepare	hedules and st er has any kno	atements wledge	s, and to th	e best of m	ny knowledge	e and beli	ief, it is tru	e, correct,	and	
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US	e Only	Firm's addre			CROSS ST						Firm's EIN					
_		<u> </u>		DRVILL				568			Phone no	(21		4-969		
Ma	y the IRS	discuss th	is return with t	he prepar	er shown abov	e? (see insti	ructions)						[X] Y	es	No	

Form	990 (2011) Township Officials of Illinois	37-062916 <u>3</u>	Page 2
Päi	説III🌉 Statement of Program Service Accomplishments		_
·	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	Education to Illinois governments		
2	Did the organization undertake any significant program services during the year which were not listed on t	he prior	
		T	s X No
	If 'Yes,' describe these new services on Schedule O		_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi	ices?	s X No
	If 'Yes,' describe these changes on Schedule O		_
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	ount of grants and all	ocations to
4 8	(Code:) (Expenses \$ 1,354,329. including grants of \$ 0.) (R	Revenue \$ 1,3	345,957.)
	of the organization relating to education, legislative		
	information and other. The members are all Illinois governments		
		- 	
			
			
41	(Code:) (Expenses \$ including grants of \$) (R	Povonuo \$	
41	(Code) (Expenses γ) (N	revenue 5	······································
			
40	: (Code:) (Expenses \$ including grants of \$) (R	Revenue \$)
			
			- -
4	Other program services. (Describe in Schedule O.)		
•••	(Expenses \$ including grants of \$) (Revenue \$)
4	Total program service expenses ► 1,354,329.		

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Form **990** (2011)

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			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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		х
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		х
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? If '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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
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.	<u>,</u>		
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
I	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	11 b		<u> </u>
•	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	11 c		X
•	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	11 d		<u> </u>
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u> </u>
	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		<u>x</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u> </u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
•	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u>x</u>
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 United States? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		<u>x</u>
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 United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		x
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_		X
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		x
	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>x</u>
!	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь		

Form 990 (2011) Township Officials of Illinois

Part IV Checklist of Required Schedules (continued)

			Yes	No
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		_x_
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		_x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	x	
24 8	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
25 a	a 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		х
ŀ	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		_ X
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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 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):	· '=,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
(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		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30	_	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II	32		х_
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		_X_
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		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ı	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	35b		<u>x</u>
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		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990 ((2011)

	1930 (2017) Township Officials Of Titing 17	<u> </u>	г	age
Kal	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	·		ᆫ
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	ETK:T		
ŀ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			152
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			÷
•	(gambling) winnings to prize winners?	1 c	X	
2 2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	E	2	
	ments, filed for the calendar year ending with or within the year covered by this return . 2a 5	##:		
ŧ	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	·		_ ()
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b	Х	
		<u> </u>		
40	a 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 account)?	4a		х
ŀ	If 'Yes,' enter the name of the foreign country:	7.	Milig!	,976
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		3.04	- "Ži
5 -	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	24.3883.2	X
		\vdash		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
•	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			1
	solicit any contributions that were not tax deductible?	6a		_ X
ŀ	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			1
	not tax deductible?	6ь	- 0 -	
7	Organizations that may receive deductible contributions under section 170(c).	2	371	
a	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			72.7
	services provided to the payor?	7a		Х
Ŀ	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7с		X
C	If 'Yes,' indicate the number of Forms 8282 filed during the year	anilia		********
€	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
c	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7g		
ŀ	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		22-32-53-33	******
_	holdings at any time during the year?	8		7VS1 2
9	Sponsoring organizations maintaining donor advised funds.	, T. E.c.	- 1 , 5	12.5
	a Did the organization make any taxable distributions under section 4966?	9a		
Ŀ	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			% .
â	a Initiation fees and capital contributions included on Part VIII, line 12	234		
k	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	75 G (K)		
11	Section 501(c)(12) organizations. Enter:	٠.٠٠. `		\$27.72
	Gross income from members or shareholders			, e* 4 * * * * * * * * * * * * * * * * *
	Gross income from other sources (Do not net amounts due or paid to other sources	~~~	- 33	
•	against amounts due or received from them.)	مترمر الآ		30 m
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	1 80/5	34° (L	- 3
	Section 501(c)(29) qualified nonprofit health insurance issuers.	al de la companya de La companya de la companya de		1
	s the organization licensed to issue qualified health plans in more than one state?		34	ئىسشىد ا
•		13a	작	
	Note. See the instructions for additional information the organization must report on Schedule O		, e	
t	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			, ,
_	Enter the amount of reserves on hand	. ž	',"	-
		14-	** v	v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Pa	rt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b b a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cha	elow, a	and i	for			
	Schedule O. See instructions.	nges i	••				
	Check if Schedule O contains a response to any question in this Part VI		<u> </u>				
Sec	tion A. Governing Body and Management						
_		<u>,</u>	Yes	No_			
1:	a Enter the number of voting members of the governing body at the end of the tax year 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.	4	-	^ ,.			
	b Enter the number of voting members included in line 1a, above, who are independent 1b 3	4					
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 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		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	5	х	X			
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			╁──			
	members of the governing body?	7a	Х	├			
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	. 7b		х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	. 65		,: 1			
	a The governing body?	. 8a	Х	Щ			
	b Each committee with authority to act on behalf of the governing body?	8ь	<u> </u>	├—			
9	Is there any officer, director or 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		<u>x</u>			
<u>Sec</u>	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	T NI=			
10	a Did the organization have local chapters, branches, or affiliates?	10a	res	No X			
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		<u> </u>			
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		x			
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		\$#~:4				
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		Х			
ı	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. 12b					
,	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c					
13	Did the organization have a written whistleblower policy?	. 13		<u> </u>			
14	Did the organization have a written document retention and destruction policy?	14	X	18k8x.22.4			
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		X			
	b Other officers of key employees of the organization	15b		X			
10	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		4 ₋	-77-			
16	a 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		х			
	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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		-			
Sec	ction C. Disclosure	1,00					
17							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	/ailable	for p	Jplic			
	Own website						
19	the public during the tax year.						
20		nization 217) 1		2212			

Form 990 (2011)	Township	Officials	٥f	Illinois
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age **7**

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. 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 organization	nor any r	or any related organization compensated any current officer, director, or trustee.												
	(A) Name and title	(B) Average hours	(do no unles	t che	Posi ck mo	tion ore the	an one l n an offi ustee)		Reportable compensation from the organization	(E) Reportable compensation from related groanizations	(F) Estimated amount of other				
		per week (describe hours for related organiza- tions in Schedule O)	advided trustee or director	institutional trustee	Officer		Hig) est coinperisated employee	र कतास		related organizations (W-2/1099-MISC)	compensation from the organization and related organizations				
'	(1) Bryan E. Smith Executive Director	40.00				х	х		99,720.		6,000.				
	(2) See attached list Various														
_	(3)														
_	(4)														
	(5)														
_	(6)														
_	Ø														
_	(8)														
_	(9)														
<u>(1</u>	0)														
<u>(1</u>	<u> </u>														
<u>(1</u>	2)														
ŋ	3														
<u>(1</u>	9						-								

Page 8

Part VII Section A. Officers, Directors, Trust	iees, I	∖ey ∣	Em		oye C)	es, a	anc	Hignest Com	ipensated Emp	loyees (cont)
(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	week (describ e hours for related organi- zations	Individual trustee or director	Institutional trust	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
	Sch O)		ee			sated				
15)	-									
19	-									
18)	1									
19)										
20)										
21)										
22)										
23)	-									
24)	-									
25)	-									
1 b Sub-total						•	٧ ٧	99,720.		6,000
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	4						•	99,720.		6,000
Total number of individuals (including but not limited from the organization	I to thos	se lis	ted	abo	ve) v	who r	ece		100,000 of reportal	
3 Did the organization list any former officer, director	or trust	ee, k	кеу є	empl	loye	e, or	hıgl	hest compensated	employee	Yes No
 on line 1a? If 'Yes,' compléte Schedule J for such in For any individual listed on line 1a, is the sum of repthe organization and related organizations greater th 			npen			ind o		· · · · · · · · · · · · · · · · · · ·		3 X
such individual	•		•							4 X
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' co Section B. Independent Contractors	omplete	Scl	nedu	le J	for	such	per	son .		5 X
Complete this table for your five highest compensate compensation from the organization. Report comper	ed indeposation	oend for the	ent d	cont	ract	ors th	nat i	received more tha	n \$100,000 of the organization's	tax vear.
(A) Name and business addres		101 6				,	5.1.0	(B Description)	(C) Compensation
2 Total number of independent contractors (including I	but not	lımıt	ed to	the	ose I	ısted	abo	ove) who received	more than	

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a res	sponse to any question	in this Part IX .		
Do n 6b, 7	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21			,	•
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members .				
	Compensation of current officers, directors, trustees, and key employees	99,720.	99,720.		
Ů	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
	Other salaries and wages	186,915.	186,915.		
•	Pension plan accruals and contributions (include section 401(k) and section 403(b)				
	employer contributions)	48,435.	48,435.		
	Other employee benefits	95,032.	95,032.		·· ······
	Payroll taxes	20,168.	20,168.		
	Fees for services (non-employees):				
	Management .	53,814.	53,814.		
	Legal	9,871.	9,871.		
	Accounting	36,009.	36,009.		
	Lobbying				
	Professional fundraising services See Part IV, line 17		- <u>' </u>	fir tritt	
	Investment management fees				
_	Other				
12	Advertising and promotion				···
	Office expenses	26,161.	26,161.		
	Information technology	27,989.	27,989.		
	Royalties				
	Occupancy	9,561.	9,561.		
	Travel ,	59,086.	59,086.		
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings .	133,323.	133,323.		
	Interest				·
	Payments to affiliates				
	Depreciation, depletion, and amortization	29,375.	29,375.		·
	Insurance	10,117.	10,117.	y • •	
	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	- 2 23			- A
	expenses on Schedule O.)	F1 000	F1 000	, ,	
	Dues	51,032.	51,032.		
	Printing and mailing	129,188.	129,188.		
	CDL-drug program	140,745.	140,745.		
	Public educ. & development	172,107.	172,107.		
	All other expenses	15,681.	15,681.		
	Total functional expenses. Add lines 1 through 24e	1,354,329.	1,354,329.		
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► ☐ if following				
	SOP 98-2 (ASC 958-720)				

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances

Total net assets or fund balances

Paid-in or capital surplus, or land, building, or equipment fund . .

Retained earnings, endowment, accumulated income, or other funds

Part X Balance Sheet (A) Beginning of year End of year Cash - non-interest-bearing . . 1 1 2 2 213,648 Savings and temporary cash investments 231,922. 3 Pledges and grants receivable, net 3 261,861 4 4 Accounts receivable, net 861 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 organizations (see instructions) Notes and loans receivable, net 7 3,263. 10,608 8 Inventories for sale or use Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 663,575 **b** Less: accumulated depreciation 10b 224,375 460,881 10 c 439,200. Investments - publicly traded securities . . 11 Investments - other securities, See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 946,998 16 936,246. 17 17 Accounts payable and accrued expenses . 18 Grants payable . . . 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 11,308 23 8,928. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 308 26 8,928 Organizations that follow SFAS 117, check here ► 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here X and complete 4 FUND lines 30 through 34.

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33

34

936,246. Form 990 (2011)

927,318.

927,318.

30

31

32

33

34

935,690

935,690.

946,998.

Form 990 (2011) Township Officials of Illinois 37-0629	9163 Page 12
Part∗XI∰ Reconciliation of Net Assets	
Check if Schedule O contains a response to any question in this Part XI	<u> </u>
	•
1 Total revenue (must equal Part VIII, column (A), line 12)	1,345,957.
2 Total expenses (must equal Part IX, column (A), line 25)	1,354,329.
3 Revenue less expenses. Subtract line 2 from line 1	-8,372.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	935,690.
5 Other changes in net assets or fund balances (explain in Schedule O) 5	
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	927,318.
Part XII Financial Statements and Reporting	
Check if Schedule O contains a response to any question in this Part XII	
	Yes No
1 Accounting method used to prepare the Form 990: X Cash Accrual Other	
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a X
b Were the organization's financial statements audited by an independent accountant?	2b X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 Schedule O	
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate 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?	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	dit 36
BAA	Form 990 (2011)

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SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

Department of the Treasury Internal Revenue Service

Township Officials of Illinois 37-0629163 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990. Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X ▶\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1. ▶\$ b Assets included in Form 990, Part X

Schedule D (Form 990) 2011 Town:				37-062		Page 2
Part III Organizations Mainta	ining Collect	ions of Art, Histo	orical Treasures, or	Other Similar Ass	ets (contin	iued)
3 Using the organization's acquisition (check all that apply):	on, accession, a	nd other records, che	ck any of the following th	at are a significant use	of its collecti	on
a Public exhibition		—	or exchange programs			
b Scholarly research		e U Other				
c Preservation for future gener						
4 Provide a description of the organ Part XIV.		•	•		ın	
5 During the year, did the organizar assets to be sold to raise funds ra	tion solicit or rec ather than to be	eive donations of art, maintained as part of	historical treasures, or o the organization's collec	ther similar tion?	Yes	∏No
Part IV Escrow and Custodia line 9, or reported an	I Arrangeme	nts. Complete if t	the organization ans	wered 'Yes' to For	rm 990, Pa	rt IV,
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, o	r other intermediary t	for contributions or other	assets not	Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV and	complete the followin	g table:			
					Amount	
c Beginning balance				1c		
d Additions during the year		••		1 d		
e Distributions during the year				1 e		
f Ending balance .				1f	<u>Пу</u>	
2a Did the organization include an a		990, Part X, line 21?	• • • •		∐ Yes	∐No
Part V. Endowment Funds. Co		organization and	swored 'Ves' to Form	n 990 Part IV line	10	
Fait Vi Endowment Funds. Co	T			(d) Three years back		are back
1 a Beginning of year balance	(a) Current yea	r (b) Prior yea	(C) TWO years back	(u) Three years back	(e) Four ye	
b Contributions				- -		
			1		1950.58	<u> </u>
c Net investment earnings, gains, and losses						外。例如
d Grants or scholarships					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	£
e Other expenditures for facilities					Grant Control (Control Control	
and programs					, re signe	*
f Administrative expenses					2017	157 3544 313 314 4
g End of year balance .	L		1		2 5 3 1 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	t 第
2 Provide the estimated percentage	=	ear end balance (line	e ig, column (a)) neid as:			
a Board designated or quasi-endow b Permanent endowment ▶	vment	*				
c Temporarily restricted endowmer	<u></u> ¬	<u>Q.</u>				
The percentages in lines 2a, 2b,		v wal 100%				
		•				
3a Are there endowment funds not a organization by:	n the possession	of the organization t	nat are neid and administ	terea for the	Yes	No
(i) unrelated organizations .					3a(i)	1
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	organizations liste	ed as required on Sch	nedule R?		3b	
4 Describe in Part XIV the intended	uses of the orga	anization's endowmer	nt funds.			
Part VI Land, Buildings, and	Equipment. S	See Form 990, Pa	art X, line 10.			
Description of property	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated deprectation	(d) Book	
1 a Land			50,000.			0,000.
b Buildings	L		478,150.	147,642.	330	0,508.
c Leasehold improvements .						
d Equipment	<u> </u>		135,425.	76,733.	58	8,692.
e Other			/ (0) / (0)			
Total. Add lines 1a through 1e (Colum	in (d) must equa	rorm 990, Part X, c	oiumn (B), line 10(c).)	▶		9,200.
BAA				Sched	dule D (Form !	33U) ZUII

Schedule D (Form 990) 2011 Township Offici		1: 10		3/-0	0629163	Page
Part VII Investments - Other Securities. S		, line 12.	(.) 14			
(a) Description of security or category (including name of security)	(b) Book value		(c) Mer	hod of va	luation: narket value	•
(1) Financial derivatives						
(2) Closely-held equity interests						
(3) Other						
(A)						
(B)						
(C)						
<u>(P)</u>						
<u>(E)</u>						
<u> </u>						
<u>(G)</u>		<u> </u>				
<u>(H)</u>		<u> </u>				
<u>_()</u>		ļ	 			
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.).		<u> </u>	-			
Part VIII Investments — Program Related. S		, line 13.				
(a) Description of investment type	(b) Book value		(c) Met	hod of va	luation: narket value	.
(1)		 	COSt OF CHIL	-oi-year i	ilainet value	·
(2)		-				
(3)		-				
(4)					· · · · · · · · · · · · · · · · · · ·	
(5)						
(6)						
(7)						
(8)					_	
(9)						
(10)						
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	<u> </u>	A. ti		, c dik	i thin	
Part IX Other Assets. See Form 990, Part						
	Description				(b) E	Book value
_(1)						
(2)						
(3)						
(4) (5)						
(6)						
(7)		.			- - -	
(8)						
(9)			· · · · ·			·
(10)						
Total. (Column (b) must equal Form 990, Part X, column	r (B), line 15.)				<u> </u>	
Part X Other Liabilities. See Form 990, Pa		 -	•			
(a) Description of liability	(b) Book value	e [
(1) Federal income taxes						
(2)		# *** *** ***		77.		***
(3)				-		•
(4)						
(5)		5	_	.**		
(6)		*				
(7)						
(8)					-	
(9)			**	-		
(10)						
(11)						
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<u> </u>					
2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the telegraphical properties and a positions under F				anta that	-anarta tha	

		7-0629163	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	<u> </u>	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV.)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	-	
	Net unrealized gains on investments)** ,-	
	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIV.) 2d	-	
	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
-		3 	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	N. ST	
	Investment expenses not included on Form 990, Part VIII, line 7b		
	221		
-	Add lines 4a and 4b	. 4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
1	Total expenses and losses per audited financial statements	2 ***	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities 2a	**	
	Prior year adjustments		
	Other losses 2c	^	
	Other (Describe in Part XIV.)		
•	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	,	
	Investment expenses not included on Form 990, Part VIII, line 7b	^^ · · · · · · · · · · · · · · · ·	
	Other (Describe in Part XIV.)	السيادة المسادة	
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete additional information	e this part to provide	

Schedule D (Form 990) 2011	Township Officials of Illinois Information (continued)	37-0629163	Page 5
Rart XIV Supplemental	Information (continued)		
			_
			- -
			_ .
			- .

TEEA3305 05/25/11

Schedule **D** (Form 990) 2011

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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

37-0629163

Department of the Treasury Internal Revenue Service

Township Officials of Illinois

Employer Identification number

Pai	art I Questions Regarding Compensation				
				Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a persor VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	n listed in Form 990, Part ms.			
	First-class or charter travel Housing allowance or residen	nce for personal use		\$	
	Travel for companions Payments for business use o	f personal residence			
	Tax indemnification and gross-up payments Health or social club dues or	initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid	l, chauffeur, chef)		~	7
I	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to organize the complete that the complete is a second of the expenses described above?	payment or explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	all officers, directors,	2	х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a re establish compensation of the CEO/Executive Director. Explain in Part III.	of the organization's lated organization to	ā		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
	Compensation committee Written employment contract			-	
	Independent compensation consultant Compensation survey or stud	ly	, .,	; ^	
	Form 990 of other organizations Approval by the board or com	pensation committee	ŀ	- 21-	
			ŀ		- 1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the or a related organization:	ne filing organization			- ;133 - ;133
á	a Receive a severance payment or change-of-control payment?		4a		<u> x</u>
ŀ	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4ь		Х
•	c Participate in, or receive payment from, an equity-based compensation arrangement?		4c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in	n Part III.		뙆.~	- 1
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue a contingent on the revenues of:	any compensation	. 73		
á	a The organization?		5a		<u>x</u>
i	b Any related organization?		5b		X
	If 'Yes' to line 5a or 5b, describe in Part III.		"		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue a contingent on the net earnings of:	any compensation			
ā	a The organization?		6a		Х
ŀ	b Any related organization?		6b		Х
	If 'Yes' to line 6a or 6b, describe in Part III.				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any noi described in lines 5 and 6? If 'Yes,' describe in Part III		7		x
8	Were any amounts reported in Form 990. Part VII, paid or accrued pursuant to a contract that w	as subject to the initial			
_	contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part II	1	8		Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described section 53 4958-6(c)?	d in Regulations	9		

Schedule **J** (Form 990) 2011

Page 2

Township Officials of Illinois

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 37-0629163 Schedule J (Form 990) 2011

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on. row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

	(B) B	reakdown of	(B) Breakdown of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(I) Base compensation	ase sation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)·(D)	reported as deferred in prior Form 990
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က	(i)							
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4	(E)							
	(3)	 						
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6	(ii)							
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	(a)	<u> </u> 	 	 			 	
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12	(E)							
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13	(i)							
	(a)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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15	(11)							
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16	(1)							
BAA				TEEA4102 01/	01/24/12		Scher	Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

alling or made

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ. Department of the Treasury Internal Revenue Service

Name of the organization	Employer identification number
Township Officials of Illinois	37-0629163
See list of non compensated officers and direct	tors attached
See copy of record retention policy attached	
See copy of fraud policy attached.	
Form 990, Part V1 Line 19	
The Organization does not seek nor has ever rec	eived
contriutions or grants from the public. All co	ntributions
are received from other tax exempt organization	s, Illinois
local governments. The organization makes its	policies
available upon reguest and at annual conference	s

2011-2012 TOI Board of Directors

Full Name	Title	Address	City	State	e Zip
Michael J. Goral	President, TOI	119 N. Church St., Ste. 460	Rockford	L	61101-1034
Jeffery Wallace	1st Vice President, TOI	615 Ann St.	Joliet	${ m I\!L}$	60435
Karen L. Reese	2nd Vice President, TOI	3821 N. Vermilion St.	Danville	IL	61832-1159
Robert J. Miller	3rd Vice President, TOI	3702 US Highway 14	Crystal Lake	IL	60014
Danny Hanning	Secretary, TOI	RR 1, Box 61	Huntsville	IL	62344-9727
Larry Mowery	Treasurer, TOI	511 E. Newton St.	Heyworth	IL	61745-9163
Richard A. Ralston	Immed. Past President, TOI	PO Box 133	Oblong	IL	62449-0133
John Bauersfeld	Director, TOI	5 Hawthome Rd.	Rock Island	r	61201
Larry D. Bonn	Director, TOI	301 Bolls St.	Blue Mound	IL	62513
Treasa Brookman	Director, TOI	19247 E. 3rd St.	Opdyke	ഥ	62872
Susan J. Carpentier	Director, TOI	1019 27th Ave.	Rock Island	IL	61201
Susan Curtiss	Director, TOI	13497 E. 2100 North Rd.	Pontiac	\mathbb{L}	61764
Eugene Dawson	Director, TOI	602 S. Hough St.	Barrington	ഥ	60010-4428
William L. Donnan	Director, TOI	1151 Country Club Rd.	Lake Zurich	IL	60047-2123
Christine Filbert	Director, TOI	.21624 River Rd. N	Cordova	L	61242-9621
Bruce Flatness	Director, TOI	3450 E. 28th Rd.	Seneca	IL	61360
Mary Hamilton	Director, TOI	1945 1200th St.	Beason	${ m I\!L}$	62512-9725
Judy Herrman	Director, TOI	11174 Herrman Rd.	Manito	${ m IL}$	61546-8639
Leslie Hild	Director, TOI	404 S. Spring St.	Mt. Pulaski	IL	62548-1354
Christopher Kain	Director, TOI	PO Box 343	Wood Dale	IL	60191-0343
Imelda Kelch	Director, TOI	2206 W. Barker	West Peoria	ΠL	61604-5514
Donald Kopsell	Director, TOI	3716 Barreville Rd.	Crystal Lake	\mathbf{L}	60012-1554
Ann Dynako Kubiczky	Director, TOI	PO Box 86	Riverside	${ m I\!L}$	60546-0086
Deb Lane	Director, TOI	PO Box 54	Troy Grove	IL	61372
Glenn Loyet	Director, TOI	409 Fontainbleau	O'Fallon	IL	62269-1311
Darrell D. Maxheimer	Director, TOI	403 Sattley St.	Rochester	肛	62563-9242
Karen Megan	Director, TOI	18112 W. Laura Rd.	Princeville	IL	61559
Shirley J. Moore	Director, TOI	10016 E. Heritage Dr.	Effingham	\mathbb{L}	62401-4475
Richard W. Phillips	Director, TOI	1319 Schroeder Dr.	Normal	${ m I\!L}$	61761-3232
R.C. Smith	Director, TOI	3494 E. Fulton Ave.	Decatur	IL	62521-4548
Candice D. Trees	Director, TOI	1106 N. 32nd St.	Springfield	IL	62702-4502
Deanna Wilkins	Director, TOI	1502 S. Meyers Rd.	Lombard	IL	60148
Jim Young	Director, TOI	507 S. Broadway	Newman	肛	61942
Michael Young	Director, TOI	148 S. Poplar St.	Centralia	止	62801

THE TOWNSHIP OFFICIALS OF ILLINOIS

FRAUD POLICY

Scope

This policy applies to any fraud or suspected fraud involving employees, officers or directors, as well as members, vendors, consultants, contractors, funding sources and/or any other parties with a business relationship with Township Officials of Illinois ("TOI"). Any investigative activity required will be conducted without regard to the suspected wrongdoer's length of service, position/title, or relationship with TOI.

Policy

Management is ultimately responsible for the detection and prevention of fraud, misappropriations, and other irregularities. Fraud is defined as the intentional, false representation or concealment of a material fact for the purpose of inducing another to act upon it to his or her injury.

Any fraud that is detected or suspected by an employee of TOI must be reported immediately to the Executive Director or to a member of the Executive Committee.

Actions Constituting Fraud

The terms fraud, defalcation, misappropriation, and other fiscal irregularities refer to, but are not limited to:

- 1. Any dishonest or fraudulent act.
- 2. Forgery or alteration of any document or account belonging to TOI.
- 3. Forgery or alteration of a check, bank draft, or any other financial document.
- 4. Misappropriation of funds, securities, supplies, equipment, or other assets of TOL
- 5. Impropriety in the handling or reporting of money or financial transactions.
- 6. Disclosing confidential and proprietary information to outside parties.
- 7. Accepting or seeking anything of material value from contractors, vendors, or persons providing goods or services to TOI. Exception: gifts less than \$25.00 in value.
- 8. Destruction, removal or inappropriate use of records, furniture, fixtures, and equipment.
- 9. Any similar or related irregularity.

Other Irregularities

Irregularities concerning an employee's moral, ethical, or behavioral conduct should be resolved by TOI's Executive Director.

If such irregularities involve the Executive Director, the employee shall contact the Executive Committee.

If there is a question as to whether an action constitutes fraud, contact the Executive Director or a member of the Executive Committee for guidance.

Investigation Responsibilities

The Executive Committee has the primary responsibility for the investigation of all suspected fraudulent acts as defined in the policy. The Executive Committee may utilize whatever internal and/or external resources it considers necessary in conducting an investigation. If an investigation substantiates that fraudulent activities have occurred, the Executive Committee will issue reports to appropriate designated personnel and, if appropriate, to TOI's Board of Directors.

Decisions to prosecute or refer the examination results to the appropriate law enforcement and/or regulatory agencies for independent investigation will be made in conjunction with legal counsel and TOI's Board of Directors, as will final dispositions of the case.

Confidentiality

The Executive Committee and the Executive Director shall treat all information received confidentially. Any employee who suspects dishonest or fraudulent activity will notify the Executive Director or a member of the Executive Committee immediately, and should not attempt to personally conduct investigations or interviews/interrogations related to any suspected fraudulent act (see Reporting Procedures section below).

Investigation results will not be disclosed or discussed with anyone other than those who have a legitimate need to know. This is important in order to avoid damaging the reputations of persons suspected but subsequently found innocent of wrongful conduct and to protect TOI from potential civil liability.

Authority for Investigation of Suspected Fraud

Members of the Executive Committee will have:

- 1. Free and unrestricted access to all TOI records and premises, whether owned or rented; and
- 2. The authority to examine, copy, and/or remove all or any portion of the contents of files, desks, cabinets, and other storage facilities on the premises without prior knowledge or consent of any individual who may use or have custody or any such items or facilities when it is within the scope of their investigations.

Reporting Procedures

Great care must be taken in the investigation of suspected improprieties or irregularities so as to avoid mistaken accusations or alerting suspected individuals that an investigation is under way.

An employee who discovers or suspects fraudulent activity will contact the Executive Director or a member of the Executive Committee immediately. The employee or other complainant may remain anonymous. All inquiries concerning the activity under investigation from the suspected individual(s), his or her attorney or representative(s), or any other inquirer should be directed to the Executive Director, the Executive Committee, or legal counsel. No information concerning the status of an investigation will be given out. The proper response to any inquiry is "I am not at liberty to discuss this matter." Under no circumstances should any reference be made to "the allegation", "the crime", "the fraud", "the forgery", "the misappropriation", or any other specific reference.

The reporting individual should be informed of the following:

- 1. Do not contact the suspected individual in an effort to determine facts or demand restitution.
- 2. Do not discuss the case, facts, suspicions, or allegations with anyone unless specifically asked to do so by the TOI legal counsel, Executive Director, or the Executive Committee.

april 21 2006

ADOPTED

THE TOWNSHIP OFFICIALS OF ILLINOIS

RECORD RETENTION AND DOCUMENT DESTRUCTION POLICY

RECORD RETENTION

Insurance policies (expired)

Policy

It is the policy of the Township Officials of Illinois ("TOI") to retain records as required by law and to destroy them when appropriate. Some records, even though not required by law, should be retained permanently, such as audited financial statements, some personnel records, minutes, legal correspondence, tax records, or other documents that may be important to the organization or eligible for its archives.

The destruction of records must be approved by the TOI President or Finance Chair, and logged into the TOI's Destroyed Records Log. The formal records retention policy of TOI is as follows:

10Years

Accident reports/claims (settled Cases)	7 Years
Accounts payable ledgers and schedules	7 Years
Accounts receivable ledgers and schedules	7 Years
Audit reports	Permanently
Bank reconciliations	7 Years
Bank Statements	7 Years
Chart of Accounts	Permanently
Cancelled Checks	7 Years
Contracts, mortgages, notes and leases:	
Expired	7 Years
Still in effect	Permanently
Correspondence:	
General	2 Years
Members	10 years
Legal and important matters only	Permanently
Routine vendors	2 Years
Deeds, mortgages and bills of sales	Permanently
Depreciation schedules	Permanently
Duplicate deposit slips	7 Years
Employment applications	3 Years
Expense analyses/expense distribution schedule	7 Years
Financial statements:	
Year end	Permanently
Other	Optional
Garnishments	7 Years
General ledgers/year end trial balance	Permanently
	1037

Insurance records (policies, claims, etc.)	10 Years
Internal audit reports	3 Years +
Internal reports	3 Years
Inventories of products, materials and supplies	7 Years
Invoices (to customers, from vendors)	-7 Years
Journals	Permanently:
Minute books of directors, bylaws and charters	Permanently
Notes receivable ledgers and schedules	7 Years
Payroll records and summaries	7 Years
Personnel records (terminated)	7 Years
Petty cash vouchers	3 Years
Property records (incl. depreciation schedules)	Permanently
Retirement records	Permanently
Requisitions	1 Year
Sales records	7 Years
Tax returns and worksheets, examination reports	
and other documents relating to determination	•
of income tax liability	Permanently
Time sheets/cards	7 Years
Training manuals	Permanently
Voucher register and schedules	7 Years
Withholding tax statements	7 Years

Electronic Record Keeping

It is the policy of TOI to maintain electronic record keeping that allows for the production of legible records. Machine sensitive records must be readily retrievable and contain sufficient transaction-level detail to identify any source documents. Documentation of procedures, file contents, and system checks is required.

Computer generated documents relating to the above records, such as email, spreadsheets, tables and graphs, letters, graphics and photographic images should be retained 7 years.

Voicemail that is believed by staff to be relevant to existing or potential litigation should be forwarded to the Executive Director to be tape recorded and stored. All other voicemail messages are retained at the discretion of individual staff members, and should be removed before the storage capacity of the telephone system is reached.

Email messages are to be retained at the discretion of individual staff members. However, all data composed, received, and/or stored on TOI's Personnel Policies regarding computer and email usage.

Storage of Back-Up Files

It is the policy of TOI to maintain back-up copies of electronic data files off-site in a secure, fire-protected environment. Access to back-up files shall be limited to individuals authorized by management.

april 21, 2006

ADOPTED:

THE TOWNSHIP OFFICIALS OF ILLINOIS

General Code of Conduct

Township Officials of Illinois demands its directors, officers and employees observe high standards of business and personal ethics in the conduct of their duties and responsibilities. As employees and representatives of Township Officials of Illinois, we must practice honesty and integrity in fulfilling our responsibilities and comply with all applicable laws and regulations.

april 21 2006

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