See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

HOMEOFSPARR 10/22/2013 11 14 AM

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07/01/12 , and ending 06/30/13

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
HOME OF THE SPARROW, INC.

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
5342 W. ELM ST

City, town or post office, state, and ZIP code
MCHENRY IL 60050

D Employer identification number
36-3494491

E Telephone number
815-271-5444

G Gross receipts $ 4,607,180

F Name and address of principal officer
GREG DAVIS
5342 W. ELM ST
MCHENRY IL 60050

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website ▶ WWW.HOSPARROW.ORG

H(c) Group exemption number ▶

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1987

M State of legal domicile IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
A TRANSITIONAL SHELTER PROGRAM FOR HOMELESS WOMEN WITH CHILDREN, SINGLE WOMEN AND PREGNANT WOMEN.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	16
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	86
6 Total number of volunteers (estimate if necessary)	6	446
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,185,135	2,168,183
9 Program service revenue (Part VIII, line 2g)	11,618	79,862
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,345	94
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	182,466	2,311,854
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,377,874	4,559,993
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	107,268	0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	753,974	1,733,105
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 240,802		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	383,656	1,277,912
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,244,898	3,011,017
19 Revenue less expenses Subtract line 18 from line 12	132,976	1,548,976

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,486,812	2,875,905
21 Total liabilities (Part X, line 26)	652,533	492,650
22 Net assets or fund balances Subtract line 21 from line 20	834,279	2,383,255

RECEIVED
NOV 0 8 2013
739 IRS-OSC
OGDEN, UT

NOV 29 2013

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

SCANNED

Sign Here

Signature of officer — Date: Oct 31, 2013

GREG DAVIS PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: MAGDALINE PASALICH	Preparer's signature	Date: 10/22/13	Check ☐ if self-employed	PTIN: P01670714
Firm's name ▶ TIGHE, KRESS & ORR, P.C.			Firm's EIN ▶	26-0476995
Firm's address ▶ 2001 LARKIN AVE STE 202 ELGIN, IL 60123-5808			Phone no	847-695-2700

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions

DAA

Form **990** (2012)

21 GN

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission

A TRANSITIONAL SHELTER PROGRAM FOR HOMELESS WOMEN WITH CHILDREN, SINGLE WOMEN AND PREGNANT WOMEN.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [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 services? [ ] Yes [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 services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 380,894 including grants of $) (Revenue $)

MCHENRY SHELTER PROVIDES HOUSING AND SUPPORTIVE SERVICES TO HOMELESS WOMEN (18 YEARS AND OLDER) WHO ARE SINGLE, PREGNANT, OR ACCOMPANIED BY THIER CHILDREN. RESIDENTS MUST BE CLEAN AND SOBER FOR AT LEAST TWELVE MONTHS PRIOR TO COMING INTO THE PROGRAM (IF PREVIOUS ALCOHOL OR SUBSTANCE ABUSE PROBLEMS EXISTED). RESIDENTS MUST MAINTAIN HEALTHY CONTROL OF ANY PERSISTENT MENTAL HEALTH SYMPTOMS TO INCLUDE MEDICATION COMPLIANCE AND ROUTINE PSYCHIATRIC CARE, BE WILLING TO VOLUNTARILY ABIDE BY THE RULES AND REGULATIONS, AND BE FREE FROM THE THREAT OF VIOLENCE AND/OR ANY PENDING CRIMINAL COMPLAINTS. WHILE SUPPLYING SHELTER, EMERGENCY FOOD, CLOTHING, TRANSPORTATION AND SOME NECESSARY FINANCIAL ASSISTANCE, HOS STAFF ALSO PROVIDE RESIDENTS WITH CASE MANAGEMENT THAT HELPS THEM ACHIEVE SELF-

4b (Code) (Expenses $ 283,924 including grants of $) (Revenue $)

CRYSTAL LAKE SHELTER PROVIDES HOUSING AND SUPPORTIVE SERVICES TO HOMELESS WOMEN(18 YEARS AND OLDER) WHO ARE SINGLE, PREGNANT, OR ACCOMPANIED BY THIER CHILDREN. RESIDENTS MUST BE CLEAN AND SOBER FOR AT LEAST TWELVE MONTHS PRIOR TO COMING INTO THE PROGRAM (IF PREVIOUS ALCOHOL OR SUBSTANCE ABUSE PROBLEMS EXISTED). RESIDENTS MUST MAINTAIN HEALTHY CONTROL OF ANY PERSISTENT MENTAL HEALTH SYMPTOMS TO INCLUDE MEDICATION COMPLIANCE AND ROUTINE PSYCHIATRIC CARE, BE WILLING TO VOLUNTARILY ABIDE BY THE RULES AND REGULATIONS, AND BE FREE FROM THE THREAT OF VIOLENCE AND/OR ANY PENDING CRIMINAL COMPLAINTS. WHILE SUPPLYING SHELTER, EMERGENCY FOOD, CLOTHING, TRANSPORTATION AND SOME NECESSARY FINANCIAL ASSISTANCE, HOS STAFF ALSO PROVIDE RESIDENTS WITH CASE MANAGEMENT THAT HELPS THEM ACHIEVE SELF-

4c (Code) (Expenses $ 86,015 including grants of $) (Revenue $)

TRANSITIONAL APARTMENT PROGRAM RESIDENTS MAY STAY FOR UP TO TWO YEARS (AVERAGE LENGTH OF STAY IS 9 MONTHS). UPON SUCCESSFUL COMPLETION OF THE PROGRAM, RESIDENTS MAY RECEIVE UP TO 6 MONTHS OF AFTERCARE TO SUPPORT THEM AS THEY TRANSITION INTO HEALTHY, INDEPENDENT LIVES. HOS'S GOAL IS TO EMPOWER RESIDENTS TO DEVELOP BASIC LIFE SKILLS, SECURE AND MAINTAIN EMPLOYMENT THAT PAYS A LIVABLE WAGE, DEVELOP A CONTINUING EDUCATIONAL PLAN, EVALUATE THEIR FINANCIAL STATUS, LEARN HOW AND WHY IT IS IMPORTANT TO MAINTAIN A BUDGET, IDENTIFY ISSUES THAT IMPEDE SELF-SUFFICIENCY, SECURE APPROPRIATE COMMUNITY ASSISTANCE, AND LEARN AND APPLY HEALTHY PARENTING SKILLS TO ENHANCE THEIR LIVES AND THE LIVES OF THEIR CHILDREN AND EVENTUALLY OBTAIN PERMANENT HOUSING.

4d Other program services (Describe in Schedule O)

(Expenses $ 1,898,743 including grants of $) (Revenue $)

4e Total program service expenses ▶ 2,649,576

Part IV Checklist of Required 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		X
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		X
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		X
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		X
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
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		X
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		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	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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? If "Yes," complete Schedule F, Parts II and IV	15		X
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		X
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization 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? If "Yes," complete Schedule J	23	X	
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 through 24d and complete Schedule K If "No," go to line 25	24a		X
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
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		X
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, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
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 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V 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	1a	16		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	86		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	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 account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	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 as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	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	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 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.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**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	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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				
b	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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section 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 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	1a	16		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16		
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?	5			X
6	Did the organization have members or stockholders?	6			X
7a	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			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
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			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		X
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 or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ IL

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

[ ] Own website [X] Another's website [X] Upon request [ ] Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ BARB WURSTER 5342 W. ELM ST.

MCHENRY IL 60050 815-271-5444

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 related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARY TARADASH PRESIDENT	2.00 0.00	X		X				0	0	0
(2) BOB SHARP TREASURER	2.00 0.00	X		X				0	0	0
(3) GREGORY T. DAVIS SECRETARY	2.00 0.00	X		X				0	0	0
(4) JOHN BEHRENS DIRECTOR	1.00 0.00	X						0	0	0
(5) JAN BEVILACQUA DIRECTOR	1.00 0.00	X						0	0	0
(6) SCOTT SMITH VICE PRESIDENT	2.00 0.00	X		X				0	0	0
(7) BONA HEINSOHN DIRECTOR	1.00 0.00	X						0	0	0
(8) CHRIS HILLMAN DIRECTOR	1.00 0.00	X						0	0	0
(9) TONY HUEMANN DIRECTOR	1.00 0.00	X						0	0	0
(10) PATRICIA INMAN DIRECTOR	1.00 0.00	X						0	0	0
(11) WARD LARKIN DIRECTOR	1.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) JUDY MCDONOUGH DIRECTOR	1.00 0.00	X						0	0	0
(13) RANDY MEAD DIRECTOR	1.00 0.00	X						0	0	0
(14) SUE MORRISSEY DIRECTOR	1.00 0.00	X						0	0	0
(15) ROSE SMITH DIRECTOR	1.00 0.00	X						0	0	0
(16) JOHN JONES EXECUTIVE DIRECTOR	60.00 0.00			X				46,000	0	0
(17) NANCY HIATTE EXECUTIVE DIRECTOR	60.00 0.00						X	99,200	0	0
(18)										
(19)										
1b Sub-total ▶								145,200		
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								145,200		

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 513 or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	338,370				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,829,813				
	g Noncash contributions included in lines 1a-1f $		1,239,837				
	h Total. Add lines 1a–1f			2,168,183			
Program Service Revenue		Busn Code					
	2a PROGRAM SERVICE REVENUE	900099		79,862	79,862		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f			79,862			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			94			94
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental exps						
	c Rental inc or (loss)						
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis & sales exps						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18	a	468,349				
	b Less direct expenses	b	47,187				
	c Net income or (loss) from fundraising events			421,162			
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a	1,880,694				
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory			1,880,694			1,880,694
	Miscellaneous Revenue	Busn Code					
	11a MISCELLANEOUS INCOME	900099		9,998			9,998
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a–11d			9,998			
	12 Total revenue See instructions			4,559,993	79,862	0	1,890,786

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)

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 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				
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	46,000		46,000	
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	1,480,850	1,297,830	22,344	160,676
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	91,930	70,410	8,169	13,351
10 Payroll taxes	114,325	97,384	5,031	11,910
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	14,159	12,795	529	835
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	113,846	85,079	8,099	20,668
14 Information technology	18,956	8,891	2,775	7,290
15 Royalties				
16 Occupancy	751,850	727,669	14,641	9,540
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	24,219	23,813	182	224
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	78,178	73,127	3,447	1,604
23 Insurance	46,033	38,938	4,465	2,630
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a CLIENT PERSONAL ASSISTANC	86,308	86,308		
b PERSONNEL EXPENSES	55,092	42,469	4,634	7,989
c WORKMAN'S COMP	26,988	22,580	323	4,085
d IN-KIND DONATIONS	26,837	26,837		
e All other expenses	35,446	35,446		
25 Total functional expenses. Add lines 1 through 24e	3,011,017	2,649,576	120,639	240,802
26 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)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing	900	1	900
	2	Savings and temporary cash investments	124,091	2	284,161
	3	Pledges and grants receivable, net	81,138	3	28,570
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other 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) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	137,215	8	228,252
	9	Prepaid expenses and deferred charges	14,128	9	18,485
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 2,934,389			
	b	Less accumulated depreciation — 10b: 670,704	1,078,633	10c	2,263,685
	11	Investments—publicly traded securities		11	
	12	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	50,707	15	51,852
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	1,486,812	16	2,875,905
Liabilities	17	Accounts payable and accrued expenses	136,804	17	129,261
	18	Grants payable		18	
	19	Deferred revenue	79,478	19	750
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	396,251	23	362,639
	24	Unsecured notes and loans payable to unrelated third parties	40,000	24	
	25	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	
	26	**Total liabilities.** Add lines 17 through 25	652,533	26	492,650
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	804,986	27	2,284,373
	28	Temporarily restricted net assets	29,293	28	98,882
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	834,279	33	2,383,255
	34	Total liabilities and net assets/fund balances	1,486,812	34	2,875,905

Part XI Reconciliation of Net Assets

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	4,559,993
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,011,017
3	Revenue less expenses Subtract line 2 from line 1	3	1,548,976
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	834,279
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,383,255

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 ☐ 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	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	2c	X	
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?	3a		X
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	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

HOME OF THE SPARROW, INC.

Employer identification number

36-3494491

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii) A family member of a person described in (i) above?		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	857,886	855,795	1,118,676	1,185,135	2,168,183	6,185,675
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	1,536,058	5,881	8,162	11,618	548,211	2,109,930
3 The value of services or facilities furnished by a governmental unit to the organization without charge		1,397,625	1,476,941	1,733,386	1,880,694	6,488,646
4 **Total.** Add lines 1 through 3	2,393,944	2,259,301	2,603,779	2,930,139	4,597,088	14,784,251
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						14,784,251

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	2,393,944	2,259,301	2,603,779	2,930,139	4,597,088	14,784,251
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	351	309	5,409	5,835	94	11,998
9 Net income from unrelated business activities, whether or not the business is regularly carried on					8,998	8,998
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	2,942	661	376	250		4,229
11 **Total support.** Add lines 7 through 10						14,809,476

12	Gross receipts from related activities, etc (see instructions)	12	2,109,930
13	**First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**		▶ ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.83 %
15	Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a	**33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization		▶ ☒
b	**33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization		▶ ☐
17a	**10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		▶ ☐
b	**10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		▶ ☐
18	**Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS INCOME	**$**	**4,229**

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 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

2012

Open to Public Inspection

Name of the organization

HOME OF THE SPARROW, INC.

Employer identification number

36-3494491

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
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 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? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 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	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8 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)? ☐ Yes ☐ No

9 In Part XIII, 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

Part III 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 XIII, 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 ▶ $

2 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 ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶ %
- b Permanent endowment ▶ %
- c Temporarily restricted endowment ▶ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		X
(ii) related organizations 3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		351,439		351,439
b Buildings		987,611	9,360	978,251
c Leasehold improvements				
d Equipment				
e Other		1,595,339	661,344	933,995
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				2,263,685

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	4,559,993
2	Amounts 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	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	4,559,993
4	Amounts 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 XIII)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	4,559,993

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	3,011,017
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	3,011,017
4	Amounts 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 XIII)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	3,011,017

Part XIII 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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION ADOPTED THE IMPLEMENTATION OF FASB ASC 70 (FORMERLY FIN 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES). UNDER FASB ASC 740, MANAGEMENT MUST EVALUATE THE POSITIONS IT HAS TAKEN ON TAX RETURNS. MANAGEMENT HAS DETERMINED THAT THERE ARE NO TAX POSITIONS THAT WOULD RESULT IN A MORE LIKELY THAN NOT (50% CHANCE) OF BEING SUSTAINED UNDER A POTENTIAL AUDIT OR EXAMINATION. CURRENTLY THE 2010, 2011, AND 2012 TAX YEARS ARE OPEN AND SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND THE ILLINOIS DEPARTMENT OF REVENUE. HOWEVER, THE ORGANIZATION IS NOT CURRENTLY UNDER AUDIT NOR HAS THE ORGANIZATION BEEN CONTACTED BY ANY OF THESE JURISDICTIONS.

Part XIII Supplemental Information (continued)

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

HOME OF THE SPARROW, INC.

Employer identification number

36-3494491

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund-raiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total	▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than $5,000

		(a) Event #1 SEASONAL APPEAL (event type)	(b) Event #2 ANNUAL GALA (event type)	(c) Other events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	191,469	152,711	124,169	468,349
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	191,469	152,711	124,169	468,349
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	35,070		12,117	47,187
	10 Direct expense summary Add lines 4 through 9 in column (d)			▶	47,187
	11 Net income summary Combine line 3, column (d), and line 10			▶	421,162

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d)			▶	
	8 Net gaming income summary Combine line 1, column d, and line 7			▶	

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility 13a %

b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instructions)

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization

HOME OF THE SPARROW, INC.

Employer identification number

36-3494491

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
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 Part III			
	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 any compensation contingent on the revenues of			
a	The organization?	5a		X
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 any compensation contingent on the net earnings of			
a	The organization?	6a		X
b	Any related organization?	6b		X
	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 non-fixed payments not 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 was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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 column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
NANCY HIATTE	(i)	99,200	0	0	0	0	99,200	0
1 EXECUTIVE DIRECTOR	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

▶ Attach to Form 990.

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization

HOME OF THE SPARROW, INC.

Employer identification number

36-3494491

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶(TRANS. HOUSING)	X	1	1,239,837	FMV ON DATE OF DONATION
26	Other ▶( )				
27	Other ▶( )				
28	Other ▶( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement — 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
HOME OF THE SPARROW, INC.

Employer identification number
36-3494491

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

RELIANCE. SERVICES ARE RENDERED DIRECLTY OR THROUGH COLLABORATION WITH PARTNER AGENCIES. WORKING TOGETHER, EACH AGENCY HELPS ASSURE A FULL SPECTRUM OF SERVICES AS RESIDENTS STRIVE TO GAIN THE SELF-CONFIDENCE AND HOPE THAT RESULTS IN SELF-SUFFICIENCY. PLEASE NOTE: RESIDENTS MAY STAY IN THE SHELTER FOR UP TO TWO YEARS.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

RELIANCE. SERVICES ARE RENDERED DIRECLTY OR THROUGH COLLABORATION WITH PARTNER AGENCIES. WORKING TOGETHER, EACH AGENCY HELPS ASSURE A FULL SPECTRUM OF SERVICES AS RESIDENTS STRIVE TO GAIN THE SELF-CONFIDENCE AND HOPE THAT RESULTS IN SELF-SUFFICIENCY. PLEASE NOTE: RESIDENTS MAY STAY IN THE SHELTER FOR UP TO TWO YEARS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

DEPARTMENT OF JUSTICE (DOJ) FUNDS WERE AWARDED FOR THE SPARROWS POINT PROGRAM, A COLLABORATION BETWEEN HOME OF THE SPARROW (HOS) AND TURNING POINT (TP), WHICH IS LOCATED IN WOODSTOCK, IL. THE DOJ FUDING HAS ALLOWED FOR THE CREATION OF A SPECIALIZED TRANSITIONAL APPARTMENT PROGRAM FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSUALT, OR STALKING.

HOS AND TP STAFF PROVIDE RESIDENTS WITH CASE MANAGEMENT AND A COMPREHENSIVE SPECTRUM OF OTHER SUPPORTIVE SERVICES THAT HELP THEM ACHIEVE SELF-RELIANCE. PLEASE NOTE: RESIDENTS MAY STAY IN THE SPARROWS POINT PROGRAM FOR UP TO TWO YEARS.

Name of the organization: HOME OF THE SPARROW, INC.

Employer identification number: 36-3494491

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF THW 990 IS SENT ELECTRONICALLY TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS (INCLUDES THE BOARD TREASURER) FOR REVIEW. THE RECOMMENDATIONS OF THE EXECUTIVE COMMITTEE TO ACCEPT/DENY/CHANGE THE 990 ARE GIVEN TO THE ENTIRE BOARD AT A BI-MONTHLY MEETING. THE BOARD VOTES TO ACCEPT THE 990 FOR TRANSMITTAL TO THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE BY-LAWS OF THE ORGANIZATION CONTAIN A CONFLICT OF INTEREST POLICY (ARTICLE VI) WHICH WAS WRITTEN TO ENSURE THAT THE MEMBERS OF THE BOARD OF DIRECTORS, PERSONNEL AND/OR CONSULTANTS DO NOT HAVE OR GIVE THE APPEARANCE OF CONFLICTS OF INTEREST AND DO NOT USE THEIR RELATIONSHIP WITH THE AGENCY FOR PERSONAL GAIN. COMPLIANCE AND ENFORCEMENT IS ONGOING AND CONDUCTED BY THE EXECUTIVE COMMITTEE OF THE BOARD AND THE EXECUTIVE DIRECTOR ANNUALLY. BOARD MEMBERS AND EMPLOYEES ARE EXPECTED TO ADVISE THE EXECUTIVE COMMITTEE OR EXECUTIVE DIRECTOR (OR SUPERVISOR) OF ALL OUTSIDE BUSINESS ACTIVITIES TO PREVENT MISUNDERSTANDINGS. TRAINING IS CONDUCTED ANNUALLY AT A BOARD MEETING AND AT AN ALL-STAFF/VOLUNTEER MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF DIRECTORS EVALUATES THE PERFORMANCE AND PROVIDES THE CHIEF EXECUTIVE OFFICER WITH AN EMPLOYMENT CONTRACT, WICH WILL BE REVIEWED ANNUALLY AND MUST PASS BY A SIMPLE MAJORITY VOTE. COMPENSATION AND PAY IS WITHIN THE LIMITS ESTABLISHED BY THE BOARD OF DIRECTORS FOR THE DIFFERENT POSITIONS. SALARY LEVELS ARE REVIEWED BY THE BOARD OF DIRECTORS ANNUALLY, OR AS DEEMED NECESSARY. ELIGIBILITY FOR FUTURE PAY ADJUSTMENTS IS BASED UPON ON-THE-JOB PERFORMANCE AND THE PAY LIMITS ESTABLISHED FOR EACH

POSITION. APPLICABLE PAY INCREASES, GENERALLY, TAKE EFFECT DURING THE FIRST WEEK OF JULY OR ON THE EMPLOYEES ANNIVERSARY DATE. ALL SUPERVISORS OR DIRECTORS ARE REQUIRED TO MEET WITH EACH EMPLOYEE AT A FACE-TO-FACE PERFORMANCE EVALUATION. THESE EVALUATIONS ARE CONDUCTED ANNUALLY PRIOR TO JUNE 30TH OR THE EMPLOYEES ANNIVERSARY DATE. THE PURPOSE OF THE EVALUATION IS TO REVIEW EMPLOYEES ON-THE-JOB PERFORMANCES, IDENTIFY AREAS NEEDING IMPROVEMENT, SET GOALS FOR THE NEXT EVALUATION PERIOD, AND REVIEW DUTIES TO ADJUST AND IMPROVE JOB DESCRIPTIONS. DURING THE REVIEW PROCESS, THE EMPLOYEE FILE WILL BE REVIEWED AND INFORMATION IN THE FILE WILL BE USED TO PREPARE THE PERFORMANCE EVALUATION BY IDENTIFYING ISSUES OF CONCERN (AND SOLUTIONS), THINKING ABOUT FUTURE GOALS, AND LOOKING FOR WAYS IN WHICH HOME OF THE SPARROW, INC. CAN ASSIST FOR THE NEXT PERIOD.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE BOARD OF DIRECTORS EVALUATES THE PERFORMANCE AND PROVIDES THE CHIEF EXECUTIVE OFFICER WITH AN EMPLOYMENT CONTRACT, WICH WILL BE REVIEWED ANNUALLY AND MUST PASS BY A SIMPLE MAJORITY VOTE. COMPENSATION AND PAY IS WITHIN THE LIMITS ESTABLISHED BY THE BOARD OF DIRECTORS FOR THE DIFFERENT POSITIONS. SALARY LEVELS ARE REVIEWED BY THE BOARD OF DIRECTORS ANNUALLY, OR AS DEEMED NECESSARY. ELIGIBILITY FOR FUTURE PAY ADJUSTMENTS IS BASED UPON ON-THE-JOB PERFORMANCE AND THE PAY LIMITS ESTABLISHED FOR EACH POSITION. APPLICABLE PAY INCREASES, GENERALLY, TAKE EFFECT DURING THE FIRST WEEK OF JULY OR ON THE EMPLOYEES ANNIVERSARY DATE. ALL SUPERVISORS OR DIRECTORS ARE REQUIRED TO MEET WITH EACH EMPLOYEE AT A FACE-TO-FACE PERFORMANCE EVALUATION. THESE EVALUATIONS ARE CONDUCTED ANNUALLY PRIOR TO JUNE 30TH OR THE EMPLOYEES ANNIVERSARY DATE. THE PURPOSE OF THE EVALUATION IS TO REVIEW EMPLOYEES ON-THE-JOB PERFORMANCES, IDENTIFY AREAS NEEDING

Name of the organization: HOME OF THE SPARROW, INC.

Employer identification number: 36-3494491

IMPROVEMENT, SET GOALS FOR THE NEXT EVALUATION PERIOD, AND REVIEW DUTIES TO ADJUST AND IMPROVE JOB DESCRIPTIONS. DURING THE REVIEW PROCESS, THE EMPLOYEE FILE WILL BE REVIEWED AND INFORMATION IN THE FILE WILL BE USED TO PREPARE THE PERFORMANCE EVALUATION BY IDENTIFYING ISSUES OF CONCERN (AND SOLUTIONS), THINKING ABOUT FUTURE GOALS, AND LOOKING FOR WAYS IN WHICH HOME OF THE SPARROW, INC. CAN ASSIST FOR THE NEXT PERIOD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

COPIES OF THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ALONG WITH THE 990 AND APPLICATION FOR TAX EXEMPTION ARE PROVIDED UPON REQUEST DURING NORMAL BUSINESS HOURS AT THE ORGANIZATION'S LOCATION, AS WELL AS, POSTED ON THE GUIDESTAR AND OFFICE OF ATTORNEY GENERAL'S WEBSITE.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2012

Attachment Sequence No **179**

Name(s) shown on return: **HOME OF THE SPARROW, INC.**

Identifying number: **36-3494491**

Business or activity to which this form relates: **INDIRECT DEPRECIATION**

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	78,178

Part III MACRS Depreciation (Do not include listed property) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs		S/L	
h	Residential rental property			27 5 yrs	MM	S/L	
				27 5 yrs	MM	S/L	
i	Nonresidential real property			39 yrs	MM	S/L	
					MM	S/L	

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs		S/L	
c	40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21	Listed property Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	78,178
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

SCHEDULE G (Form 990 or 990-EZ)	Fundraising Other Events	2012
	For calendar year 2012, or tax year beginning 07/01/12 , and ending 06/30/13	

Name

HOME OF THE SPARROW, INC.

Employer Identification Number

36-3494491

		(a) Other event GOLF OUTINGS (event type)	(b) Other event (event type)	(c) Other event (event type)	(d) Total other events (add col (a) through col (c))
Revenue	1 Gross receipts	124,169			124,169
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	124,169			124,169
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	12,117			12,117

Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
	$ 94		14			
TOTAL	$ 94					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
MERCHANT FEES	$ 20,971	$ 20,971	$	$
MISC	14,475	14,475		
TOTAL	$ 35,446	$ 35,446	$ 0	$ 0

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
	$ 338,370
PRIVATE GRANTS	126,925
DONATIONS	89,550
UNITED WAY ALLOCATIONS	26,179
IN-KIND DONATIONS	1,239,837
BUCKEYE FOUNDATION	
CASH CONTRIBUTION	34,438
BUFKA FAMILY FOUNDATION	
CASH CONTRIBUTION	30,000
BAXTER INTERNATIONAL FOUNDATION	
CASH CONTRIBUTION	49,478
DOROTHY DAMLER LIVING TRUST	
CASH CONTRIBUTION	123,406
GRACE A BERSTED FOUNDATION	
CASH CONTRIBUTION	25,000
ALFRED BERSTED FOUNDATION	
CASH CONTRIBUTION	25,000
WILLOW SPRINGS FOUNDATION	
CASH CONTRIBUTION	60,000
TOTAL	$ 2,168,183

Schedule A, Part II, Line 8(e)

Description	Amount
	$ 94
TOTAL	$ 94

Federal Statements

Schedule A, Part II, Line 9(e)

Description	Amount
MISCELLANEOUS INCOME	$ 9,998
LESS: DEDUCTIONS	-1,000
TOTAL	$ 8,998

Schedule A, Part II, Line 12

Description	Amount
PROGRAM SERVICE REVENUE	$ 79,862
ANNUAL GALA	152,711
GOLF OUTINGS	124,169
SEASONAL APPEALS AND OTHER	191,469
TOTAL	$ 548,211

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
233	RINGWOOD ROAD - MCHENRY	3/01/91	13,120				13,120	0	--	Land	0	0
234	RINGWOOD ROAD - MCHENRY	6/30/95	32,819				32,819	0	--	Land	0	0
235	NORTH AVENUE - CRYSTAL LAKE	10/14/97	25,000				25,000	0	--	Land	0	0
236	WAUKEGAN ROAD - MCHENRY	4/10/93	20,000				20,000	0	--	Land	0	0
237	BUILDING - RINGWOOD ROAD	3/01/91	129,611				129,611	39	MO	S/L	69,665	3,324
238	NEWROOF (SHELTER)	7/01/93	8,000				8,000	39	MO	S/L	3,700	205
239	GARAGE - STORAGE SHED	7/01/93	8,000				8,000	39	MO	S/L	3,700	205
240	DECK (SHELTER)	7/01/93	3,000				3,000	39	MO	S/L	1,388	77
241	DUMPSTER JACKET	7/01/93	500				500	20	MO	S/L	463	25
242	RINGWOOD ROAD IMPROVEMENT	9/30/95	1,726				1,726	39	MO	S/L	798	44
243	CARPET	11/09/98	3,289				3,289	7	MO	S/L	3,289	0
	Sold/Scrapped 6/30/13											
244	REMODEL EXISTING BLDG	3/18/98	28,055				28,055	39	MO	S/L	10,139	719
245	REMODEL EXISTING BLDG	7/17/98	14,194				14,194	39	MO	S/L	5,072	364
246	PAVED PARKING LOT	1/01/99	6,990				6,990	7	MO	S/L	6,990	0
247	EDUCATION & TRAINING BLDG	6/21/99	106,030				106,030	39	MO	S/L	35,786	2,719
248	SHELVING	6/21/00	724				724	7	MO	S/L	724	0
249	SECURITY SYSTEM	12/22/00	7,900				7,900	7	MO	S/L	7,900	0
250	FLOOR WORK	1/10/01	4,075				4,075	7	MO	S/L	4,075	0
251	BUILDING - CRYSTAL LAKE	10/14/97	160,710				160,710	39	MO	S/L	58,258	4,121
252	BUILDING IMPROVEMENTS	2/01/98	17,582				17,582	39	MO	S/L	6,338	451
253	BUILDING - WAUKEGAN ROAD	1/10/93	121,569				121,569	39	MO	S/L	59,264	3,117
254	BUILDING IMPROVEMENT	10/31/93	17,006				17,006	39	MO	S/L	7,864	436
255	BUILDING IMPROVEMENT	6/30/95	14,708				14,708	39	MO	S/L	6,436	377
256	CARPETING	7/15/99	1,229				1,229	7	MO	S/L	1,229	0
	Sold/Scrapped 6/30/13											
257	WINDOWS	1/11/01	2,108				2,108	7	MO	S/L	2,108	0
258	WINDOWS	1/11/01	4,010				4,010	7	MO	S/L	4,010	0
259	3 FURNACES	1/11/01	8,075				8,075	7	MO	S/L	8,074	1
260	EQUIPMENT - MCHENRY COUNTY	7/31/93	1,779				1,779	5	MO	S/L	1,779	0
261	EQUIPMENT - MCHENRY COUNTY	6/30/95	15,373				15,373	5	MO	S/L	15,373	0
262	PAY PHONE	2/29/96	700				700	7	MO	S/L	700	0
	Sold/Scrapped 6/30/13											
263	SOFTWARE	6/28/96	503				503	5	MO	S/L	503	0
	Sold/Scrapped 6/30/13											
264	CABLEVISION	6/30/95	2,700				2,700	10	MO	S/L	2,700	0
	Sold/Scrapped 6/30/13											
265	COMPUTER EQUIPMENT	1/24/97	7,230				7,230	5	MO	S/L	7,230	0
	Sold/Scrapped 6/30/13											
266	PHONE SYSTEM	2/18/97	8,600				8,600	5	MO	S/L	8,600	0
	Sold/Scrapped 6/30/13											
267	GENERATOR	7/22/97	600				600	5	MO	S/L	600	0
	Sold/Scrapped 6/30/13											
268	PRINTERS	2/02/98	480				480	5	MO	S/L	480	0
	Sold/Scrapped 6/30/13											
269	LOCKERS	7/16/98	2,807				2,807	5	MO	S/L	2,807	0
270	COMPUTERS	7/16/98	10,638				10,638	5	MO	S/L	10,638	0
	Sold/Scrapped 6/30/13											
271	CASH REGISTERS	9/23/98	1,500				1,500	5	MO	S/L	1,500	0
272	SHELVING UNITS	12/03/98	1,050				1,050	5	MO	S/L	1,050	0
273	TELEPHONE - SHELTERS	2/28/99	527				527	5	MO	S/L	527	0
	Sold/Scrapped 6/30/13											
274	SIGN	3/01/99	2,612				2,612	7	MO	S/L	2,612	0
275	SOFTWARE	7/02/99	1,230				1,230	5	MO	S/L	1,230	0
	Sold/Scrapped 6/30/13											
276	COMPUTER EQUIPMENT	1/06/00	960				960	5	MO	S/L	960	0
	Sold/Scrapped 6/30/13											
277	COMPUTERS	12/21/00	1,491				1,491	5	MO	S/L	1,491	0
	Sold/Scrapped 6/30/13											
278	COMPUTER	12/26/00	1,662				1,662	5	MO	S/L	1,662	0
	Sold/Scrapped 6/30/13											
279	COMPUTER	1/07/01	720				720	5	MO	S/L	720	0
	Sold/Scrapped 6/30/13											
280	COMPUTER	3/19/99	12,385				12,385	5	MO	S/L	12,385	0
	Sold/Scrapped 6/30/13											
281	COMPUTERS	4/09/99	12,385				12,385	5	MO	S/L	12,385	0
	Sold/Scrapped 6/30/13											
282	SOFTWARE	4/09/99	615				615	5	MO	S/L	615	0

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
	Sold/Scrapped 6/30/13											
283	BOOK CENTER	4/09/99	768				768	5	MO	S/L	768	0
284	PHONES	10/31/98	600				600	5	MO	S/L	600	0
	Sold/Scrapped 6/30/13											
285	SWINGSET	7/10/98	1,659				1,659	5	MO	S/L	1,659	0
	Sold/Scrapped 6/30/13											
286	PHONES	12/18/98	525				525	5	MO	S/L	525	0
	Sold/Scrapped 6/30/13											
287	SIGN (CARY NEST)	3/01/99	680				680	5	MO	S/L	680	0
	Sold/Scrapped 6/30/13											
288	SUMP PUMP BATTERY BACKUP	4/09/99	335				335	5	MO	S/L	335	0
	Sold/Scrapped: 6/30/13											
289	SIGN (PALATINE)	4/14/00	4,200				4,200	5	MO	S/L	4,200	0
290	COMPUTER	1/07/01	480				480	5	MO	S/L	480	0
	Sold/Scrapped 6/30/13											
291	FURNITURE & FIXTURES	7/31/93	1,863				1,863	10	MO	S/L	1,863	0
292	FURNITURE & FIXTURES	6/30/95	1,065				1,065	10	MO	S/L	1,065	0
293	SET OF CHANNEL LETTERS & CABINE	7/23/97	1,000				1,000	10	MO	S/L	1,000	0
294	SIGN	8/21/97	1,050				1,050	10	MO	S/L	1,015	35
295	CABINET	6/23/00	510				510	10	MO	S/L	510	0
296	GIFTS IN KIND	12/31/92	5,871				5,871	10	MO	S/L	5,871	0
	Sold/Scrapped 6/30/13											
297	GIFTS IN KIND	6/30/95	2,100				2,100	10	MO	S/L	2,100	0
	Sold/Scrapped 6/30/13											
298	VAN	6/30/95	15,061				15,061	7	MO	S/L	15,061	0
	Sold/Scrapped 6/30/13											
299	FORD WAGON	4/04/96	10,550				10,550	5	MO	S/L	10,550	0
	Sold/Scrapped 6/30/13											
300	COMPUTER EQUIPMENT	10/31/04	2,928				2,928	5	MO	S/L	2,928	0
	Sold/Scrapped 6/30/13											
301	FILING CABINET	9/21/01	600				600	5	MO	S/L	570	30
302	COMPUTER MENTOR SOFTWARE	1/04/02	870				870	5	MO	S/L	870	0
	Sold/Scrapped 6/30/13											
303	COMPUTER EQUIPMENT	2/01/02	5,931				5,931	5	MO	S/L	5,931	0
	Sold/Scrapped 6/30/13											
304	COMPUTER EQUIPMENT	3/29/02	500				500	5	MO	S/L	500	0
	Sold/Scrapped 6/30/13											
305	COMPUTER SOFTWARE	4/12/02	1,377				1,377	5	MO	S/L	1,377	0
	Sold/Scrapped 6/03/13											
306	DSL EQUIPMENT	5/10/02	450				450	5	MO	S/L	450	0
	Sold/Scrapped 6/30/13											
307	LATERAL FILE CABINET	5/10/02	550				550	5	MO	S/L	550	0
308	COMPUTER EQUIPMENT	6/21/02	581				581	5	MO	S/L	581	0
	Sold/Scrapped 6/30/13											
309	COMPUTER EQUIPMENT	3/29/02	500				500	5	MO	S/L	500	0
	Sold/Scrapped 6/30/13											
310	COMPUTER SOFTWARE	4/12/02	678				678	5	MO	S/L	678	0
	Sold/Scrapped 6/30/13											
311	COMPUTER EQUIPMENT	6/21/02	286				286	5	MO	S/L	286	0
	Sold/Scrapped 6/30/13											
312	2002 CHEVY VAN 1GBJG31R421146028	1/22/02	22,235				22,235	5	MO	S/L	22,235	0
313	COMPUTER EQUIPMENT	7/19/02	620				620	5	MO	S/L	568	52
	Sold/Scrapped 6/30/13											
314	REFRIGERATOR	5/19/03	1,132				1,132	5	MO	S/L	1,132	0
315	REFRIGERATOR	5/19/03	378				378	5	MO	S/L	378	0
316	DISHWASHER	9/04/03	414				414	5	MO	S/L	414	0
317	MATTRESSES & FRAMES	11/30/04	2,200				2,200	5	MO	S/L	2,200	0
	Sold/Scrapped 6/30/13											
318	WASHER/DRYER/STOVE/REFRIGERAT	7/02/04	1,576				1,576	5	MO	S/L	1,576	0
319	COMPUTER EQUIPMENT	10/31/04	1,463				1,463	5	MO	S/L	1,463	0
	Sold/Scrapped 6/30/13											
320	BUNK BEDS	9/30/04	1,449				1,449	7	MO	S/L	1,087	207
321	BUILDING ADDITION	10/01/04	282,818				282,818	39	MO	S/L	54,501	7,252
322	INTERIOR DRAIN TILE SYSTEM	9/23/04	7,268				7,268	7	MO	S/L	7,268	0
323	BLDG. IMPROVEMENTS- RINGWOOD	6/30/05	119,157				119,157	39	MO	S/L	20,977	3,055
324	1995 DODGE INTREPID	2/15/04	2,465				2,465	5	MO	S/L	2,465	0
	Sold/Scrapped 6/30/13											
325	TOYOTA COROLLA JTAE09V0S009689	7/15/03	3,150				3,150	5	MO	S/L	3,150	0
	Sold/Scrapped 12/31/12											
326	98 OLDSMOBILE NINETY EIGHT	12/15/03	3,780				3,780	5	MO	S/L	3,780	0
	Sold/Scrapped 6/30/13											

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
327	2000 JEEP CHEROKEE 1J4GW48S7YC32	9/15/05	7,600				7,600	5	MO	S/L	7,600	0
328	FOUR REFRIGERATORS	7/01/04	1,120				1,120	5	MO	S/L	1,120	0
329	FOUR STOVES	7/01/04	1,036				1,036	5	MO	S/L	1,036	0
330	FURNANCES	7/01/04	24,000				24,000	5	MO	S/L	24,000	0
331	WASHER & DRYER	7/01/04	536				536	5	MO	S/L	536	0
332	STOVE	7/01/04	259				259	5	MO	S/L	259	0
333	DRYER	7/01/05	219				219	5	MO	S/L	219	0
334	REFRIGERATOR	7/01/04	280				280	5	MO	S/L	280	0
335	STOVE	7/01/05	259				259	5	MO	S/L	259	0
336	BATHROOM RENOVATION	1/11/07	11,550				11,550	5	MO	S/L	11,550	0
337	BATHROOM REMODEL - HANDICAP A	10/05/07	20,780				20,780	39	MO	S/L	2,468	532
338	SIGN FOR CARY	7/19/07	3,824				3,824	5	MO	S/L	3,760	64
339	LAPTOP COMPUTER	10/12/07	700				700	5	MO	S/L	665	35
340	SIGN FOR WOODSTOCK STORE	5/07/08	5,400				5,400	5	MO	S/L	4,500	900
341	TILE FOR OFFICE	10/01/08	821				821	7	MO	S/L	599	117
342	2 NEW WATER SPOUTS	10/25/08	1,485				1,485	7	MO	S/L	978	212
343	CARPET	5/16/09	4,658				4,658	7	MO	S/L	2,107	665
344	FURNANCES (System #1 south unit & #2	11/06/09	12,200				12,200	5	MO	S/L	6,507	2,440
345	Petersen Sealcoating	9/16/10	7,986				7,986	7	MO	S/L	2,092	1,140
346	Olson Windows	9/28/10	18,540				18,540	39	MO	S/L	850	475
347	Cambridge Exteriors	10/14/10	17,688				17,688	39	MO	S/L	774	453
348	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	747				747	7	MO	S/L	178	107
349	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	747				747	7	MO	S/L	178	107
350	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	747				747	7	MO	S/L	178	107
351	Kenny's Floor Covering - Carpeting for 1 IL	12/10/10	747				747	7	MO	S/L	169	107
352	Kenny's Floor Covering - Carpeting for 1 Il	12/10/10	747				747	7	MO	S/L	169	107
353	Kenny's Floor Covering - Carpeting for 1 IL	12/10/10	747				747	7	MO	S/L	169	107
354	Carpet One Floors - Carpeting	3/07/11	17,437				17,437	7	MO	S/L	3,321	2,491
355	Kitchen Cabinets	3/21/11	7,546				7,546	7	MO	S/L	1,437	1,078
356	Carpet One Floors - Carpeting	3/30/11	3,659				3,659	7	MO	S/L	697	523
357	HOME DEPOT - Double Wall Oven	4/20/11	1,000				1,000	5	MO	S/L	250	200
358	HOME DEPOT - 5 Burner Cook Top	4/20/11	663				663	5	MO	S/L	166	132
359	Lafontaine Enterprises - Bathroom Remode	9/19/11	13,690				13,690	39	MO	S/L	342	351
360	Kenny's Floor Covering -Carpeting Dorm R	10/20/11	505				505	7	MO	S/L	72	72
361	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	505				505	7	MO	S/L	72	72
362	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	505				505	7	MO	S/L	72	72
363	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	505				505	7	MO	S/L	72	72
364	BUILDING IMPROVEMENTS	9/08/08	350				350	39	MO	S/L	34	9
365	BUILDING IMPROVEMENTS	10/22/08	25,000				25,000	39	MO	S/L	2,344	641
366	BUILDING IMPROVEMENTS	11/05/08	257				257	39	MO	S/L	24	6
367	BUILDING IMPROVEMENTS	12/17/08	20,000				20,000	39	MO	S/L	1,792	512
368	CARPET	1/16/09	1,000				1,000	7	MO	S/L	500	143
369	CARPET	1/20/09	2,400				2,400	7	MO	S/L	1,200	343
370	BUILDING IMPROVEMENTS	2/18/09	28,643				28,643	39	MO	S/L	2,447	734
371	BUILDING IMPROVEMENTS - New Roo	11/09/09	11,947				11,947	39	MO	S/L	896	306
372	BUILDING IMPROVEMENTS-New Wind	3/19/10	8,158				8,158	39	MO	S/L	476	209
373	BUILDING IMPROVEMENTS-New Wind	5/07/10	16,317				16,317	39	MO	S/L	884	418
374	TILE	4/06/09	529				529	7	MO	S/L	246	75
375	CARPETING	8/12/10	947				947	7	MO	S/L	249	135
376	COPIER-Ricoh MP3010SP Copier System	2/23/07	8,150				8,150	5	MO	S/L	8,150	0
377	LAPTOP COMPUTER (MARYBETH URI	2/28/10	650				650	5	MO	S/L	314	130
378	DELL VOSTRO 3700 LAPTOP COMPUT	6/30/10	1,386				1,386	5	MO	S/L	578	277
379	COMPUTER EQUIPMENT-Dell 1PMKN1	10/25/10	750				750	5	MO	S/L	263	150
380	COMPUTER EQUIPMENT-Dell 1P6KKN	10/25/10	750				750	5	MO	S/L	262	150
381	COMPUTER EQUIPMENT-Dell 1P6JKN1	10/25/10	750				750	5	MO	S/L	262	150
382	COMPUTER EQUIPMENT-Dell 1P7LKN	10/25/10	750				750	5	MO	S/L	262	150
383	COMPUTER EQUIPMENT-Dell CIC4SM	10/25/10	1,488				1,488	5	MO	S/L	521	297
384	COMPUTER EQUIPMENT-Dell 1P3LKN	10/25/10	750				750	5	MO	S/L	262	150
385	COMPUTER EQUIPMENT-Dell 1P7KKN	10/25/10	750				750	5	MO	S/L	262	150
386	COMPUTER EQUIPMENT-Dell 6034SM1	10/25/10	1,488				1,488	5	MO	S/L	521	297
387	COMPUTER EQUIPMENT-Dell 7ZB4SM	10/25/10	1,488				1,488	5	MO	S/L	521	297
388	COMPUTER EQUIPMENT-Dell 1P6LKN	10/25/10	750				750	5	MO	S/L	262	150
389	COMPUTER EQUIPMENT-Dell 4YB4SM	10/25/10	1,488				1,488	5	MO	S/L	521	297
390	COMPUTER EQUIPMENT-Dell 1P5JKN1	10/25/10	750				750	5	MO	S/L	262	150
391	COMPUTER EQUIPMENT-Dell 1P3KKN	10/25/10	750				750	5	MO	S/L	262	150
392	COMPUTER EQUIPMENT-Dell 1P7JKN1	10/25/10	750				750	5	MO	S/L	262	150
393	COMPUTER EQUIPMENT-Dell 1P4JKN1	10/25/10	750				750	5	MO	S/L	262	150
394	COMPUTER EQUIPMENT-Dell 8YB4SM	10/25/10	1,488				1,488	5	MO	S/L	521	297
395	COMPUTER EQUIPMENT-Dell 1P3JKN1	10/25/10	750				750	5	MO	S/L	262	150
396	COMPUTER EQUIPMENT-Dell 1P5LKN	10/25/10	750				750	5	MO	S/L	262	150
397	COMPUTER EQUIPMENT-Dell 1P2MKN	10/25/10	750				750	5	MO	S/L	262	150

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
398	COMPUTER EQUIPMENT-Dell 1P4KKN	10/25/10	750				750	5	MO	S/L	262	150
399	COMPUTER EQUIPMENT-Dell 1P3LKN	10/25/10	750				750	5	MO	S/L	262	150
400	COMPUTER EQUIPMENT-Dell 1P3MKN	10/25/10	750				750	5	MO	S/L	262	150
401	TechSoup Software - 6 Additional licenses	10/25/10	240				240	5	MO	S/L	84	48
402	Brother All-In-One Laser Printer - McHenry	1/13/11	633				633	5	MO	S/L	200	127
403	Brother All-In-One Laser Printer - Cary - U	1/13/11	633				633	5	MO	S/L	200	127
404	Brother All-In-One Laser Printer - Woodsto	1/13/11	633				633	5	MO	S/L	200	127
405	Server - DDGMXQ1	10/06/11	2,485				2,485	5	MO	S/L	497	497
406	COMPUTER EQUIPMENT	10/25/10	750				750	5	MO	S/L	262	150
407	Dell 1P5KKN1 - Palatine Nest Brother All-	1/13/11	633				633	5	MO	S/L	200	127
408	FURNITURE & FIXTURES/APPLIANCE	1/06/09	735				735	5	MO	S/L	515	147
409	FURNITURE & FIXTURES/APPLIANCE	1/09/09	1,740				1,740	5	MO	S/L	1,218	348
410	FURNITURE & FIXTURES/APPLIANCE	2/06/09	505				505	5	MO	S/L	345	102
411	SHED PROJECT-(shed concrete pad bldg p	6/01/10	1,122				1,122	5	MO	S/L	467	225
412	CHAIRS (10) & BAR STOOLS (2)	6/09/10	940				940	5	MO	S/L	392	187
413	ISLAND IN KITCHEN	6/09/10	2,010				2,010	5	MO	S/L	838	402
414	50 GAL RHEEM WATER HEATER-SN-0	9/08/10	1,025				1,025	5	MO	S/L	376	205
415	75 GAL RHEEM WATER HEATER-SN-0	9/08/10	2,073				2,073	5	MO	S/L	760	415
416	80 GAL RHEEM WATER HEATER-SN-0	9/08/10	1,251				1,251	5	MO	S/L	459	250
417	KINETICO 2100 + 1 BIG BLUE FILTER-S	9/08/10	2,700				2,700	5	MO	S/L	990	540
418	WELL-X-TROLL-MODEL LUX-251	9/08/10	1,283				1,283	5	MO	S/L	470	257
419	PUROMAX HR3 R/O (1 OF 5)	9/08/10	795				795	5	MO	S/L	292	159
420	PUROMAX HR3 R/O (2 OF 5)	9/08/10	795				795	5	MO	S/L	292	159
421	PUROMAX HR3 R/O (3 OF 5)	9/08/10	795				795	5	MO	S/L	292	159
422	PUROMAX HR3 R/O (4 OF 5)	9/08/10	795				795	5	MO	S/L	292	159
423	PUROMAX HR3 R/O (5 OF 5)	9/08/10	905				905	5	MO	S/L	332	181
424	A/C System - Residential - Model#XC13-0	5/31/11	4,826				4,826	5	MO	S/L	1,126	965
425	STORE FIXTURES (Tables Tie Rack Mirr	5/31/12	1,000				1,000	5	MO	S/L	200	200
426	2010 FORD E350 VAN 2FDWE3FL9A157	1/25/10	25,222				25,222	5	MO	S/L	12,611	5,045
427	2010 Ford E350 Van - 1FBNE3BL6ADA68	12/23/10	19,670				19,670	5	MO	S/L	5,901	3,934
428	2008 Chrysler Town & Country -2A8HR54	12/30/11	13,526				13,526	5	MO	S/L	2,705	2,705
429	LEASEHOLD IMPROVEMENTS - McHE	8/17/10	15,416				15,416	7	MO	S/L	4,185	2,203
430	801-807 Carlisle	3/01/13	45,000				45,000	0	--	Land	0	0
431	741-747 Carlisle	3/01/13	45,000				45,000	0	--	Land	0	0
432	733-739 Carlisle	3/01/13	50,000				50,000	0	--	Land	0	0
433	Geringer Road	11/30/12	40,500				40,500	0	--	Land	0	0
434	North Street	3/01/13	25,000				25,000	0	--	Land	0	0
435	Orchard Street	3/01/13	55,000				55,000	0	--	Land	0	0
436	BUILDING IMPROVEMENTS	3/01/13	165,000				165,000	39	MO	S/L	0	1,410
437	BUILDING IMPROVEMENTS	3/01/13	165,000				165,000	39	MO	S/L	0	1,410
438	BUILDING IMPROVEMENTS	3/01/13	165,000				165,000	39	MO	S/L	0	1,410
439	BUILDING IMPROVEMENTS	11/30/12	94,500				94,500	39	MO	S/L	0	1,413
440	BUILDING IMPROVEMENTS	3/01/13	175,000				175,000	39	MO	S/L	0	1,496
441	BUILDING IMPROVEMENTS	3/01/13	188,000				188,000	39	MO	S/L	0	1,607
442	ADT SECURITY SYSTEM	10/10/12	5,585				5,585	39	MO	S/L	0	108
443	ROSE FARM PAVING	11/01/12	2,134				2,134	39	MO	S/L	0	37
444	ADT SECURITY SYSTEM	11/07/12	3,915				3,915	39	MO	S/L	0	67
445	BUILDING IMPROVEMENTS	10/23/12	97				97	39	MO	S/L	0	2
446	BUILDING IMPROVEMENTS	10/23/12	23,380				23,380	39	MO	S/L	0	400
447	TABLES FOR HQ ROOM	8/31/12	1,324				1,324	5	MO	S/L	0	221
448	NEW SIGNAGE	11/08/12	8,570				8,570	10	MO	S/L	0	572
449	DISPLAY CASE FOR AL NEST	11/08/12	5,220				5,220	10	MO	S/L	0	348
	Total Other Depreciation		3,067,973				3,067,973				726,110	78,178
	Total ACRS and Other Depreciation		3,067,973				3,067,973				726,110	78,178
	Grand Totals		3,067,973				3,067,973				726,110	78,178
	Less: Dispositions and Transfers		133,584				133,584				133,532	-52
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		2,934,389				2,934,389				592,578	78,126

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
233	RINGWOOD ROAD - MCHENRY	3/01/91	0				0	0		HY	0	0
234	RINGWOOD ROAD - MCHENRY	6/30/95	0				0	0		HY	0	0
235	NORTH AVENUE - CRYSTAL LAKE	10/14/97	0				0	0		HY	0	0
236	WAUKEGAN ROAD - MCHENRY	4/10/93	0				0	0		HY	0	0
237	BUILDING - RINGWOOD ROAD	3/01/91	0				0	0		HY	0	0
238	NEWROOF (SHELTER)	7/01/93	0				0	0		HY	0	0
239	GARAGE - STORAGE SHED	7/01/93	0				0	0		HY	0	0
240	DECK (SHELTER)	7/01/93	0				0	0		HY	0	0
241	DUMPSTER JACKET	7/01/93	0				0	0		HY	0	0
242	RINGWOOD ROAD IMPROVEMENT	9/30/95	0				0	0		HY	0	0
243	CARPET	11/09/98	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
244	REMODEL EXISTING BLDG	3/18/98	0				0	0		HY	0	0
245	REMODEL EXISTING BLDG	7/17/98	0				0	0		HY	0	0
246	PAVED PARKING LOT	1/01/99	0				0	0		HY	0	0
247	EDUCATION & TRAINING BLDG	6/21/99	0				0	0		HY	0	0
248	SHELVING	6/21/00	0				0	0		HY	0	0
249	SECURITY SYSTEM	12/22/00	0				0	0		HY	0	0
250	FLOOR WORK	1/10/01	0				0	0		HY	0	0
251	BUILDING - CRYSTAL LAKE	10/14/97	0				0	0		HY	0	0
252	BUILDING IMPROVEMENTS	2/01/98	0				0	0		HY	0	0
253	BUILDING - WAUKEGAN ROAD	1/10/93	0				0	0		HY	0	0
254	BUILDING IMPROVEMENT	10/31/93	0				0	0		HY	0	0
255	BUILDING IMPROVEMENT	6/30/95	0				0	0		HY	0	0
256	CARPETING	7/15/99	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
257	WINDOWS	1/11/01	0				0	0		HY	0	0
258	WINDOWS	1/11/01	0				0	0		HY	0	0
259	3 FURNACES	1/11/01	0				0	0		HY	0	0
260	EQUIPMENT - MCHENRY COUNTY	7/31/93	0				0	0		HY	0	0
261	EQUIPMENT - MCHENRY COUNTY	6/30/95	0				0	0		HY	0	0
262	PAY PHONE	2/29/96	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
263	SOFTWARE	6/28/96	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
264	CABLEVISION	6/30/95	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
265	COMPUTER EQUIPMENT	1/24/97	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
266	PHONE SYSTEM	2/18/97	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
267	GENERATOR	7/22/97	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
268	PRINTERS	2/02/98	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
269	LOCKERS	7/16/98	0				0	0		HY	0	0
270	COMPUTERS	7/16/98	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
271	CASH REGISTERS	9/23/98	0				0	0		HY	0	0
272	SHELVING UNITS	12/03/98	0				0	0		HY	0	0
273	TELEPHONE - SHELTERS	2/28/99	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
274	SIGN	3/01/99	0				0	0		HY	0	0
275	SOFTWARE	7/02/99	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
276	COMPUTER EQUIPMENT	1/06/00	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
277	COMPUTERS	12/21/00	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
278	COMPUTER	12/26/00	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
279	COMPUTER	1/07/01	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
280	COMPUTER	3/19/99	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
281	COMPUTERS	4/09/99	0				0	0		HY	0	0
	Sold/Scrapped 6/30/13											
282	SOFTWARE	4/09/99	0				0	0		HY	0	0

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
	Sold/Scrapped. 6/30/13											
283	BOOK CENTER	4/09/99	0				0	0	HY		0	0
284	PHONES	10/31/98	0				0	0	HY		0	0
	Sold/Scrapped. 6/30/13											
285	SWINGSET	7/10/98	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
286	PHONES	12/18/98	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
287	SIGN (CARY NEST)	3/01/99	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
288	SUMP PUMP BATTERY BACKUP	4/09/99	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
289	SIGN (PALATINE)	4/14/00	0				0	0	HY		0	0
290	COMPUTER	1/07/01	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
291	FURNITURE & FIXTURES	7/31/93	0				0	0	HY		0	0
292	FURNITURE & FIXTURES	6/30/95	0				0	0	HY		0	0
293	SET OF CHANNEL LETTERS & CABINE	7/23/97	0				0	0	HY		0	0
294	SIGN	8/21/97	0				0	0	HY		0	0
295	CABINET	6/23/00	0				0	0	HY		0	0
296	GIFTS IN KIND	12/31/92	0				0	0	HY		0	0
	Sold/Scrapped· 6/30/13											
297	GIFTS IN KIND	6/30/95	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
298	VAN	6/30/95	0				0	0	HY		0	0
	Sold/Scrapped. 6/30/13											
299	FORD WAGON	4/04/96	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
300	COMPUTER EQUIPMENT	10/31/04	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
301	FILING CABINET	9/21/01	0				0	0	HY		0	0
302	COMPUTER MENTOR SOFTWARE	1/04/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
303	COMPUTER EQUIPMENT	2/01/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
304	COMPUTER EQUIPMENT	3/29/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
305	COMPUTER SOFTWARE	4/12/02	0				0	0	HY		0	0
	Sold/Scrapped 6/03/13											
306	DSL EQUIPMENT	5/10/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
307	LATERAL FILE CABINET	5/10/02	0				0	0	HY		0	0
308	COMPUTER EQUIPMENT	6/21/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
309	COMPUTER EQUIPMENT	3/29/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
310	COMPUTER SOFTWARE	4/12/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
311	COMPUTER EQUIPMENT	6/21/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
312	2002 CHEVY VAN 1GBJG31R421146028	1/22/02	0				0	0	HY		0	0
313	COMPUTER EQUIPMENT	7/19/02	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
314	REFRIGERATOR	5/19/03	0				0	0	HY		0	0
315	REFRIGERATOR	5/19/03	0				0	0	HY		0	0
316	DISHWASHER	9/04/03	0				0	0	HY		0	0
317	MATTRESSES & FRAMES	11/30/04	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
318	WASHER/DRYER/STOVE/REFRIGERAT	7/02/04	0				0	0	HY		0	0
319	COMPUTER EQUIPMENT	10/31/04	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
320	BUNK BEDS	9/30/04	0				0	0	HY		0	0
321	BUILDING ADDITION	10/01/04	0				0	0	HY		0	0
322	INTERIOR DRAIN TILE SYSTEM	9/23/04	0				0	0	HY		0	0
323	BLDG IMPROVEMENTS- RINGWOOD	6/30/05	0				0	0	HY		0	0
324	1995 DODGE INTREPID	2/15/04	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											
325	TOYOTA COROLLA JTAE09V0S009689	7/15/03	0				0	0	HY		0	0
	Sold/Scrapped 12/31/12											
326	98 OLDSMOBILE NINETY EIGHT	12/15/03	0				0	0	HY		0	0
	Sold/Scrapped 6/30/13											

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
327	2000 JEEP CHEROKEE 1J4GW48S7YC32	9/15/05	0				0	0	HY		0	0
328	FOUR REFRIGERATORS	7/01/04	0				0	0	HY		0	0
329	FOUR STOVES	7/01/04	0				0	0	HY		0	0
330	FURNANCES	7/01/04	0				0	0	HY		0	0
331	WASHER & DRYER	7/01/04	0				0	0	HY		0	0
332	STOVE	7/01/04	0				0	0	HY		0	0
333	DRYER	7/01/05	0				0	0	HY		0	0
334	REFRIGERATOR	7/01/04	0				0	0	HY		0	0
335	STOVE	7/01/05	0				0	0	HY		0	0
336	BATHROOM RENOVATION	1/11/07	0				0	0	HY		0	0
337	BATHROOM REMODEL - HANDICAP A	10/05/07	0				0	0	HY		0	0
338	SIGN FOR CARY	7/19/07	0				0	0	HY		0	0
339	LAPTOP COMPUTER	10/12/07	0				0	0	HY		0	0
340	SIGN FOR WOODSTOCK STORE	5/07/08	0				0	0	HY		0	0
341	TILE FOR OFFICE	10/01/08	0				0	0	HY		0	0
342	2 NEW WATER SPOUTS	10/25/08	0				0	0	HY		0	0
343	CARPET	5/16/09	0				0	0	HY		0	0
344	FURNANCES (System #1 south unit & #2	11/06/09	0				0	0	HY		0	0
345	Petersen Sealcoating	9/16/10	0				0	0	HY		0	0
346	Olson Windows	9/28/10	0				0	0	HY		0	0
347	Cambridge Exteriors	10/14/10	0				0	0	HY		0	0
348	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	0				0	0	HY		0	0
349	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	0				0	0	HY		0	0
350	Kenny's Floor Covering - Carpeting for 1 IL	11/18/10	0				0	0	HY		0	0
351	Kenny's Floor Covering - Carpeting for 1 IL	12/10/10	0				0	0	HY		0	0
352	Kenny's Floor Covering - Carpeting for 1 Il	12/10/10	0				0	0	HY		0	0
353	Kenny's Floor Covering - Carpeting for 1 IL	12/10/10	0				0	0	HY		0	0
354	Carpet One Floors - Carpeting	3/07/11	0				0	0	HY		0	0
355	Kitchen Cabinets	3/21/11	0				0	0	HY		0	0
356	Carpet One Floors - Carpeting	3/30/11	0				0	0	HY		0	0
357	HOME DEPOT - Double Wall Oven	4/20/11	0				0	0	HY		0	0
358	HOME DEPOT - 5 Burner Cook Top	4/20/11	0				0	0	HY		0	0
359	Lafontaine Enterprises - Bathroom Remode	9/19/11	0				0	0	HY		0	0
360	Kenny's Floor Covering -Carpeting Dorm R	10/20/11	0				0	0	HY		0	0
361	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	0				0	0	HY		0	0
362	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	0				0	0	HY		0	0
363	Kenny's Floor Covering-Carpeting Dorm R	10/20/11	0				0	0	HY		0	0
364	BUILDING IMPROVEMENTS	9/08/08	0				0	0	HY		0	0
365	BUILDING IMPROVEMENTS	10/22/08	0				0	0	HY		0	0
366	BUILDING IMPROVEMENTS	11/05/08	0				0	0	HY		0	0
367	BUILDING IMPROVEMENTS	12/17/08	0				0	0	HY		0	0
368	CARPET	1/16/09	0				0	0	HY		0	0
369	CARPET	1/20/09	0				0	0	HY		0	0
370	BUILDING IMPROVEMENTS	2/18/09	0				0	0	HY		0	0
371	BUILDING IMPROVEMENTS - New Roo	11/09/09	0				0	0	HY		0	0
372	BUILDING IMPROVEMENTS-New Wind	3/19/10	0				0	0	HY		0	0
373	BUILDING IMPROVEMENTS-New Wind	5/07/10	0				0	0	HY		0	0
374	TILE	4/06/09	0				0	0	HY		0	0
375	CARPETING	8/12/10	0				0	0	HY		0	0
376	COPIER-Ricoh MP3010SP Copier System	2/23/07	0				0	0	HY		0	0
377	LAPTOP COMPUTER (MARYBETH URI	2/28/10	0				0	0	HY		0	0
378	DELL VOSTRO 3700 LAPTOP COMPUT	6/30/10	0				0	0	HY		0	0
379	COMPUTER EQUIPMENT-Dell 1PMKN1	10/25/10	0				0	0	HY		0	0
380	COMPUTER EQUIPMENT-Dell 1P6KKN	10/25/10	0				0	0	HY		0	0
381	COMPUTER EQUIPMENT-Dell 1P6JKN1	10/25/10	0				0	0	HY		0	0
382	COMPUTER EQUIPMENT-Dell 1P7LKN	10/25/10	0				0	0	HY		0	0
383	COMPUTER EQUIPMENT-Dell CIC4SM	10/25/10	0				0	0	HY		0	0
384	COMPUTER EQUIPMENT-Dell 1P3LKN	10/25/10	0				0	0	HY		0	0
385	COMPUTER EQUIPMENT-Dell 1P7KKN	10/25/10	0				0	0	HY		0	0
386	COMPUTER EQUIPMENT-Dell 6034SM1	10/25/10	0				0	0	HY		0	0
387	COMPUTER EQUIPMENT-Dell 7ZB4SM	10/25/10	0				0	0	HY		0	0
388	COMPUTER EQUIPMENT-Dell 1P6LKN	10/25/10	0				0	0	HY		0	0
389	COMPUTER EQUIPMENT-Dell 4YB4SM	10/25/10	0				0	0	HY		0	0
390	COMPUTER EQUIPMENT-Dell 1P5JKN1	10/25/10	0				0	0	HY		0	0
391	COMPUTER EQUIPMENT-Dell 1P3KKN	10/25/10	0				0	0	HY		0	0
392	COMPUTER EQUIPMENT-Dell 1P7JKN1	10/25/10	0				0	0	HY		0	0
393	COMPUTER EQUIPMENT-Dell 1P4JKN1	10/25/10	0				0	0	HY		0	0
394	COMPUTER EQUIPMENT-Dell 8YB4SM	10/25/10	0				0	0	HY		0	0
395	COMPUTER EQUIPMENT-Dell 1P3JKN1	10/25/10	0				0	0	HY		0	0
396	COMPUTER EQUIPMENT-Dell 1P5LKN	10/25/10	0				0	0	HY		0	0
397	COMPUTER EQUIPMENT-Dell 1P2MKN	10/25/10	0				0	0	HY		0	0

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
398	COMPUTER EQUIPMENT-Dell 1P4KKN	10/25/10	0				0	0	HY		0	0
399	COMPUTER EQUIPMENT-Dell 1P3LKN	10/25/10	0				0	0	HY		0	0
400	COMPUTER EQUIPMENT-Dell 1P3MKN	10/25/10	0				0	0	HY		0	0
401	TechSoup Software - 6 Additional licenses	10/25/10	0				0	0	HY		0	0
402	Brother All-In-One Laser Printer - McHenry	1/13/11	0				0	0	HY		0	0
403	Brother All-In-One Laser Printer - Cary - U	1/13/11	0				0	0	HY		0	0
404	Brother All-In-One Laser Printer - Woodsto	1/13/11	0				0	0	HY		0	0
405	Server - DDGMXQ1	10/06/11	0				0	0	HY		0	0
406	COMPUTER EQUIPMENT	10/25/10	0				0	0	HY		0	0
407	Dell 1P5KKN1 - Palatine Nest Brother All-	1/13/11	0				0	0	HY		0	0
408	FURNITURE & FIXTURES/APPLIANCE	1/06/09	0				0	0	HY		0	0
409	FURNITURE & FIXTURES/APPLIANCE	1/09/09	0				0	0	HY		0	0
410	FURNITURE & FIXTURES/APPLIANCE	2/06/09	0				0	0	HY		0	0
411	SHED PROJECT-(shed concrete pad bldg p	6/01/10	0				0	0	HY		0	0
412	CHAIRS (10) & BAR STOOLS (2)	6/09/10	0				0	0	HY		0	0
413	ISLAND IN KITCHEN	6/09/10	0				0	0	HY		0	0
414	50 GAL RHEEM WATER HEATER-SN-0	9/08/10	0				0	0	HY		0	0
415	75 GAL RHEEM WATER HEATER-SN-0	9/08/10	0				0	0	HY		0	0
416	80 GAL RHEEM WATER HEATER-SN-0	9/08/10	0				0	0	HY		0	0
417	KINETICO 2100 + 1 BIG BLUE FILTER-S	9/08/10	0				0	0	HY		0	0
418	WELL-X-TROLL-MODEL LUX-251	9/08/10	0				0	0	HY		0	0
419	PUROMAX HR3 R/O (1 OF 5)	9/08/10	0				0	0	HY		0	0
420	PUROMAX HR3 R/O (2 OF 5)	9/08/10	0				0	0	HY		0	0
421	PUROMAX HR3 R/O (3 OF 5)	9/08/10	0				0	0	HY		0	0
422	PUROMAX HR3 R/O (4 OF 5)	9/08/10	0				0	0	HY		0	0
423	PUROMAX HR3 R/O (5 OF 5)	9/08/10	0				0	0	HY		0	0
424	A/C System - Residential - Model#XC13-0	5/31/11	0				0	0	HY		0	0
425	STORE FIXTURES (Tables Tie Rack Mirr	5/31/12	0				0	0	HY		0	0
426	2010 FORD E350 VAN 2FDWE3FL9A157	1/25/10	0				0	0	HY		0	0
427	2010 Ford E350 Van - 1FBNE3BL6ADA68	12/23/10	0				0	0	HY		0	0
428	2008 Chrysler Town & Country -2A8HR54	12/30/11	0				0	0	HY		0	0
429	LEASEHOLD IMPROVEMENTS - McHE	8/17/10	0				0	0	HY		0	0
430	801-807 Carlisle	3/01/13	0				0	0	HY		0	0
431	741-747 Carlisle	3/01/13	0				0	0	HY		0	0
432	733-739 Carlisle	3/01/13	0				0	0	HY		0	0
433	Geringer Road	11/30/12	0				0	0	HY		0	0
434	North Street	3/01/13	0				0	0	HY		0	0
435	Orchard Street	3/01/13	0				0	0	HY		0	0
436	BUILDING IMPROVEMENTS	3/01/13	0				0	0	HY		0	0
437	BUILDING IMPROVEMENTS	3/01/13	0				0	0	HY		0	0
438	BUILDING IMPROVEMENTS	3/01/13	0				0	0	HY		0	0
439	BUILDING IMPROVEMENTS	11/30/12	0				0	0	HY		0	0
440	BUILDING IMPROVEMENTS	3/01/13	0				0	0	HY		0	0
441	BUILDING IMPROVEMENTS	3/01/13	0				0	0	HY		0	0
442	ADT SECURITY SYSTEM	10/10/12	0				0	0	HY		0	0
443	ROSE FARM PAVING	11/01/12	0				0	0	HY		0	0
444	ADT SECURITY SYSTEM	11/07/12	0				0	0	HY		0	0
445	BUILDING IMPROVEMENTS	10/23/12	0				0	0	HY		0	0
446	BUILDING IMPROVEMENTS	10/23/12	0				0	0	HY		0	0
447	TABLES FOR HQ ROOM	8/31/12	0				0	0	HY		0	0
448	NEW SIGNAGE	11/08/12	0				0	0	HY		0	0
449	DISPLAY CASE FOR AL NEST	11/08/12	0				0	0	HY		0	0
	Total Other Depreciation		0				0				0	0
	Total ACRS and Other Depreciation		0				0				0	0
	Grand Totals		0				0				0	0
	Less: Dispositions and Transfers		0				0				0	0
	Net Grand Totals		0				0				0	0

HOMEQFSPARR Home of the Sparrow, Inc. 10/22/2013 11:14 AM
36-3494491

Depreciation Adjustment Report

FYE: 6/30/2013

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences

There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
233	RINGWOOD ROAD - MCHENRY	3/01/91	13,120	0	0
234	RINGWOOD ROAD - MCHENRY	6/30/95	32,819	0	0
235	NORTH AVENUE - CRYSTAL LAKE	10/14/97	25,000	0	0
236	WAUKEGAN ROAD - MCHENRY	4/10/93	20,000	0	0
237	BUILDING - RINGWOOD ROAD	3/01/91	129,611	3,323	0
238	NEWROOF (SHELTER)	7/01/93	8,000	205	0
239	GARAGE - STORAGE SHED	7/01/93	8,000	205	0
240	DECK (SHELTER)	7/01/93	3,000	77	0
241	DUMPSTER JACKET	7/01/93	500	12	0
242	RINGWOOD ROAD IMPROVEMENT	9/30/95	1,726	45	0
244	REMODEL EXISTING BLDG	3/18/98	28,055	720	0
245	REMODEL EXISTING BLDG	7/17/98	14,194	364	0
246	PAVED PARKING LOT	1/01/99	6,990	0	0
247	EDUCATION & TRAINING BLDG	6/21/99	106,030	2,718	0
248	SHELVING	6/21/00	724	0	0
249	SECURITY SYSTEM	12/22/00	7,900	0	0
250	FLOOR WORK	1/10/01	4,075	0	0
251	BUILDING - CRYSTAL LAKE	10/14/97	160,710	4,121	0
252	BUILDING IMPROVEMENTS	2/01/98	17,582	451	0
253	BUILDING - WAUKEGAN ROAD	1/10/93	121,569	3,117	0
254	BUILDING IMPROVEMENT	10/31/93	17,006	436	0
255	BUILDING IMPROVEMENT	6/30/95	14,708	377	0
257	WINDOWS	1/11/01	2,108	0	0
258	WINDOWS	1/11/01	4,010	0	0
259	3 FURNACES	1/11/01	8,075	0	0
260	EQUIPMENT - MCHENRY COUNTY	7/31/93	1,779	0	0
261	EQUIPMENT - MCHENRY COUNTY	6/30/95	15,373	0	0
269	LOCKERS	7/16/98	2,807	0	0
271	CASH REGISTERS	9/23/98	1,500	0	0
272	SHELVING UNITS	12/03/98	1,050	0	0
274	SIGN	3/01/99	2,612	0	0
283	BOOK CENTER	4/09/99	768	0	0
289	SIGN (PALATINE)	4/14/00	4,200	0	0
291	FURNITURE & FIXTURES	7/31/93	1,863	0	0
292	FURNITURE & FIXTURES	6/30/95	1,065	0	0
293	SET OF CHANNEL LETTERS & CABINET	7/23/97	1,000	0	0
294	SIGN	8/21/97	1,050	0	0
295	CABINET	6/23/00	510	0	0
301	FILING CABINET	9/21/01	600	0	0
307	LATERAL FILE CABINET	5/10/02	550	0	0
312	2002 CHEVY VAN 1GBJG31R421146028	1/22/02	22,235	0	0
314	REFRIGERATOR	5/19/03	1,132	0	0
315	REFRIGERATOR	5/19/03	378	0	0
316	DISHWASHER	9/04/03	414	0	0
318	WASHER/DRYER/STOVE/REFRIGERATOR	7/02/04	1,576	0	0
320	BUNK BEDS	9/30/04	1,449	155	0
321	BUILDING ADDITION	10/01/04	282,818	7,252	0
322	INTERIOR DRAIN TILE SYSTEM	9/23/04	7,268	0	0
323	BLDG IMPROVEMENTS- RINGWOOD RD	6/30/05	119,157	3,055	0
327	2000 JEEP CHEROKEE 1J4GW48S7YC321581	9/15/05	7,600	0	0
328	FOUR REFRIGERATORS	7/01/04	1,120	0	0
329	FOUR STOVES	7/01/04	1,036	0	0
330	FURNANCES	7/01/04	24,000	0	0
331	WASHER & DRYER	7/01/04	536	0	0
332	STOVE	7/01/04	259	0	0
333	DRYER	7/01/05	219	0	0
334	REFRIGERATOR	7/01/04	280	0	0
335	STOVE	7/01/05	259	0	0
336	BATHROOM RENOVATION	1/11/07	11,550	0	0
337	BATHROOM REMODEL - HANDICAP ACCE	10/05/07	20,780	533	0
338	SIGN FOR CARY	7/19/07	3,824	0	0
339	LAPTOP COMPUTER	10/12/07	700	0	0
340	SIGN FOR WOODSTOCK STORE	5/07/08	5,400	0	0
341	TILE FOR OFFICE	10/01/08	821	105	0
342	2 NEW WATER SPOUTS	10/25/08	1,485	212	0
343	CARPET	5/16/09	4,658	666	0
344	FURNANCES (System #1 south unit & #2 midd	11/06/09	12,200	2,440	0

Asset	Description	Date In Service	Cost	Tax	AMT
345	Petersen Sealcoating	9/16/10	7,986	1,141	0
346	Olson Windows	9/28/10	18,540	476	0
347	Cambridge Exteriors	10/14/10	17,688	454	0
348	Kenny's Floor Covering - Carpeting for 1 ILU	11/18/10	747	106	0
349	Kenny's Floor Covering - Carpeting for 1 ILU	11/18/10	747	106	0
350	Kenny's Floor Covering - Carpeting for 1 ILU	11/18/10	747	106	0
351	Kenny's Floor Covering - Carpeting for 1 ILU	12/10/10	747	106	0
352	Kenny's Floor Covering - Carpeting for 1 ILU	12/10/10	747	106	0
353	Kenny's Floor Covering - Carpeting for 1 ILU	12/10/10	747	106	0
354	Carpet One Floors - Carpeting	3/07/11	17,437	2,491	0
355	Kitchen Cabinets	3/21/11	7,546	1,078	0
356	Carpet One Floors - Carpeting	3/30/11	3,659	522	0
357	HOME DEPOT - Double Wall Oven	4/20/11	1,000	200	0
358	HOME DEPOT - 5 Burner Cook Top	4/20/11	663	133	0
359	Lafontaine Enterprises - Bathroom Remodel	9/19/11	13,690	351	0
360	Kenny's Floor Covering -Carpeting Dorm Room	10/20/11	505	72	0
361	Kenny's Floor Covering-Carpeting Dorm Room	10/20/11	505	72	0
362	Kenny's Floor Covering-Carpeting Dorm Room	10/20/11	505	72	0
363	Kenny's Floor Covering-Carpeting Dorm Room	10/20/11	505	72	0
364	BUILDING IMPROVEMENTS	9/08/08	350	8	0
365	BUILDING IMPROVEMENTS	10/22/08	25,000	641	0
366	BUILDING IMPROVEMENTS	11/05/08	257	7	0
367	BUILDING IMPROVEMENTS	12/17/08	20,000	513	0
368	CARPET	1/16/09	1,000	143	0
369	CARPET	1/20/09	2,400	343	0
370	BUILDING IMPROVEMENTS	2/18/09	28,643	734	0
371	BUILDING IMPROVEMENTS - New Roof	11/09/09	11,947	307	0
372	BUILDING IMPROVEMENTS-New Windows	3/19/10	8,158	209	0
373	BUILDING IMPROVEMENTS-New Windows	5/07/10	16,317	419	0
374	TILE	4/06/09	529	76	0
375	CARPETING	8/12/10	947	136	0
376	COPIER-Ricoh MP3010SP Copier System #M1	2/23/07	8,150	0	0
377	LAPTOP COMPUTER (MARYBETH URBIN)	2/28/10	650	130	0
378	DELL VOSTRO 3700 LAPTOP COMPUTER (1	6/30/10	1,386	277	0
379	COMPUTER EQUIPMENT-Dell 1PMKN1 - Ca	10/25/10	750	150	0
380	COMPUTER EQUIPMENT-Dell 1P6KKN1 - C	10/25/10	750	150	0
381	COMPUTER EQUIPMENT-Dell 1P6JKN1 - VI	10/25/10	750	150	0
382	COMPUTER EQUIPMENT-Dell 1P7LKN1 - O	10/25/10	750	150	0
383	COMPUTER EQUIPMENT-Dell CIC4SM1 - La	10/25/10	1,488	298	0
384	COMPUTER EQUIPMENT-Dell 1P3LKN1 - D	10/25/10	750	150	0
385	COMPUTER EQUIPMENT-Dell 1P7KKN1 - R	10/25/10	750	150	0
386	COMPUTER EQUIPMENT-Dell 6034SM1 - La	10/25/10	1,488	298	0
387	COMPUTER EQUIPMENT-Dell 7ZB4SM1 - L	10/25/10	1,488	298	0
388	COMPUTER EQUIPMENT-Dell 1P6LKN1 - D	10/25/10	750	150	0
389	COMPUTER EQUIPMENT-Dell 4YB4SM1 -La	10/25/10	1,488	298	0
390	COMPUTER EQUIPMENT-Dell 1P5JKN1 - M	10/25/10	750	150	0
391	COMPUTER EQUIPMENT-Dell 1P3KKN1 - W	10/25/10	750	150	0
392	COMPUTER EQUIPMENT-Dell 1P7JKN1 - M	10/25/10	750	150	0
393	COMPUTER EQUIPMENT-Dell 1P4JKN1 -Pro	10/25/10	750	150	0
394	COMPUTER EQUIPMENT-Dell 8YB4SM1 - L	10/25/10	1,488	298	0
395	COMPUTER EQUIPMENT-Dell 1P3JKN1 -Ad	10/25/10	750	150	0
396	COMPUTER EQUIPMENT-Dell 1P5LKN1 - O	10/25/10	750	150	0
397	COMPUTER EQUIPMENT-Dell 1P2MKN1 - C	10/25/10	750	150	0
398	COMPUTER EQUIPMENT-Dell 1P4KKN1 - R	10/25/10	750	150	0
399	COMPUTER EQUIPMENT-Dell 1P3LKN1 - D	10/25/10	750	150	0
400	COMPUTER EQUIPMENT-Dell 1P3MKN1 - C	10/25/10	750	150	0
401	TechSoup Software - 6 Additional licenses	10/25/10	240	48	0
402	Brother All-In-One Laser Printer - McHenry -	1/13/11	633	127	0
403	Brother All-In-One Laser Printer - Cary - U62	1/13/11	633	127	0
404	Brother All-In-One Laser Printer - Woodstock	1/13/11	633	127	0
405	Server--DDGMXQ1	10/06/11	2,485	497	0
406	COMPUTER EQUIPMENT	10/25/10	750	150	0
407	Dell 1P5KKN1 - Palatine Nest Brother All-In-O	1/13/11	633	127	0
408	FURNITURE & FIXTURES/APPLIANCES	1/06/09	735	73	0
409	FURNITURE & FIXTURES/APPLIANCES	1/09/09	1,740	174	0
410	FURNITURE & FIXTURES/APPLIANCES	2/06/09	505	58	0
411	SHED PROJECT-(shed concrete pad bldg permi	6/01/10	1,122	224	0
412	CHAIRS (10) & BAR STOOLS (2)	6/09/10	940	188	0
413	ISLAND IN KITCHEN	6/09/10	2,010	402	0
414	50 GAL RHEEM WATER HEATER-SN-06105	9/08/10	1,025	205	0
415	75 GAL RHEEM WATER HEATER-SN-07101	9/08/10	2,073	414	0

Asset	Description	Date In Service	Cost	Tax	AMT
416	80 GAL RHEEM WATER HEATER-SN-04100	9/08/10	1,251	250	0
417	KINETICO 2100 + 1 BIG BLUE FILTER-SN-1	9/08/10	2,700	540	0
418	WELL-X-TROLL-MODEL LUX-251	9/08/10	1,283	257	0
419	PUROMAX HR3 R/O (1 OF 5)	9/08/10	795	159	0
420	PUROMAX HR3 R/O (2 OF 5)	9/08/10	795	159	0
421	PUROMAX HR3 R/O (3 OF 5)	9/08/10	795	159	0
422	PUROMAX HR3 R/O (4 OF 5)	9/08/10	795	159	0
423	PUROMAX HR3 R/O (5 OF 5)	9/08/10	905	181	0
424	A/C System - Residential - Model#XC13-036-23	5/31/11	4,826	965	0
425	STORE FIXTURES (Tables Tie Rack Mirrors C	5/31/12	1,000	200	0
426	2010 FORD E350 VAN 2FDWE3FL9A15777	1/25/10	25,222	5,044	0
427	2010 Ford E350 Van - 1FBNE3BL6ADA68284	12/23/10	19,670	3,934	0
428	2008 Chrysler Town & Country -2A8HR54P88F	12/30/11	13,526	2,706	0
429	LEASEHOLD IMPROVEMENTS - McHENRY	8/17/10	15,416	2,202	0
430	801-807 Carlisle	3/01/13	45,000	0	0
431	741-747 Carlisle	3/01/13	45,000	0	0
432	733-739 Carlisle	3/01/13	50,000	0	0
433	Geringer Road	11/30/12	40,500	0	0
434	North Street	3/01/13	25,000	0	0
435	Orchard Street	3/01/13	55,000	0	0
436	BUILDING IMPROVEMENTS	3/01/13	165,000	4,231	0
437	BUILDING IMPROVEMENTS	3/01/13	165,000	4,231	0
438	BUILDING IMPROVEMENTS	3/01/13	165,000	4,231	0
439	BUILDING IMPROVEMENTS	11/30/12	94,500	2,424	0
440	BUILDING IMPROVEMENTS	3/01/13	175,000	4,487	0
441	BUILDING IMPROVEMENTS	3/01/13	188,000	4,820	0
442	ADT SECURITY SYSTEM	10/10/12	5,585	143	0
443	ROSE FARM PAVING	11/01/12	2,134	55	0
444	ADT SECURITY SYSTEM	11/07/12	3,915	100	0
445	BUILDING IMPROVEMENTS	10/23/12	97	2	0
446	BUILDING IMPROVEMENTS	10/23/12	23,380	599	0
447	TABLES FOR HQ ROOM	8/31/12	1,324	264	0
448	NEW SIGNAGE	11/08/12	8,570	857	0
449	DISPLAY CASE FOR AL NEST	11/08/12	5,220	522	0
	Total Other Depreciation		2,934,389	93,164	0
	Total ACRS and Other Depreciation		2,934,389	93,164	0
	Grand Totals		2,934,389	93,164	0