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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

Open to Public

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<u>A</u>	For the	2014 cale	ndar year, or tax year be				d ending	صفحت	E 30	, 20 15
В	Check if	applicable	C Name of organization CO	MMUNITIES I	N SCHOOLS OF AU	JRORA,	INC		D Employer	identification number
X	Address	change	Doing business as	-	<u> </u>				36-39094	167
	Name ch	nange	Number and street (or P C	box if mail is not	delivered to street addres	3S) 1	Room/suite		E Telephone	number
	Initial ret	urn	1433 PRAIRIE STR	EET					630-256-	-4500
	Final retur	rn/terminated	City or town, state or prov	ince, country, and	ZIP or foreign postal code	e				
	Amende	d return	AURORA, IL 60507						G Gross rece	epts\$2,816,786
	Applicati	on pendina	F Name and address of prince	cipal officer THER	ESA SHOEMAKER			H(a) is this a on	oun return for sub	ordinates? Yes X No
			·		E AS ABOVE			1		scluded? Yes No
1	Tax-exer	mpt status	X 501(c)(3)	-		V1) or [527			st (see instructions)
.]			URORA.ORG	<u> </u>	- (moore me) - 1047 (a)	<u>/(1/01 L</u>		-		mber ► N/A
			Corporation	Association (Other ▶	Ti Voor	of formation			legal domicile IL
	art I	Summ		_ Association (other P	L Tear	or formation	1 1994	IN State of	legal domicile 1L
				-1						
•	1		escribe the organization						UDENTS W	ITH A COMMUNITY
ညို		OF SUPE	ORT EMPOWERING TH	HEM TO STAY	IN SCHOOL AND	ACHIE	VE IN L	IFE		
Ē	_						·			
Activities & Governance			is box ▶ 🗌 if the orgar				posed of	more than	25% of its	net assets
ŏ	3		of voting members of t			•	•		3	19
ජේ ග	4		of independent voting i				,		4	19
<u>i</u>	5	Total nur	nber of individuals emp	oloyed in calend	dar year 2014 (Part	V, line 2	2a) .		5	704
<u>₹</u> :	6	Total nur	mber of volunteers (esti	mate if necess	ary) .		•		6	540
Ä	7a	Total unr	elated business revenu	ie from Part VII	I, column (C), line 1	2			7a	(
	b		lated business taxable		• •				7b	N/A
								Prior Ye		Current Year
•	8	Contribu	tions and grants (Part \	/III. line 1h)				2 9	30,689	2,769,860
Revenue	9		service revenue (Part \			•	·		48,819	26,492
Š	10	-	ent income (Part VIII, co	•	 3.4. and 7d\			············	150	50,452
æ	11		enue (Part VIII, column		•					
	12		enue—add lines 8 throu	• • •		,	, ₁₂₎	2 0	5,957	12,130
						(A), IIIIe	= 12)		35,615	2,808,532
	13		nd similar amounts paid	•	• • •	•	•	8.	32,079	366,010
	14		paid to or for members				·		0	0
es	15		other compensation, em			, lines 5-	-10)	2,1	06,622	1,957,670
Sue	16a		onal fundraising fees (P						0	0
Expenses	b		draising expenses (Par			30,	303			
ш	17	Other ex	penses (Part IX, columi	n (A), lines 11a-	-11d, 11f-24e)			3	71,068	<u>4</u> 39,034
Expe	18	Total exp	enses Add lines 13-1	7 (must equal F	art IX, column (A), I	line 25)	L_	3,30	769	2,762,714
l	19	Revenue	less expenses. Subtra	ct line 18 from	line 12			(2	74,154	45,818
Ses.							Be	ginning of Cui		End of Year
sets or lances	20	Total ass	ets (Part X, line 16)					60	07,819	475,315
A B	21		ulities (Part X, line 26)						28,604	150,282
돌들	22		ts or fund balances Su	ibtract line 21 f	rom line 20				79,215	325,033
Pa	rt II		ture Block			—— -			, , , , , ,	3207033
11-			ry, I declare that I have exam	inod this roturn, inc	luding cocomponius co		nd statema	and and and	a bast of my	Leaveledge and helpf doe
tru	e, correct	, and comp	lete Declaration of preparer (other than officer) is	based on all information	n of which	preparer ha	as any knowle	edae	knowledge and belief, it is
tru		<u> </u>	10- N	C/a/a			<u> </u>	 -	- -	
Sig	n	Sign	ature of officer	NWIN-	<u> </u>			Dat		
He		J. Sign	- h C	nic (3		. 0			70 7011
ne	e	1	AITH LADHURE	<u>- 612 (</u>	HAIRMAN O	F THE	E DOA	1 ed	01-	20-2016
		! 	e or print name and title	15	<u> </u>				1	
Pa	id	Printity	pe preparer's name	1 / /	's signature		Date		Check X	ıf PTIN
Pro	epare	Steve	Baustian	'(X= '^		12/	28/15	self-employ	red P00952985
	e Onl	1	name ►STEVE BAUST	IAN dba JMS	ENTERPRISES			Firm	's EIN ► 36-	-4341627
		Firm's a	ddress ► PO BOX 185					Phor	ne no 630-	710-2121
Ма	y the IF	RS discus	s this return with the pr	eparer shown a	above? (see instruc	tions)				. X Yes No
For	Paperv	vork Redu	ction Act Notice, see the	separate instru	ictions.					Form 990 (2014)

) 00	(
	O (2014) III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1,	Briefly describe the organization's mission TO SURROUND STUDENTS WITH A COMMUNITY OF SUPPORT EMPOWERING THEM TO STAY IN SCHOOL AND ACHIEVE IN LIFE
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
4	If "Yes," describe these changes on Schedule O 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 \$ 2,547,782 including grants of \$)(Revenue \$ 2,412,652) ORGANIZATION FACILITATES COORDINATED COMMUNITY RESOURCE DELIVERY TO CHILDREN AT SCHOOL SITES. AN IMPLEMENTATION PARTNERSHIP PROGRAM IS DESIGNED TO ENCOURAGE AT-RISK ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS TO REMAIN IN SCHOOL. AGENCY STAFF WORK TO LINK STUDENTS TO COUNSELORS AND ACADEMIC SUPPORT SO THEY CAN BE SECCESSFUL AT SCHOOL. OVER 5,000 STUDENTS WERE SERVED DURING THE YEAR
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ncluding grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)

Form **990** (2014)

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 2	X	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		X	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<u> </u>		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	H		 -
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
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_		Х
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			
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		Х
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		X
• •	VII, VIII, IX, or X as applicable			,i
а			~	
-	complete Schedule D, Part VI	11a	х	•
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		х
С	,			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	9			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	├	Х
t	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			
12 2		11f	<u> </u>	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	120		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a	X	
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a		14a	<u> </u>	X
b				
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4=	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	1		_
18		17		X
10	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.	40		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	 	X
.5	If "Yes," complete Schedule G, Part III	19		х
20 a		20a	 	<u>^</u>
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		N/Z

f Required Schedules	(continued)
ì	f Required Schedules

11. Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 II "Ves," complete Schedule I, Parts 1 and III. 12. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 II "Ves," complete Schedule I, Parts 1 and III. 13. Did the organization arewer "Ves" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bonders, directors, frustless, key employees, and highest compensated employees? If "Yes," complete Schedule J. But III. 14. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 frivilla (III. III. III. III. III. III. III. II				Yes	No
Part IX, column (A), line 2" If "Yes," complete Schedule I, Parts I and III 2	21'、		21	х	
23 Did the organization answer "Yes" to Part NI, 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 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 240 through 24d and complete Schedule K If *No." go to line 25s 25d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 25d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 27d Did the organization pront any amount on Part X, line 5. 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualided persons? If "Yes," complete Schedule L, Part II 27d Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 IV 28d A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 29d Did the organization is a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule R, Part IV 29d Did the organization is a current or former officer, director, trustee, or key employee? If "Ye	22				
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer limes 24b through 24d and complete Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization aniantan an excrow account other than a refunding escrow at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c/3), 501(c/4), and 501(c/29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person with a disqualified person 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 II Did the organization aware that if 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 II Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 II Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV A complete Schedule L. Part IV c An entity of which a current or former officer, director, trustee, or key employee (ir Yes," complete Schedule L. Part IV a A current or former officer, director, frustee, or key employee (or a family member thereof) was an officer, director, trustee, or director, trustee, or key employees or officer, director, trustee, or director, trustee, or key employees or officer, director, trust	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			
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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a priory year, and that the transaction during the year? If 'Yes, 'complete Schedule L, Part I year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 1b Is the organization report any amount on Part X, line 5. 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II! 2b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee? The part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A mentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule IV, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule IV, Part IV Did the organization in eceive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule IV, Part IV Did the organization on tolow 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, III, or IV, and Part I, Iine 1 Did the organization nown 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedul	24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		_
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an arcess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 II 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III 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 IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV as a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part II 30 Did the organization has a controlled entity of the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, and Part V, line 1 30 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2 31 Did the organization has a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 32 Did the organization nethate to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2 33 Did the org		Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
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 25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees or disqualified persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 II 27		Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		-	X
Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III. 28 Was 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. 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). 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I I 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 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 I. 31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization. Did the organization make any transfers to an exempt non-charitable related organization. Did the organization make any transfers to an exempt non-charitable related organization. Did the organization make any transfers to an exempt non-charitable related organization. Organizations. Did the organi	b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		
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 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 b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 28b x 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N. Part I 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-2? If "Yes," complete Schedule R. Part I 33 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V. line 2 34 Was 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 V. line 2 35 Did the organization conduct more than 5% of its activities th	26	current or former officers, directors, trustees, key employees, highest compensated employees, or			
Nas 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule M Did the organization receive contributions? If "Yes," complete Schedule M Did the organization receive contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II Side the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Side the organization vin 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 II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complet	27	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29	28				
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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 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, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. 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.		A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30	С				
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
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, Part 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 36 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 N/A 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, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	31				
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	32				
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 N/A 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 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	33				
Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 N/A 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 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 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	34				
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	_	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	-		
Part VI	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
19? Note . All Form 990 filers are required to complete Schedule O	38	Part VI	37		Х
		19? Note . All Form 990 filers are required to complete Schedule O			(0011)

Part				
<u> </u>	Check If Schedule O contains a response or note to any line in this Part V			
1a	Enter the mumb are seeded at Dec 2 of Enter 4000 Enter 0. If a track it is the		Yes	No
b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	- I		
C	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	}		
•	reportable gaming (gambling) winnings to prize winners?	1c		N/A
2a		16		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 704			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		-
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions).	20		<u> </u>
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? <i>If "No" to line 3b, provide an explanation in Schedule O</i> .	3b		N/Z
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	f		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country ► N/A	, 1		<u> </u>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		,	
	(FBAR)	-	, ,	٠,
5a	the state of the s	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		N/A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
L.	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			N/2
7	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	ĺĺ	* 1	e de de la constante de la con
_	and services provided to the payor?	7a		<u>.</u> _
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		X N/P
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5		IN/I
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year . $7d$			5,.
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N/F
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N/F
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	*,1 *		`
	sponsoring organization have excess business holdings at any time during the year?	8		N/F
9	Sponsoring organizations maintaining donor advised funds.			لخ ۔ خــ
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		N/P
_ b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		N/A
10	Section 501(c)(7) organizations. Enter:	100	<i>\$</i>	,
a b	Initiation fees and capital contributions included on Part VIII, line 12 $10a$ N/A Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities N/A		ζ ☆	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b N/A Section 501(c)(12) organizations. Enter:		. , à	
'' a		***	47.55	ar a
b	Gross income from members or shareholders	**		,
	against amounts due or received from them.)	* *	*	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N/A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year $ 12b $ $_{\rm N/A}$			N/A
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	3	",	1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		N/F
	Note. See the instructions for additional information the organization must report on Schedule O	- 7.5		<u>_</u>
b	Enter the amount of reserves the organization is required to maintain by the states in which		- x	, [
	the organization is licensed to issue qualified health plans	\$ 34	, 1	
С	Enter the amount of reserves on hand	2 - 341 2 - 341		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		N/A
		Form	990	(2014)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O Schedule O Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management			
4.	Federaths must be a first of the first of th		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			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 19		`	
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		Х
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 7a	Did the organization have members or stockholders? 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?	6 7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	/ a		X
_	stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			,
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		-
10a	Did the ergonization have level charters have been as #51 stee?	40	Yes	No
b	Did the organization have local chapters, branches, or affiliates? 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?	10a		X N/A
11a		11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12a 12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		х
13	Did the organization have a written whistleblower policy?	13		Х
14 15	Did the organization have a written document retention and destruction policy? 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?	14		X
_	The organization's CEO, Executive Director, or top management official	4.5-		
a b	Other officers or key employees of the organization .	15a 15b	X	N/A
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	130		11/21
	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?		_	NT / TA
Secti	on C. Disclosure	16b		N/A
17 18	List the states with which a copy of this Form 990 is required to be filed ILLINOIS Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year	erest (oolicy	/, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re			

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

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

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

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

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

Check this box if neither the organization	nor any relate	d org	aniz	atic	n c	ompe	ensa	ited any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n box, office	ot cl unles er an	Pos neck ss pe	c) sition more erson sirect	e than o	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) FAITH LASHURE	2									
CHAIRMAN OF THE BOARD		Х		х				0	0	0
(2) NANCY McCAUL	X									
TREASURER		х		x				0	0	0
(3) DR. JEFF CRAIG	2				_					
SECRETARY		Х		Х		Ì		0	0	0
(4) SCOTT MCLEARY	2									
PAST CHAIRMAN		х						0	0	0
(5) WILLIAM BUCHAR	2									
BOARD MEMBER		Х						0	0	0
(6) PATRICIA DAL SANTO	2									
BOARD MEMBER		х						0	0	0
(7) MARSHALL DARWISH	2									
BOARD MEMBER		Х						0	0	0
(8) DR. SHERRY EAGLE	2									
BOARD MEMBER		х						0	0	0
(9) JOSEPH HENNING	2									
BOARD MEMBER		Х						0	0	0
(10) JOAN BOLDAN	2									
BOARD MEMBER		Х						0	0	0
(11)KIM GRANHOLM	2							-		
BOARD MEMBER		Х						0	0	0
(12) DR. MICHAEL POPP	2									
BOARD MEMBER		х						0	0;	0
(13) RHONDA MONT	2									
BOARD MEMBER		Х	'					0	0	0
(14) JORGE MUNOZ	2									
BOARD MEMBER		Х						0	0	0

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees	s, aı	nd F	lighes	st C	ompensated E	mployees (col	ntınue	ed)
`	(A) Name and title	(B) Average hours per week (list any	(do n box, office	ot ch	Pos neck ss pe	c) ition more rson		one n an	(D) Reportable compensation from	(E) Reportable compensation fro		(F) Estimated amount of other
		hours for related organizations below dotted line)	ndıvıdua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C)	compensation from the organization and related organizations
	R. KAREN SULLIVAN	2	1					-	 			
	OARD MEMBER ACKIE VOLKERT	2	Х			ļ	ļ		0		0	0
	DARD MEMBER	<u> </u>	x						0		0	0
	REG THOMAS	2	 -				-		<u>*</u>		1	
	OARD MEMBER		х						0		0	0
	OM WEISNER	2										
	OARD MEMBER R. MATTHEW WENDT		Х						0		<u> </u>	0
	DARD MEMBER	2	x						0		0	0
	HERESA SHOEMAKER	40	Α.						<u>~</u>		\vdash	
E	XECUTIVE DIRECTOR				х	Х			97,187	ı	0	10,000
(21)								_				
(22)												
35.57		 									ľ	
(23)												
(24)												
(25)												
	Sub-total								05.107		\perp	10.000
C	Total from continuation sheets to Part	VII. Sectio	n Δ						97,187		0	10,000
d	Total (add lines 1b and 1c)							•	97,187		0	10,000
2	Total number of individuals (including but reportable compensation from the organi		l to th	ose 0	list	ed a	above) w		ore than \$100,	000	
3	Did the organization list any former of employee on line 1a? If "Yes," complete a	ficer, direct	tor, o	r tri	uste indi	ee, I	key e	mp	loyee, or high	est compensa	ated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portat	ole d	com	nper	satio					
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or individual	dual	4 X 5 X
Section	on B. Independent Contractors										•	<u> </u>
1	Complete this table for your five highest of compensation from the organization. Replyear	compensate oort compe	ed ind	lepe n fo	endo or th	ent d	contra	acto ar y	ear ending with	d more than \$ h or within the	6100, orga	000 of anization's tax
	(A) Name and business add	ress						_	(B) Description of se	ervices	С	(C) ompensation
NONE							-	,				
2	Total number of independent contractor received more than \$100,000 of compens							the	ose listed abo	ove) who		

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Pari	VIII	Statement of Reve				- D - + \ AU		
1		Check If Schedule C	o contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (con All other contributions, g and similar amounts not inc	. 1b 1c 1 1d 1tributions) 1e iffs, grants,	2,412,652				
ontri od Q	g	Noncash contributions include						
	h	Total. Add lines 1a-1	<u>f.</u> .		2,769,860			
Program Service Revenue	2a b	WORK STUDY REIMB	URSEMENT	900099	26,492	26,492		
ram Servic	d e							
rog	f g	All other program ser Total. Add lines 2a–2		<u> </u>	26,492	1	*	, ,
	3	Investment income and other similar amount income from investmen	(including divid ounts)	. •	50			50
	5 6a b	Royalties Gross rents Less rental expenses Rental income or (loss)	(i) Real	(ii) Personal	\$ 5 8 8	* \$ 7 } \$ < 58 * 1		4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	d 7a b	Net rental income or Gross amount from sales of assets other than inventory Less cost or other basis	(loss) . (i) Securities	(ii) Other	0	· ('	* 25	3 19 4
	c	and sales expenses Gain or (loss) Net gain or (loss)	0	0	, , ,	*	\$ ************************************	e 2
evenue	8a	Gross income from fuevents (not including \$			* \$	\$	\$ ·	\$
Other Revenue	b	of contributions reported See Part IV, line 18 Less direct expenses	a		•		or Special	
	9a	Net income or (loss) f Gross income from ga See Part IV, line 19	aming activities.	events >	4,818	* * * * * * * * * * * * * * * * * * * *	* ;	, ,
	b c 10a	Less direct expenses Net income or (loss) f Gross sales of in returns and allowance	rom gaming acti nventory, less	vities	0			
	b c	Less cost of goods s Net income or (loss) f	from sales of inv		0			
	11a b			200000000000000000000000000000000000000				
	d e	All other revenue Total Add lines 11a-		90099	7,312		0	0

Part IX Statement of Functional Expenses

<u>``</u>	Check if Schedule O contains a respons		ne in this Part IX .		
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	358,510	358,510		
2	Grants and other assistance to domestic individuals See Part IV, line 22 .	7,500	7,500		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	107, 107	00.610	0.575	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	107,187	98,612	8,575	
7	Other salaries and wages	1,610,159	1,461,011	122,522	26,626
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9		5,182	4,788	394	1 553
10	Other employee benefits	93,568	84,944 128,690	7,071	1,553 2,124
11	Fees for services (non-employees):	141,574	120,690	10,760	2,124
a	Management				
b	Legal				
С	Accounting	17,775	15,953	1,822	
d	Lobbying [
е	Professional fundraising services See Part IV, line 17	,	۶ ، ډ , ﴿		
f 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	22,476	22,476		
13	Office expenses	95,046	85,541	9,505	
14	Information technology .			.,	
15	Royalties				
16	Occupancy	28,942	26,047	2,895	
17	Travel [6,176	5,558	618	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,812	4,331	481	
20	Interest				-
21 22	Payments to affiliates .	7 111		711	,
23	Depreciation, depletion, and amortization Insurance .	7,111	6,400	711	
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.)	20,403	18,363	2,040	,
_	· · · · · · · · · · · · · · · · · · ·	100 476		2 500	
a b	OTHER PROGRAM EXPENSES EQUIP RENTAL ETC	102,476 9,793	98,886 8,814	3,590 979	
C	PRINTING	3,721	3,349	372	
d	BAD DEBTS	114,101	102,691	11,410	
e	All other expenses OTHER	6,202	5,318	884	
25	Total functional expenses. Add lines 1 through 24e	2,762,714	2,547,782	184,629	30,303
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)		, , ; ; ;		-3,230

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pai	tX		
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	184,136	1	23,279
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
s	4	Accounts receivable, net	410,783	4	436,968
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete Part II of Schedule L	e	5	- and streeting to reside the same and the
	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	in the second se	6	,
Assets	7	Notes and loans receivable, net	 	7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,500	9	1,500
	10a	Land, buildings, and equipment: cost or	1,300		1,300
		other basis Complete Part VI of Schedule D 10a 48,338	*		
	ь	Less: accumulated depreciation 10b 34,770	11,400	10c	13,568
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	607,819	16	475,315
	17	Accounts payable and accrued expenses	328,604		150,282
	18	Grants payable	020,001	18	100,202
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ś	22	Loans and other payables to current and former officers, directors,	3,	2	
Liabilities		trustees, key employees, highest compensated employees, and		* 4	
Ē		disqualified persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		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	328,604	26	150,282
sex		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.	*;	- "\	, , , , , , , , , , , , , , , , , , ,
J.	27	Unrestricted net assets	(55,285)	27	(81,807)
3ali	28	Temporarily restricted net assets	334,500	28	406,840
8	29	Permanently restricted net assets .		29	100/010
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	* * *	<i>Ş.</i>	
Ş	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund.		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
<u>e</u> t	33	Total net assets or fund balances	279,215	33	325,033
~	34	Total liabilities and net assets/fund balances	607,819	34	475,315
	<u> </u>			77	= 13,313

Part	Xi Reconciliation of Net Assets	
	Check if Schedule O contains a response or note to any line in this Part XI	· 🛛
1.	Total revenue (must equal Part VIII, column (A), line 12)	2,808,532
2	Total expenses (must equal Part IX, column (A), line 25)	2,762,714
3	Revenue less expenses. Subtract line 2 from line 1	45,818
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	279,215
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	
_	33, column (B))	325,033
Part	XII Financial Statements and Reporting	
_	Check if Schedule O contains a response or note to any line 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?	2a X
	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.	100
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	27-2
b		2b X
	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	1434
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
С	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?	2c X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	
_		
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	36
	Tequired addit of addits, explain why in schedule of and describe any steps taken to undergo such addits	3b X
		Form 990 (2014)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name	of the organization					Employer identification	n number			
COMM	UNITIES IN SCHOOLS OF AUR					36-3909467				
Par							ons.			
	organization is not a private found		•		-	•				
1	A church, convention of church			ibed in s	ection 17	′0(b)(1)(A)(i).				
2	A school described in section		· ·		4700.14	43/43/***				
3 4	☐ A hospital or a cooperative ho ☐ A medical research organizati						(iii) Entar tha			
4	hospital's name, city, and state		orijuniction with a nos	uesc	inped in s	section (70(b)(1)(A)	(III). Litter the			
5										
6	A federal, state, or local gover	•	mental unit described	ın secti	on 170(b))(1)(A)(√).				
7	An organization that normally described in section 170(b)(1	receives a subs	tantial part of its sup				n the general public			
8	☐ A community trust described	ın section 170(b)(1)(A)(vi). (Complete	Part II)						
9	\square An organization that normally									
	receipts from activities relate									
	support from gross investme acquired by the organization a						x) from businesses			
10	An organization organized and		-		-	·				
11	An organization organized and		-	•			out the purposes of			
	one or more publicly supporte the box in lines 11a through 11	d organizations d	lescribed in section 5	09(a)(1) c	r section	509(a)(2). See sect	i on 509(a)(3) . Check			
а	☐ Type I A supporting organi:									
	the supported organization(organization)			ct a majo	ority of the	e directors or trustee	es of the supporting			
b	_ ,,									
	control or management of the			ne same p	ersons tl	hat control or manag	ge the supported			
	organization(s) You must c	-								
С	Type III functionally integrated its supported organization(s) (see instruction	s) You must comple	te Part I	V, Sectio	ns A, D, and E.	-			
d	☐ Type III non-functionally ir									
	that is not functionally integ						an attentiveness			
_	requirement (see instruction Check this box if the organia	•					II. Typo III			
е	functionally integrated, or Ty						п, туре ш			
f	Enter the number of supported	· -								
g	Provide the following information	-	orted organization(s).				L			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of			
			(described on lines 1–9 above or IRC section		ur governing ment?	support (see instructions)	other support (see instructions)			
			(see instructions))	Yes	l No					
				res	No					
(A)				İ	}					
(D)		 								
(B)					_					
(C)										
(D)										
(E)										
Total		120				^	0			

Part							
	(Complete only if you checked the						alıfy under
Canti	Part III. If the organization fails to	qualify unde	r the tests lis	sted below, p	lease comple	ete Part III)	
	on A. Public Support			· · · · · · · · · · · · · · · · · · ·			
Caler	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")						
2	_ · · · · · · · · · · · · · · · · · · ·	2,381,462	2,730,002	3,183,478	2,980,689	2,769,860	14,045,491
2	lax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						-
4	Total. Add lines 1 through 3	2,381,462	2,730,002	3,183,478	2,980,689	2,769,860	14,045,491
5	The portion of total contributions by	*	,		,		
	each person (other than a		4		*' <		
	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.		* ` `	* **	\$ "3 4 4 *** 33	6	
	on B. Total Support	<u> </u>	,,				14,045,491
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	2,381,462	2,730,002	3,183,478	2,980,689		14,045,491
8	Gross income from interest, dividends,	2,001,102	277307002		273007005	2,703,000	14,043,451
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources .	421	201	222	150	50	1,044
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,754	2,320	2,559	7,993	7,312	21,938
11	Total support. Add lines 7 through 10	1,754	2,320	,		7,512	14,068,473
12	Gross receipts from related activities, etc.					12	324.131
13	First five years. If the Form 990 is for the	ne organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her					<u> </u>	▶ □
	on C. Computation of Public Suppor	<u>_</u>					
14	Public support percentage for 2014 (line 6			.,,	•	14	99.84%
15 160	Public support percentage from 2013 Sch					15	99.72 %
16a	33 ¹ / ₃ % support test—2014. If the organization qual				ine 14 is 33	/3% or more, ci	
b	33 ¹ / ₃ % support test—2013. If the organicheck this box and stop here. The organic	nization did not	t check a box	on line 13 or	16a, and line	15 is 33 ¹ /3%	
179	10% -facts-and-circumstances test—20		· · · · · · ·			. or 485	▶ □
114	10% or more, and if the organization meets the "froganization	ets the "facts-a	ınd-circumstaı	nces" test, che	eck this box an	nd <mark>stop here</mark> . E	xplaın in
b	10% -facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part VI how the organization m supported organization	ion meets the	"facts-and-cii	rcumstances"	test, check th	ns box and sto	and line op here
18	Private foundation. If the organization did instructions	d not check a b	oox on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	

(Complete only if you checked the box on line 9 of Part I or if the organization falled to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ 1	Part	Support Schedule for Organization	ations Desci	ribed in Sect	ion 509(a)(2)			
Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total of fits, prants, controlutions, and membership (see received (b) on chindule any "unusual grants" 2 Gross receipts from admissions, merchandises sold or services performed, or facilities furnished in any activity that is related to the unusual grants 3 Gross receipts from actives that are not an unrelated trade or business under section 513 4 Tax revernues lewed for the organization is 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 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons. 8 Amounts included on lines 2, and 3 received from disqualified persons is that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c. Add lines 7 and 70 8 Public support (Subtract line 7c from line 6.) 9 A Amounts from line 6 10 Gross income from interest, dividends, payments received in securities loans, rints, royalities and mome from similar sources 10 Unrelated business taxable income (sess section 511 taxes) from businesses acquired after June 30, 1975 11 Act all support. (Add lines 9, 10c, 11, 11) 12 Other income, Do not include gain or loss from the sale of capital assets (capital in Part VI) 13 Total support. (Add lines 9, 10c, 11, 11) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50(c)(3) organization, check this box and stop here 15 Public support percentage from 2014 (line 10c, column (f) divided by line 13, column (f)) 15 9 26 Section C. Computation of Tublic Support Percentage 17 Investment income percentage from 2013 Schedule A. Part III, line 15 16 9 28 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f)) 17 9 18 In		(Complete only if you checked the	he box on line	e 9 of Part I c	or if the organ	ization failed		ler Part II.
Calendar year (or fiscal year beginning in) 1		If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	II.)	
1 Gifts grants, contributions, and membership fees received flo not include any insular grants? 7 2 Gross receipts from admissions, merchandles sold or services performed, or facilities furnished in any activity that is related to the originarization's time cerempt grants and interest and continuous and interest and in			Y			· -	- 	
treceived (Do not include any "unusual grains") 2 Gross receipt from admissions, merchandles sold or services performed, or facilities furnished in any activity that is related to the organization's tox-exempt purpose 3 Gross receipt from activities that are not an unrelated trade or business under section 513 4 Tax revenues leveled for the organization without charge is the section of the organization without charge is the properties of the organization without charge is the properties of the organization without charge is the properties of the organization without charge is the organization organization, check this box and stop here is the organization organization without charge is public support percentage for 2014 (ine 10 c, column (f) divided by line 13, column (f) ine 15 is 16 is 17 in the organization organizat	Calen		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
2 Gross receipts from admissions, merchandises sold or services performed, or facilities furnished in any activity that is related to the organization's benefit and either paid to or expended on its behalf or activities flat 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 or expended on its behalf or activities furnished by a governmental unit to the organization without charge. 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 other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year or 4 and 1 an	1]					
sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross recepts from activities that are not an unrelated trade or business under section 513 4 Tax revenues leveled 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 7 A 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 7 and 7 b 8 Public support (Subtract line 7 c from line 6) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources 10 Unrelated business taxable income (less section 511 taxes) from businesses activities not included gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. (Add lines 9, 10c, 11, and 12) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 flock this box and stop here. Section D. Computation of Investment Income Percentage 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage for 2013 Schedule A Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 18 Investment income percentage for 2013 Schedule A Part III, line 15 Section 17 In a divided by line 13, column (f)) 18 Investment income percentage for 2013 Schedule A Part III, line 15 18 Investment income percentage for 2013 Schedule A Part III, line 17 18 Investment income percentage for 2013 Schedule A Part III, line 15 18 Investment income percentage for 2013 Schedule A Part III, line 17 18 Investment income percentage for 2013 Schedul	2			_				
organization's tax-exempt purpose Gross received from chief base and to an unrelated trade or business under section 513 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 5 A mounts included on lines 2 and 3 received from other than disqualified persons by a mount in the second of the se	_	sold or services performed or facilities						
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 2 and 3 received from disqualified persons be Amounts included on lines 2 and 3 received from 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.) 9 Amounts from line 6.) 9 Amounts from line 6.0 9 Amounts received on securities loans, rents, reysiltes and income from similar sources burnelated business taxable income (less section 511 taxes) from businesses activities received on securities loans, rents, reysiltes and income from similar sources 9 Unrelated business taxable income (less section 511 taxes) from businesses activities not include gain or loss from the sale of capital assets (Explain in Part VI) 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 9 Public support percentage for 2013 Schedule A Part III, line 15 17 Investment income percentage for 2013 Schedule A Part III, line 15 18 18 Investment income percentage for 2013 Schedule A Part III, line 15 18 18 Investment income percentage for 2013 Schedule A Part III, line 16 18 18 18 18 18 18 18 18 18 18 18 18 18 1		furnished in any activity that is related to the			i			
unrelated trade of business under section 513 4 Tax revenues lewied 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 2 and 3 received from disryadiffed persons b Amounts included on lines 2 and 3 received from disryadiffed persons that exceed the greater of \$5,000 or 1% of the amount on line 13 forthe year c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Amounts from line 6.) Gross income from interest, dwidends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses accurred after June 30, 1975 c Add lines 10a and 10b 1 Net income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 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 February organization, check this box and stop here February organization or five stime and schedule A, Part III, line 17 Investment income percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 [9] Revestment income percentage for 2014 (line 6, column (f) divided by l	3							
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b 331/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and	h							
time 40 company and the company of t		line 18 is not more than 331/3%, check this i	oox and stop h	ere. The organi	zation qualifies	as a publicly si	upported organi	zation 🕨 📋
	20							

Part IV: Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organ	iizations
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CCL	on A. An Supporting Organizations		Voc	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1	163	110
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	, ,	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	<u></u>	
4a		4a	2.	*
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	**	, ~
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		* **
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		*
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If "Yes," provide detail in Part VI.	6		· .
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	<u> </u>	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)	8	* .	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	3, *	
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a	*	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	•*		

determine whether the organization had excess business holdings)

10b

Part	IV . Supporting Organizations (continued)			. ago t
			Yes	No
11`•	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		-
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			_
4		F	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	,	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		* ;
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations; by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		2
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	Postore	23
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		2 % s
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in Part VI).			
2	Activities Test Answer (a) and (b) below.	, 	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	*	
3 a	Parent of Supported Organizations <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>			
b	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		 -
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		}

Pair V 1ype III Non-Functionally Integrated 509(a)(3) Supporting Org	<u>jan</u>	izations	
1 Check here if the organization satisfied the integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co	j tru	st on Nov 20, 1970 See ir	structions. All
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	 	 "
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	der *-	i vijingi.	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		-
6 Multiply line 5 by 035	6		······································
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		, p	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	5 -4 # 6 - 8 00 5 8 m - 12 m - 1	
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	\$ \$	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	y-ın	tegrated Type III supporting	g organization (see

	Type III Non-Functionally Integrated 509(a)(3	3) Supp	orting C	organi	zations	(continuea)		
Secti	on D - Distributions					i	Current	Year
1`_	Amounts paid to supported organizations to accomplish exempt purposes							
2	remarks personn dentity that an early randomy perpendent of supported							
	organizations, in excess of income from activity							
	Administrative expenses paid to accomplish exempt purp	oses of	supporte	ed orga	ınızations			
	Amounts paid to acquire exempt-use assets							
5_	Qualified set-aside amounts (prior IRS approval required)							
<u>6</u> 7	Other distributions (describe in Part VI) See instructions. Total annual distributions. Add lines 1 through 6		·					
 _		L 41						
0	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions	n the or	ganizatio	n is res	sponsive			
9	Distributable amount for 2014 from Section C, line 6							
	Line 8 amount divided by Line 9 amount					-	= -	
	Enter of amount divided by Enter of amount	<u> </u>				(ii)	(iii	<u> </u>
Se	ection E - Distribution Allocations (see instructions)	Exces	(i) s Distribu	utions		istributions 2-2014	Distribu Amount f	ıtable
1	Distributable amount for 2014 from Section C, line 6		``		•	*		-
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)							
3	Excess distributions carryover, if any, to 2014	<u> </u>						
а		8)		}		***		
b		<u> </u>						
С				,				
d			ě	v		', '		ią.
е	From 2013	*					``	
f	Total of lines 3a through e		·····					
g	Applied to underdistributions of prior years		<u>" '- 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, </u>	ş				<u> </u>
<u>h</u>	Applied to 2014 distributable amount	32	21) .	,	: : ; ; ;		6	
<u> i</u>	Carryover from 2009 not applied (see instructions)	,		- 3			- *	
	Remainder Subtract lines 3g, 3h, and 3i from 3f	<u> </u>			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
4	Distributions for 2014 from Section D, line 7: \$	Ì.		%/* * .:	3	, , , ,	. 81	
a	Applied to underdistributions of prior years	**		*	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
b	Applied to 2014 distributable amount					· · ·		
С	Remainder Subtract lines 4a and 4b from 4	<u> </u>				i / i / i / i / i / i / i / i / i / i /		
5	Remaining underdistributions for years prior to 2014, if	-	*				·	
	any. Subtract lines 3g and 4a from line 2 (if amount	*	*					
	greater than zero, see instructions).	,		,				
6	Remaining underdistributions for 2014. Subtract lines 3h	\$, ,	3	,	3			
	and 4b from line 1 (if amount greater than zero, see		\$ *			**		
	instructions)			,	· .> «	· · · · · · · · · · · · · · · · · · ·		
7	Excess distributions carryover to 2015 Add lines 3j and 4c				**			*
8	Breakdown of line 7:				18135 A. S.	a		
а			-					
b			,		7			
С	1		,		· · · · · · · · · · · · · · · · · · ·	٠,		
<u>d</u>	Excess from 2013 .	ļ						
е_	Excess from 2014	<u> </u>						

	prm 990 or 990-EZ) 2014 Page 8
Part VI	Supplemental Information. 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 III,	LINE 10 - ALL YEARS ARE MISELLANEOUS INCOME
	······································
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SCHEDULE D (Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number COMMUNITIES IN SCHOOLS OF AURORA, INC 36-3909467 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year 4 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 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. a Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 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) 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. 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. 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) Revenue included in Form 990. Part VIII, line 1 \$ 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:

.

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X .

Part	III Organizations Maintaining	Collections of /	Art, Hist	orical T	reasures,	or Otl	ner Similar As	sets (con	tinued)
3.	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	her recor	ds, chec	k any of the	e follow	ing that are a si	gnificant u	se of its
а	☐ Public exhibition		d (☐ Loan	or exchange	e progr	ams		
b	☐ Scholarly research		e (
C	☐ Preservation for future generations	;							
4	Provide a description of the organizat XIII.		and expla	in how th	ney further t	the org	anızation's exem	pt purpos	e ın Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Part	IV Escrow and Custodial Arra	ngements.							
	Complete if the organization	answered "Yes"	' to Forn	n 990, P	art IV, line	9, or r	eported an am	ount on F	orm
	990, Part X, line 21.								
1a	· · · · · · · · · · · · · · · · · · ·							ot	
	included on Form 990, Part X?							☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:				
							1A	nount	
C	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amour					ıstodial	account liability	? 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Pa								
Par				·		•			
	Complete if the organization	answered "Yes'	" to Forr	n 990, P	art IV, line	10.			
		(a) Current year		or year	(c) Two year		(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance					-		1	
b	Contributions							<u> </u>	
C	Net investment earnings, gains, and losses								
	,		-				_	-	
d	Grants or scholarships				· · · · · · · · · · · · · · · · · · ·			 	
е	Other expenditures for facilities and programs								
f	Administrative expenses						_		
g	End of year balance	<u> </u>							
2	Provide the estimated percentage of t			e (line 1g	i, column (a))) held a	as.		
а	Board designated or quasi-endowmer	nt ▶	_%						
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	e possession of the	ne organi:	zation tha	at are held a	and ad	ministered for th	e	
	organization by:							Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(iı), are the related organi							3b	
4	Describe in Part XIII the intended uses	of the organization	on's endo	wment fo	unds.				
Part				-					
	Complete if the organization	answered "Yes"	" to Forr	n 990, F	art IV, line	11a. S	See Form 990,	Part X, lin	e 10.
	Description of property	(a) Cost or ot			or other basis	٠.	Accumulated	(d) Book	value
		(investm	ent)	(0	ther)		epreciation		
1a	Land					T. 13			
b	Buildings								
С	Leasehold improvements								
d	Equipment				48,338		34,770		13,568
е	Other		_	-				_	
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90. Part 2	K. columr	(B) line 10)c.)			13,568

Part VII.	Investments - Other Securities.			
	Complete if the organization answered "Yes" to F	orm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
`,	(a) Description of security or category (including name of security)	(b) Book value	(c) Me	thod of valuation I-of-year market value
(1) Financial	derivatives			
(2) Closely-h	reld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col (B) line 12) ▶			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" to Fo			
	(a) Description of investment	(b) Book value		thod of valuation I-of-year market value
(1)				
(2)			 	
(3)				
(5)				
(6)			<u> </u>	
(7)			· · ·	
(8)			 	
(9)			-	
	b) must equal Form 990, Part X, col (B) line 13.) ▶			. ,
Part IX	Other Assets.		1 ** * * * * * * * * * * * * * * * * *	<u></u>
	Complete if the organization answered "Yes" to Fe	orm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)			···	
(8)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			<u> </u>
Part X	Other Liabilities.	· · · · · · · ·	<u> ▶</u>	<u></u>
	Complete if the organization answered "Yes" to Foline 25.	orm 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability (b) Book value	<u> </u>		
(1) Federal in				
(2)				
(3)		-		
(4)		-	,	
(5)				
(6)		·		
(7)			*	
(8)		· ·	z'`	
(9)			,	
	o) must equal Form 990, Part X, col (B) line 25) ▶			
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the foo	tnote to the organization	n's financial stateme	ents that reports the
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740). C	neck here if the text of	tne tootnote has bee	n provided in Part XIII 💢

Part	·			Return.	
41	Complete if the organization answered "Yes" to Form 990, I		line 12a.	T	2 01 6 706
	Total revenue, gains, and other support per audited financial statements			1	2,816,786
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 - 1			
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		8,254		
е	Add lines 2a through 2d			2e	8,254
3	Subtract line 2e from line 1			3	2,808,532
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	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	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	<u> </u>	5	2,808,532
Part				er Retur	n.
	Complete if the organization answered "Yes" to Form 990,	Part IV	, line 12a.		
1	Total expenses and losses per audited financial statements			1	2,770,968
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			647	
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)		8,254		
е	Add lines 2a through 2d			2e	8,254
3	Subtract line 2e from line 1			3	2,762,714
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		2.32	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b	-	· · · · · ·	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Iii	ne 18.) .	· · · · · · ·	5	2,762,714
Part			<u></u>	1	
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	nd 4; Pa	rt 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	t to prov	vide any additional in	nformatio	n.
PART	XI, LINE 2D AND PART XII, LINE 2D - DIRECT EXPENSES OF	FUND	RAISING EVENTS		
PART	X - LINE 1 - THE AGENCY FOLLOWS AUTHORIATIVE GUIDANCE	TSSUED	BY THE FINANCI	TAL ACC	OUNTING
STAND	ARDS BOARD (FASB) THAT CLARIFIES THE ACCOUNTING FOR UN	CERTAT	NTY IN INCOME T	TAXES R	ECOGNIZED IN
	The Bollie (1105) 11111 Oblivities 1110 1100000111110 1011			12120	
AN EN	TITY'S FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION	מעית זאר	PESHOID OF MODE-	TTKETV	_THAN_NOT TO
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DE 30	STAINED UPON EXAMINATION. MEASUREMENT OF THE TAX UNCE	KIAINI	1 OCCURS IF IN	L RECOG	NIIION
тыргс	HOLD HAS NOW BEEN MEM. THIS CHIDANCE ALSO ADDRESSES D	EDECOC	NITOTON CINCCII		M TMEEDERE
THRES	HOLD HAS NOT BEEN MET. THIS GUIDANCE ALSO ADDRESSES D	ERECOG	ENTITION, CLASSIE	TCATIO	N, INTEREST
7.10 F	DINAL MIEG. DIGGLOGUED AND MENNGIMION MURI AGENCY COND				
AND P	ENALTIES, DISCLOSURE, AND TRANSITION. THE AGENCY COND	OCTS E	BUSINESS SOLELY	IN THE	U.S. AND AS
A RES	ULT FILES INFORMATION RETURNS FOR U.S. AND ILLINOIS.	IN THE	NORMAL COURSE	OF BUS	INESS THE
AGENC	Y IS SUBJECT TO EXAMINATION BY TAXING AUTHORITIES. TH	E AGEN	ICY'S INFORMATIO	ON RETU	RNS FOR THE
	GUDGEOUENE EO OO11 ARE OREN DY GELEUER DOD DEVE				
YEARS	SUBSEQUENT TO 2011 ARE OPEN, BY STATUTE, FOR REVIEW B	Y AUTH	ORITIES. HOWEV	ER, AT	PRESENT,
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TUAL	THE AGENCY CURRENTLY FILES OR HAS FILED WITH.				
***	END OF FORM ***				

SCHEDULEI (Form 990)

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

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 36-3909467 **№**

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General Information on Grants and Assistance	
Part	

COMMUNITIES IN SCHOOLS OF AURORA, INC

Department of the Treasury Internal Revenue Service Name of the organization

⊠ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

1 (a) Name and address of organization (b) EIN (c) IRC section or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) QUAD COUNTY URBAN LEAGUE AURORA, IL	36-2882693	501(c) (3)	54,342	0	N/A	N/A	SCHOOL BASED SERVICES
(2) AURORA UNIVERSITY AURORA, IL	36-2166964	501(c)(3)	54,500	0	N/A	N/A	SCHOOL BASED SERVICES
(3) TRIPLE THREAT ARORA, IL	26-2002128	501(c)(3)	50,528	0	N/A	N/A	SCHOOL BASED SERVICES
(4) BREAKING FREE AURORA, IL	36-2957395	501(c)(3)	28,700	0	N/A	N/A	SCHOOL BASED SERVICES
(5) FOX VALLEY PARK DISTRICT AURORA, IL	36-3124632	501(c)(3)	9,555	0	N/A	N/A	SCHOOL BASED SERVICES
(6) WEST AURORA DISTRICT 129 AURORA, IL	36-6004750	501(c)(3)	15,525	0	N/A	N/A	SCHOOL BASED SERVICES
(7) DEPT OF NATURAL RESOURCES SPRINGFIELD, IL	37-1349602	501(c)(3)	29,207	0	N/A	N/A	SCHOOL BASED SERVICES
(8) FOX VALLEY ORCHESTRA AURORA, IL	- 27-2114464	501(c)(3)	28,500	0	N/A	N/A	SCHOOL BASED SERVICES
(9) TAKING CONTROL AURORA, IL	NOT AVAILABLE	501(c)(3)	13,530	0	N/A	N/A	SCHOOL BASED SERVICES
(10) CHICAGO SINFONIETTA DEKALB, IL	NOT AVAILABLE	501(c)(3)	12,800	0	N/A	N/A	SCHOOL BASED SERVICES
(11) AFRICAN AMRICAN MEN OF UNITY AURORA, IL		501(c)(3)	6,546	0	N/A	N/A	SCHOOL BASED SERVICES
(12) ROBERT CROWN CENTER HINSDALE, IL	36-2608742	501(C)(3)	7,173	0	N/A	N/A	SCHOOL BASED SERVICES
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	n 501(c)(3) and gov	rernment organiza	tions listed in the li	ne 1 table	•		14

Enter total number of other organizations listed in the line 1 table For paperwork Reduction Act Notice, see the Instructions for Form 990.

CONTINUED ON NEXT PAGE

Schedule I (Form 990) (2014)

*** CONTINUED ***

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

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OMB No 1545-0047

Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer Identification number

□ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 36-3909467 the selection criteria used to award the grants or assistance? General Information on Grants and Assistance COMMUNITIES IN SCHOOLS OF AURORA, INC Part I

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THREE FIRE COUNCIL, BSA ST. CHARLES, IL	36-3831877	501(c)(3)	16,167	0	N/A	N/A	SCHOOL BASED SERVICES
(2) BRIDGING THE GAP AURORA, IL	32-0092603	501(c)(3)	6,851	0	N/A	N/A	SCHOOL BASED SERVICES
(3)							
(4)							
(5)				,			
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and go organizations liste	vernment organizat d in the line 1 table	tions listed in the li	ne 1 table			A . A .
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructio	ns for Form 990.					Schedule I (Form 990) (2014)

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(f) Description of non-cash assistance Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed N/A (e) Method of valuation (book, FMV, appraisal, other) BOOK GRANTS ARE MONITORED BY ONGOING CONTACT WITH THE GRANTEES THROUGH PERIODIC REPORTING AND FOLLOW-UP. (d) Amount of non-cash assistance 7,500 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 1 SCHOLARSHIPS Part III Part IV ~ က 4 Ŋ 9

Schedule I (Form 990) (2014)

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization	Employer identification number
COMMUNITIES IN SCHOOLS OF AURORA, INC	36-3909467
FORM 990 - PART VI - ITEM 11	
THE FORM IS AVAILABLE TO ALL BOARD MEMBERS, BUT DUE TO TIMING OF TI	LING THE 990 AND BOARD
MEETINGS, THIS MAY NOT OCCUR UNTIL AFTER THE 990 HAS BEEN FILED	
FORM 990 - PART VI - ITEM 13	
THE ORGANIZATION DOES NOT CURRENTLY HAVE A WHISTLE BLOWER POLICY, B	OUT ARE IN THE PROCESS
OF DEVELOPING AND IMPLEMENTING ONE	
FORM 990 - PART VI - ITEM 14	
THE ORGANIZATION DOES NOT CURRENTLY HAVE A RECORD RETENTION POLICY,	BUT ARE IN THE PROCESS
OF DEVELOPING AND IMPLEMENTING ONE.	
FORM 990 - PART VI - ITEM 15	
EXECUTIVE DIRECTOR COMPENSATION IS DETERMINED BY THE EXECUTIVE COMM	
OF LOCAL COMPENSATION PRACTICES. THE EXECUTIVE DIRECTOR USES THE S	AME BASIS FOR OTHER STAFF
FORM 990 - PART VI - ITEM 19	
FINANCIAL INFORMATION IS MADE AVAILABLE UPON REQUEST OR THROUGH OTH	ER WEBSITES. ALL
INFORMATION IS AVAILABLE UPON REQUEST DURING NORMAL BUSINESS HOURS	
FORM 990 - PART VI - ITEM 28C	
CERTAIN MEMBERS OF THE BOARD OF DIRECTORS ARE EMPLOYEES OF SUBRECEI	PIENTS OF GRANTS MADE BY
THE AGENCY. OTHER MEMBERS OF THE BOARD ARE EMPLOYEES OF A LOCAL GO	VERNMENT THAT PROVIDED
FUNDING TO THE AGENCY.	
*** END OF FORM ***	