Return of Organization Exempt From Income Tax 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.

■ Do not enter social security numbers and the latest information. Department of the Tressury Internal Revenue Service

Open to Public Inspection

<u>ч г</u>	or the	2017 calendar year, or tax year beginning JUL 1, ZUI/ and	ending C	<u> </u>	<u> </u>
3 C	heck if oplicable	C Name of organization		D Employer ider	tification number
_	Addres	B ODESMED WAITEGAN DETTELODMENM COST INTO	37		
┝═	Johango Name chango		<u>N</u>	4 4 -	4007745
<u> </u> =	_ichang: Tinitial		I		4807745
느	Initial Ireturn	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
L	Final return/ termin	13 N GENESEE ST			7-440-2021
	ated	City or town, state or province, country, and ZiP or loreign postal code	•	G Gross receipts \$	289,817.
<u> </u>	Ameno return			H(a) Is this a grou	
	Applic	F Name and address of principal officer:MICHAEL EDGAR		for subordina	tes? Yes X No
	pendir	SAME AS C ABOVE	7 6	H(b) Are all subordina	les included? Yes No
ΙT	ax-exe	empt status: X 501(c)(3)	or 527	if "No," attac	h a list. (see instructions)
J V	/ebsit	e: N/A	<i>U</i>	H(c) Group exemp	
		organization: X Corporation	L Year		2 M State of legal domicile: IL
	rt I	Summary \			1
		Briefly describe the organization's mission or most significant activities: GWDC	FOSTI	ERS ECONOM	rc
Activities & Governance		DEVELOPMENT IN CHALLENGED COMMUNITIES BY			
ğ		Check this box if the organization discontinued its operations or dispo			
ğ				1	l I .
ĝ				r	3
•		Number of independent voting members of the governing body (Part VI, line 1b)			
jes	ĺ	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		T T	5 0
ĬŽ		Total number of volunteers (estimate if necessary)	••••••		6 0
Act		Total unrelated business revenue from Part VIII, column (C), line 12			7a ' 0.
	b	Net unrelated business taxable income from Form 990 Tine 84 1/FD	<u></u>	<u></u>	7ь О.
		Contribution and contribution (Sept.) (III. Sept. 4b.)	21 ⊢	Prior Year	Current Year
e l	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) MAR 2 0 2019	ši ∟	110,67	
Revenue	9	Program service revenue (Part VIII, line 2g) MAK Z U ZUI3	ģ.ļ	3,46	182,561.
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>		0.
E.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 15 pp [14]	L		0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		114,13	5. <u>289,817.</u>
S	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.
Q	14	Benefits paid to or for members (Part IX, column (A), line 4)	[(0.
₽	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	98,51	38,113.	
SCAHHEE		Professional fundraising fees (Part IX, column (A), line 11e)			0.
		Total fundraising expenses (Part IX, column (D), line 25)	0.		
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		389,36	527,515.
MAY		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		487,88	
≺		Revenue less expenses. Subtract line 18 from line 12		<373,74	
58				ginning of Current Ye	
	20	Total assets (Part X, line 16)		170,50	
HOBSELS OF		Total liabilities (Part X, line 26)		901,60	
鹞		Net assets or fund balances. Subtract line 21 from line 20		<731.09	
Pa	rt II	Signature Block			1
_		Ities of perjury, I declare that I have examined this return, including accompanying schedule	es and staten	nents, and to the best	of my knowledge and belief, it is
	•	t, and complete. Declaration of prepares (other than officer) is based on all information of w		•	
		h///////		3-6	20/9
Sigr		Stynatere obefficer		Date	
Her		SHAI LOTHAN, CEO			
161					
	•	Type or print name and title .			
	•		- 	Date Check	PTIN
higo		Print/Type preparer's name Preparer's signature		l w]
Paid		Print/Type preparer's name MICHAEL A. RUBIN Preparer's signature		03/05/19 self-e	nployed P00201154
) rep	arer	Print/Type preparer's name MICHAEL A. RUBIN Firm's name LEAF, DAHL AND COMPANY, LTD.		l w	nployed P00201154
) rep		Print/Type preparer's name MICHAEL A. RUBIN Firm's name LEAF, DAHL AND COMPANY, LTD. Firm's address 666 DUNDEE ROAD, BUILDING 600		03/05/19 sett-el Firm's EIN	P00201154 36-2742663
)se Jac	arer Only	Print/Type preparer's name MICHAEL A. RUBIN Firm's name LEAF, DAHL AND COMPANY, LTD. Firm's address 666 DUNDEE ROAD, BUILDING 600 NORTHBROOK, IL 60062		03/05/19 sett-el Firm's EIN	P00201154 36-2742663 773-545-909.0
rep Jae Jay	arer Only the if	Print/Type preparer's name MICHAEL A. RUBIN Firm's name LEAF, DAHL AND COMPANY, LTD. Firm's address 666 DUNDEE ROAD, BUILDING 600 NORTHBROOK, IL 60062 RS discuss this return with the preparer shown above? (see instructions)	(03/05/19 sett-el Firm's EIN	773-545-909.0° X Yes No
rep Jae Jay	arer Only the if	Print/Type preparer's name MICHAEL A. RUBIN Firm's name LEAF, DAHL AND COMPANY, LTD. Firm's address 666 DUNDEE ROAD, BUILDING 600 NORTHBROOK, IL 60062 RS discuss this return with the preparer shown above? (see instructions)	ions.	03/05/19 seff-ei Firm's EIN Phone no.	773-545-909.0° X Yes No Form 990 (2017)

	1990 (2017) GREATER WAUKEGAN DEVELOPMENT COALITION 45-480	7745	Page 2
Pai	rt 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		
	GWDC FOSTERS ECONOMIC DEVELOPMENT IN CHALLENGED COMMUNITIES BY	•	
	SUPPORTING, INCUBATING, OR CREATING CORE BUSINESSES, PURSUING		
		TON	
	CATALYTIC REAL ESTATE DEVELOPMENT PROJECTS AND ATTRACTING FORE	ILGN	
	DIRECT INVESTMENT AT THE LOCAL LEVEL.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Vas	X No
Ū		163	140
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	expenses, a	nd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$292, 183. including grants of \$) (Revenue \$	28.0	566.)
	GWDC INNOVATES BY CAPACITY BUILDING - TECHNICAL ASSISTANCE AND		
	TO RESOURCE BELOW CURRENT MARKET RATES HAVE BEEN PROVIDED TO I		<u> </u>
		10CHT	
	BUSINESSES AND ENTERPRISES THROUGH THE LAKE COUNTY TECH HUB.		
	· · · · · · · · · · · · · · · · · · ·		
4b	(Code) (Expenses \$ 95,390 · including grants of \$) (Revenue \$	15,0	509.)
	GWDC DEVELOPS, INITIATES, SUPPORTS, PROMOTES REAL ESTATE DEVEL		
	PROJECTS WITH THE POTENTIAL TO SERVE AS A CATALYST FOR ADVANCE		<u> </u>
	REDEVELOPMENT EFFORTS AND FOR INVESTMENTS INTO UNDERSERVED AND	<u> </u>	
	DISTRESSED COMMUNITIES.		
		-	
4c	(Code) (Expenses \$178,055including grants of \$) (Revenue \$	138,	286.)
	GWDC CELEBRATES - ORGANIZE COMMUNITY EVENTS ATTRACTING LOCAL A		·
	REGIONAL AUDIENCES THROUGH THEMED MUSIC FESTIVALS AND EVENTS.		
	REGIONAL AUDIENCES INCOUGH INEMED MUSIC FESTIVALS AND EVENTS.		
4d	Other program services (Describe in Schedule O)		
→ u		1	
	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 565,628.		<u> </u>
		Form 99	90 (2017)

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	1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	İ		
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			17
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		37
_	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space.	6		<u>X</u>
'	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			
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		- 21
Ŭ	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	40-		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		Α
U	If "Yes," and if 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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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 assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	_19	000	X
		Form	990	つい171

	•		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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 during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	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	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u> X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	,		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
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		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	99U ((2017)

O17) GREATER WAUKEGAN DEVELOPMENT COALITION
Statements Regarding Other IRS Filings and Tax Compliance

	. Check if Schedule O contains a response or note to any line in this Part V				<u> </u>
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter 0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	j		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming			
	(gambling) winnings to prize winners?		1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 0]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne 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 contribut	ions or gifts			
	were not tax deductible?	· ·	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	, , ,	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	,	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11a			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against		1		ļ
	amounts due or received from them)	11b]		ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b]		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b	<u></u>	

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

	, to mile of, early and account accounts an amount account and account accounts and account account accounts and account ac						
	Check if Schedule O contains a response or note to any line in this Part VI			X.			
Sec	tion A. Governing Body and Management						
4.	Catachles a reliance for the control of the control		Yes	No			
та	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 as if the governing.						
	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.						
	Enter the number of voting members included in line 1a, above, who are independent 1b 4						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			. •			
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		_X_			
3		2		X			
4	of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<u>3</u> 4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		X			
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_0					
7 4	more members of the governing body?	7a		Х			
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	/ a					
٠	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	7.0					
	The governing body?	8a	Х				
	Each committee with authority to act on behalf of the governing body?	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	05					
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		X			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	ın Schedule O how this was done	12c		X			
13	Did the organization have a written whistleblower policy?	13		X			
14	Did the organization have a written document retention and destruction policy?	14		X			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a		X			
b	Other officers or key employees of the organization	15b		<u>X</u>			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			••			
	taxable entity during the year?	16a		<u> X</u>			
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						
500	exempt status with respect to such arrangements?	16b					
	tion C. Disclosure						
17 40	List the states with which a copy of this Form 990 is required to be filed IL		la.				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvailab	ie				
	for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. X Upon request. Other (explain in Schedule O)						
10		linas	n ol				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	ıman	الفاد				
20	statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records						
20	MICHAEL EDGAR - 847-440-2021						
	13 N GENESSEE ST. WALKEGAN II. 60085			•			

Form 990 (2017)							

GREATER WAUKEGAN DEVELOPMENT COALITION

45-4807745

Page 7

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

(A) Name and Title	(B) Average	(do	not c	((Pos heck	C) ition more	l than	one	· (D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box, unless person is both officer and a director/trust			is bot or/trus	h an tee)	compensation from the	compensation from related	amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Отпсел	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL EDGAR	40.00									
PRESIDENT		X						0.	0.	0
(2) CARYN KAHN	40.00									
TREASURER		X						0.	0.	0
(3) SHAI LOTHAN	20.00									
SECRETARY		X			-			0.	0.	0
(4) ROY CZAJKOWSKI	5.00									
DIRECTOR		X						0.	0.	0
								-		

\$100,000 of compensation from the organization

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

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (B) (D)
Revenue excluded
from tax under
sections
512 - 514 Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 107,256. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 107,256 h Total. Add lines 1a-1f Business Code 2 a EVENTS 900099 138,286. 138,286 Program Service Revenue **b** OTHER PROGRAM SERVICES 900099 44,275 44,275. f All other program service revenue 182.561 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a-11d

0.

Total revenue See instructions

289,817.

182,561

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			omplete column (A)	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			3	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,853.	30,853.		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	7,260.	7,260.		
11	Fees for services (non-employees)				
а	Management				
b	Legal	34,588.	34,588.		
С	Accounting	7,736.	7,736.		
d					
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	, ,	20 100	20 100		
	column (A) amount, list line 11g expenses on Sch 0)	38,190.			
12	Advertising and promotion	26,268.			
13	Office expenses	14,306.	14,306.		
14	Information technology				
15	Royalties	148,031.	148,031.		
16	Occupancy Travel	15,501.	15,501.		
17	<u></u>	13,301.	13,301.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	54,106.	54,106.		
20	Interest	34,100.	74,100.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,611.	6,611.		
23	Insurance	4,123.			.
24	Other expenses Itemize expenses not covered		1,1201		
_ `	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
а	PROGRAM EVENT EXPENSES	178,055.	178,055.		
b		170,033.	170,033.		
C					
d					
	All other expenses	·			
25	Total functional expenses Add lines 1 through 24e	565,628.	565,628.	0.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

Part >	X	Balance Sheet		
		Check if Schedule O contains a response or note to any line in this Part X		
			(A) Beginning of year	(B) End of year
1	1	Cash · non-interest-bearing	962. 1	11,332.
2	2	Savings and temporary cash investments	2	
3	3	Pledges and grants receivable, net	3	
4	4	Accounts receivable, net	3,989. 4	6,989.
5	5	Loans and other receivables from current and former officers, directors,		
		trustees, key employees, and highest compensated employees. Complete		
		Part II of Schedule L	5	
ε	5	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		
ې ا		employees' beneficiary organizations (see instr). Complete Part II of Sch L	6	
Assets	7	Notes and loans receivable, net	7	
ع ۶	3	Inventories for sale or use	8	
9	9	Prepaid expenses and deferred charges	9	
10	Эа	Land, buildings, and equipment cost or other		
		basis Complete Part VI of Schedule D Less accumulated depreciation 10a 94,874. 10b 24,187.	<u>,</u>	
	b	Less accumulated depreciation 10b 24, 187.	77,299. 10c	70,687.
11	1	Investments - publicly traded securities	11	
12	2	Investments - other securities See Part IV, line 11	12	
13	3	Investments · program-related See Part IV, line 11	13	
14	4	Intangible assets	14	
15	5	Other assets See Part IV, line 11	88,258. 15	88,258.
16	<u> </u>	Total assets. Add lines 1 through 15 (must equal line 34)	170,508. 16	<u> 177,266.</u>
17	7	Accounts payable and accrued expenses	17	20,162.
18	В	Grants payable	18	
19	9	Deferred revenue	19	
20	0	Tax-exempt bond liabilities	20	
21	1	Escrow or custodial account liability Complete Part IV of Schedule D	21	
ဖွ 22	2	Loans and other payables to current and former officers, directors, trustees,		
Liabilities		key employees, highest compensated employees, and disqualified persons		
ia de		Complete Part II of Schedule L	813,788. 22	1,131,606.
- 23	3	Secured mortgages and notes payable to unrelated third parties	23	
24	4	Unsecured notes and loans payable to unrelated third parties	24	
25	5	Other liabilities (including federal income tax, payables to related third		
		parties, and other liabilities not included on lines 17-24) Complete Part X of		20 402
	_	Schedule D	87,814. 25	32,403.
26	5	Total liabilities. Add lines 17 through 25	901,602. 26	1,184,171.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and		
Se		complete lines 27 through 29, and lines 33 and 34.	721 004	1 006 005
<u>ĕ</u> 27		Unrestricted net assets	<731,094.>27	<1,006,905.
B 28		Temporarily restricted net assets	28	
일 29	9	Permanently restricted net assets	29	
편		Organizations that do not follow SFAS 117 (ASC 958), check here		
ō _	_	and complete lines 30 through 34.		
30		Capital stock or trust principal, or current funds	30	
Ϋ́ 31		Paid-in or capital surplus, or land, building, or equipment fund	31	
Net Assets or Fund Balances		Retained earnings, endowment, accumulated income, or other funds	32	-1 000 005
- 33		Total net assets or fund balances	<731,094.>33	<1,006,905.
34	4	Total liabilities and net assets/fund balances	170,508. 34	177,266.

	990 (2017) GREATER WAUKEGAN DEVELOPMENT COALITION	45-4	807745	Pa	ge 12
Pa	rt 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)	1		<u>9,8</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u> 28.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	< <u>27</u>	<u>5,8</u>	<u> 11.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> <73</u>	<u>1,0</u>	<u>94.</u> >
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<1,00	6,9	05.>
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both	·			
	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	e audit.			
	review, or compilation of its financial statements and selection of an independent accountant?	,	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O	\ 		_
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?	J - 1 - 3 - 1	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit	- 34		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		

Form **990** (2017)

(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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

		GREA	TER WAUKEG	<u>AN DEVELOPME</u>	NT CO	<u>ALITI</u>	ON 4	<u> 5-4807745</u>
Pa	rt I	Reason for Public (Charity Status (A	All organizations must co	mplete th	s part) Se	e instructions	
he	organi	zation is not a private found	ation because it is (For lines 1 through 12, c	heck only	one box)		
1	الت	A church, convention of ch					<i>'</i>	\U
2	一	A school described in secti) /
3	\equiv	A hospital or a cooperative		•			.,	/
	=	·	· ·				•	
4	ш	A medical research organization	ation operated in col	njunction with a nospital	described	i iii sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,
		city, and state		<u> </u>				
5		An organization operated for		llege or university owner	d or operat	ed by a go	overnmental unit descrit	oed in
	_	section 170(b)(1)(A)(iv). (C	complete Part II)					
6	\sqsubseteq	A federal, state, or local gov	vernment or governn	nental unit described in s	section 17	'0(b)(1)(A)	(v).	
7		An organization that norma	lly receives a substa	ntial part of its support f	rom a gov	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II)					
8		A community trust describe	ed in section 170(b)	1)(A)(vi), (Complete Part	t II)			
9		An agricultural research org				ed in coniu	inction with a land-grant	college
_		or university or a non-land-g						
		university	grant concept or agric	altare (see instructions)	Littor tilo	marrio, city	, and state of the coneg	JC 01
40	\mathbf{x}		!!					
10	بما	An organization that norma						
		activities related to its exen						
		income and unrelated busing		(less section 511 tax) fro	om busine	sses acqu	ired by the organization	after June 30, 1975
		See section 509(a)(2). (Cor	•					
11	<u></u>	An organization organized a	and operated exclus	ively to test for public sa	fety See :	section 50)9(a)(4).	
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform t	he functio	ns of, or to carry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2)	See section 509(a)(3) . (Check the box in
		lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	s 12e, 12f, and 12g	
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its sup	ported org	anization(s), typically by	/ giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the	supporting
		organization You must o						• • •
b		Type II. A supporting org	•		tion with it	s supporti	ed organization(s), by ha	avina
_		control or management o						
		organization(s) You mus			arric perse	ins that ce	millor or manage the say	pported
_		Type III functionally inte	•		ın connoc	tion with	and functionally intograt	ad with
C	L		•					eu with,
		its supported organization				-		-11-1
d	L	Type III non-functionally						
		that is not functionally int	-	= -	-			tiveness
	_	requirement (see instructi		-				
е	L	Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	ı Type I, Type II, Type III	
		functionally integrated, or	Type III non-functio	nally integrated supporti	ing organiz	ation		
f	Ente	r the number of supported o	organizations					
g		ide the following information				aladia a Vallad		
	(1) Name of supported	(II) EIN	(III) Type of organization (described on lines 1 10	(iv) is the orga in your governi	ng document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
							**	
								
		· 						
								-
`^+^	.1				I		i	1

	nedule A (Form 990 or 990-EZ) 2017 G						745 Page 2
P	Support Schedule for						
	, (Complete only if you checke				on failed to qualify	under Part III If the o	organization
_	fails to qualify under the tests	s listed below, plea	ase complete Part I	III)			
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf				l	<i>i</i>	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
<u>Se</u>	ction B. Total Support						
Cal	endar year (or fiscal year beginning ın) 📂	(a) 2013	(b) 2014 /	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3)	
	organization, check this box and stor	/					▶ □
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2017 (I	ine 6, column (f) d	ivided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	%
16	a 33 1/3% support test - 2017/. If the o	organization did no	ot check the box or	n line 13, and line	14 is 33 1/3% or	more, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				ightharpoons
ŀ	b 33 1/3% support test - 2016. If the c	organization did no	ot check a box on I	ine 13 or 16a, and	d line 15 is 33 1/39	% or more, check this	box
	and stop here. The organization qual	ifies as a publicly	supported organiza	ation			ightharpoons
178	a 10% -facts-and-circumstances tes	t - 2017. If the org	anization did not c	heck a box on lin	e 13, 16a, or 16b,	and line 14 is 10% o	r more,
	and if the organization meets the "fac	ts and-circumstan	nces" test, check th	nis box and stop I	here. Explain in Pa	art VI how the organiz	ation
	meets the "facts and circumstances"					-	ightharpoons
ı	b 10% -facts-and-circumstances tes		· ·		-	17a, and line 15 is 10	0% or
	more, and if the organization meets the	-					
	organization meets the "facts and circ						>
18	Private foundation. If the organization						▶ □

Schedule A (Form 990 or 990 EZ) 2017 GREATER WAUKEGAN DEVELOPMENT COALITION 45-4807745 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Sup	port						
Calendar year (or fiscal year be	ginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributio	ns, and						
membership fees receive	ed (Do not	:					
include any "unusual gra	ants ")	21,015.	75,942.	650.	110,672.	107,256.	315,535.
2 Gross receipts from adm	nissions,						
merchandise sold or ser							
formed, or facilities furni							
any activity that is relate organization's tax-exemp							
3 Gross receipts from acti	· · ·						
are not an unrelated trac	;						
iness under section 513							
4 Tax revenues levied for t	}						
ization's benefit and eith	· 1				j		
or expended on its beha		13,925.	11,774.	10,573.	3 161	182 561	222,297.
5 The value of services or		13,723.	11,//4.	10,373.	2,404.	102,301.	_444,431.
furnished by a governme		1					
the organization without]					
	· · ·	34,940.	87,716.	11,223.	114,136.	200 017	E27 022
6 Total. Add lines 1 through	*	34,340.	01,110.	11,223.	114,130.	289,817.	537,832.
7a Amounts included on lin 3 received from disqualit		19,965.	69,492.		24 000	100 000	010 457
b Amounts included on lines 2 and	· · ·	13,303.	09,494.		24,000.	100,000.	213,457.
from other than disqualified pers							
exceed the greater of \$5,000 or	1% of the						0
amount on line 13 for the year	+	10 065	CO 400		24 000	100 000	0.
c Add lines 7a and 7b	}	19,965.	69,492.		24,000.	100,000.	213,457.
8 Public support. (Subtract line Section B. Total Support			[324,375.
Calendar year (or fiscal year be	aiuuiua iu) ► 🏱	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6		34,940.	87,716.	11,223.	114,136.	289,817.	537,832.
10a Gross income from inter- dividends, payments red							
securities loans, rents, re	oyalties,						
and income from similar	}-						
b Unrelated business taxable							
(less section 511 taxes) from							
acquired after June 30, 197	5						
c Add lines 10a and 10b							
11 Net income from unrelate activities not included in			İ				
whether or not the busin							
regularly carried on						•	
12 Other income Do not incorr loss from the sale of contract.	-						
assets (Explain in Part V							
13 Total support (Add lines 9, 16	0c, 11, and 12)	34,940.	87,716.	11,223.	114,136.	289,817.	537,832.
14 First five years. If the Fo	orm 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	ix year as a section	n 501(c)(3) organız	ation,
check this box and stop							▶ □
Section C. Computation	on of Publi	c Support Per	centage	_			
15 Public support percenta	ge for 2017 (lıı	ne 8, column (f) div	vided by line 13, co	olumn (f))		15	60.31 %
16 Public support percenta						16	<u>%</u>
Section D. Computation	on of Inves	tment Income	Percentage		··-··		
17 Investment income perc	entage for 20	17 (line 10c, colum	in (f) divided by line	e 13, column (f))	ļ	17	.00 %
18 Investment income perc	entage from 2	016 Schedule A, F	Part III, line 17			18	%
19a 33 1/3% support tests	- 2017. If the	organization did no	ot check the box o	n line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
more than 33 1/3%, che	ck this box an	d stop here. The	organization qualif	res as a publicly s	supported organiza	ition	$\triangleright X$
b 33 1/3% support tests	- 2016. If the	organization did no	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	and
line 18 is not more than :	33 1/3%, ched	ck this box and sto	p here. The organ	nzation qualifies a	s a publicly suppo	rted organization	ightharpoons
20 Private foundation. If th	ie organization	n did not check a b	oox on line 14, 19a	, or 19b, check th	is box and see ins	tructions	

Schedule A (Form 990 or 990 EZ) 2017 GREATER WAUKEGAN DEVELOPMENT COALITION 45-4807745 Page 4

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 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.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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
- c 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
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- 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
- c 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
- 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)
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 or 990-EZ)
- 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.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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)

Yes	No
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	Yes On-FZ

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Pai	rt IV Supporting Organizations (continued)		T	
	The first and the first		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	_	
	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. tion B. Type I Supporting Organizations	11c	I	L
	ypo copporating organization		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			1,10
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		ĺ
	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		
Sec	tion 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			l
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1_1_	<u> </u>	L
Sec	tion 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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	 	
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	-	-
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			
500	supported organizations played in this regard tion E. Type III Functionally Integrated Supporting Organizations	3	1	
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions			
1 a	The organization satisfied the Activities Test Complete line 2 below	>).		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	struction	e)	
2	Activities Test Answer (a) and (b) below.	30,000,000	Yes	No
– a			1.00	
-	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	Parent of Supported Organizations Answer (a) and (b) below.			
	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? Provide details in Part VI.	3a		
b	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	<u>L</u>	
73202	5 10-08-17 Schedule A (Form	990 or 9	90-EZ) 201

Part V	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	
	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI) See instructions
c	other Type III non functionally integrated supporting organizations must c	omplete Se	ctions A through E	
ection A - A	Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	ort-term capital gain	1		
2 Recove	eries of prior-year distributions	2		
3 Other o	gross income (see instructions)	3		
4 Add lin	es 1 through 3	4		
5 Deprec	ciation and depletion	5		
6 Portion	n of operating expenses paid or incurred for production or			
collecti	ion of gross income or for management, conservation, or			
mainte	nance of property held for production of income (see instructions)	6		
7 Other e	expenses (see instructions)	7		
B Adjust	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection B - f	Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggreg	gate fair market value of all non-exempt-use assets (see		-	
ınstruc	tions for short tax year or assets held for part of year)			
a Averag	e monthly value of securities	1a		
b Averag	e monthly cash balances	1b		
c Fair ma	arket value of other non-exempt-use assets	1c		
d Total (a	add lines 1a, 1b, and 1c)	1d		
e Discou	unt claimed for blockage or other			
factors	(explain in detail in Part VI)			
2 Acquis	ition indebtedness applicable to non-exempt-use assets	2		
3 Subtra	ct line 2 from line 1d	3		
4 Cash d	deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see ins	structions)	4		
5 Net val	lue of non-exempt use assets (subtract line 4 from line 3)	5		
5 Multipl	y line 5 by 035	6		
7 Recove	eries of prior-year distributions	7		
<u> Minimi</u>	um Asset Amount (add line 7 to line 6)	8		
ection C - I	Distributable Amount			Current Year
1 Adjuste	ed net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 8	35% of line 1	2		
3 Minimu	um asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter g	reater of line 2 or line 3	4		
5 Income	e tax imposed in prior year	5		
6 Distrib	outable Amount. Subtract line 5 from line 4, unless subject to			
emerge	ency temporary reduction (see instructions)	6		

instructions)

Schedule A (Form 990 or 990 EZ) 2017 GREATER WAUKEGAN DEVELOPMENT COALITION 45-4807745 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D. - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions 9 Distributable amount for 2017 from Section C, line 6 10 Line 8 amount divided by line 9 amount (11) (m)Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2017 Amount for 2017 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions 3 Excess distributions carryover, if any, to 2017 **b** From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount Carryover from 2012 not applied (see instructions) J Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines 3j and 4c 8 Breakdown of line 7 a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016

e Excess from 2017

Schedule A	(Form 990 or 990-E.	Z) 2017 GREAT	ER WAUKEGA	W DEAEPORM	ENT COALITION	45-4807745 Page 8
Part VI	line 1, Part IV, Section A, Section D, lines 5,	lines 1, 2, 3b, 3c, tion D, lines 2 and	4b, 4c, 5a, 6, 9a, 9b, 3, Part IV, Section E	, 9c, 11a, 11b, and 11 , lines 1c, 2a, 2b, 3a,	II, line 10, Part II, line 17a c c, Part IV, Section B, lines and 3b, Part V, line 1, Part lete this part for any addition	or 17b, Part III, line 12, 1 and 2, Part IV, Section C, V, Section B, line 1e, Part V,
-	(See instructions)	<u> </u>		<u> </u>		
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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB <u>No</u> 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Part II Conservation Essements. Complete if the organization of the form g90, Part IV, line 5 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 5 Did the organization inform all donors and donor advisors in writing that the asserts held in donor advised funds are the organization inform all donors and donor advisors in writing that the asserts held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor of ordinary or you then purpose conferring impermissable private benefit? 1 Purpose(s) of conservation Essements. Complete if the organization naswered "Yes" on Form 990, Part IV, line 7 1 Purpose(s) of conservation essements held by the organization check all that apply) 1 Preservation of land for public use (e.g., recreation or education) 2 Complete lines 2s through 26 of the organization held a qualified conservation establishment of a conservation essement on the last day of the tax year 2 Complete lines 2s through 26 of the organization held a qualified conservation or one-value essement on the last day of the tax year 3 Total number of conservation essements 5 Total acreage restricted by conservation essements 5 Total acreage restricted by conservation essements 6 Number of conservation essements madefied, transferred, released, extinguished, or terminated by the organization during the tax year 8 Number of conservation essements modified, transferred, released, extinguished, or terminated by the organization during the tax year 9 Number of conservation essements modified, transferred, released, extinguished, or terminated by the organization during the year by a public to conservation essements before the conservation essements during the year by a public to conservation essements or decided by conservation essements and		GREATER WAUKEGAN D				<u>45-480774</u>	15
Total number at end of year	Par			Other Similar Fund	ds or Account	S. Complete if the	
2 Aggregate value of contributions to (during year) 2 Aggregate value of contributions to (during year) 3 Aggregate value of or ontributions to (during year) 4 Aggregate value of contributions to (during year) 4 Aggregate value of or ontributions to (during year) 5 Did the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization reports all grantees, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 1 Purpose(b) of conservation easements belt 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 Protection of natural habitat Preservation of a conservation easement on the liast day of the tax year Total number of conservation easements held a qualified conservation easement on the liast day of the tax year Held at the End of the Tax Year Total number of conservation easements in a certified historic structure included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year		organization answered "Yes" on Form 990, Part IV, lin					
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform, subject to the organization's exclusive legal control? 9 Ves No 6 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit? 1 Purposels of conservation easements held by the organization check all that apply) 1 Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure 2 Complete lines 22 through 23 of the organization held a qualified conservation or a certified historic structure 3 Preservation of logen space 4 Complete lines 22 through 23 of the organization held a qualified conservation or not return the form of a conservation easement in the last day of the tax year 5 Total acreage restricted by conservation easements 6 Number of conservation easements microtical on (c) accurated after 7/25/06, and not on a historic structure listed in the National Register 7 Number of osservation easements modeled in (c) accurated after 7/25/06, and not on a historic structure listed in the National Register 8 Number of osservation easements modeled in (c) accurated after 7/25/06, and not on a historic structure listed in the National Register 9 Number of states where property subject to conservation easements included in (a) 1 Number of osservation easements modeled in (c) accurated after 7/25/06, and not on a historic structure listed in the National Register 8 Number of states where property subject to conservation easement is located listed in the National Register 9 Number of osservation assements modeled in (c) accurated after 7/25/06, and not on a historic structure listed in the National Register 1 Number of states where property subj			(a) Dono	r advised funds	(b) Funds	and other accoun	ts
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are the organization's property, subject to the organization's exclusive legal control?		· · · · · · · · · · · · · · · · · · ·	writing that the a	ssets held in donor adv	used funds		
to characterion inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring more missable private benefit? Part III Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(3) 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 Preservation of open space Preservation op	_				1554 141145	□ Vas	No.
tor charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part Conservation Easements. Complete if the organization answered "Yes" on 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 Protection of natural habitat Preservation of open space Preservation of open space Preservation of open space Complete line 2a through 26 if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Reld at the End of the Tax Year a Total number of conservation easements Reld at the End of the Tax Year a Total number of conservation easements Reld at the End of the Tax Year a Total number of conservation easements Reld at the End of the Tax Year a Total number of conservation easements on a certified historic structure included in (a) Reld at the End of the Tax Year a Total number of conservation easements and a recreation easement is conservation easement in the National Register Released, extinguished, or terminated by the organization during the tax year Reld at the National Register Released, extinguished, or terminated by the organization during the tax year Reld at the National Register Released, extinguished, or terminated by the organization during the tax year Reld at the National Register Released, extinguished, or terminated by the organization during the year Reld at an overland and the National Register Released, extinguished, or terminated by the organization during the year Reld at the Organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year Reld at an overland to the propertion of the protecti	6	_	_		e used only		
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space Preservation of open space Preservation of open space 2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Reld at the End of the Tax Year 2	•		-		•		
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Conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 Ia If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	9	In Part XIII, describe how the organization reports conservation	ion easements in	its revenue and expens	se statement, and	balance sheet, an	nd
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Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1							
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historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 1		Complete if the organization answered "Yes" on Form	990, Part IV, line	e 8			
the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1	1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to re	port in its revenue state	ement and balanc	e sheet works of a	ırt,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1		historical treasures, or other similar assets held for public exh	hibition, educatio	n, or research in further	rance of public se	rvice, provide, in P	art XIII,
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relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1	b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report	t in its revenue stateme	nt and balance sh	eet works of art, h	nstorical
(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1		treasures, or other similar assets held for public exhibition, ed	ducation, or rese	arch in furtherance of p	ublic service, pro	vide the following a	amounts
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1		relating to these items					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1		(i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1					▶ \$		
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1	2		asures, or other	sımılar assets for financ			-
a Revenue included on Form 990, Part VIII, line 1		_			J. , p		
	а	•		g	> \$		
					- \$	••	

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Sche		WAUKEGAN	DEVE	LOPMEN	T COAL	ITION	1	45-48	07745	Page 2
	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi						•			
•	(check all that apply)	on, and other record	ao, onco	it unly of the	Tollowing the	4,0 4 5,	giiiioaiii (130 OI 113	CONCOLION	items
а	Public exhibition	c		l nan or evo	hange progra	ame				
b	Scholarly research	6		Other	nange progn	21113				
	Preservation for future generations	•		Other		<u> </u>				
C	_	allantions and avala			h			D.	4 VIII	
=	Provide a description of the organization's co							ise in Pai	T XIII	
5	During the year, did the organization solicit of					er sımılar	assets	_	٦.,	<u> </u>
Dar	to be sold to raise funds rather than to be m								_ Yes	No_
Га			ete if the	organizatio	n answered	"Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa			_						
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other as	sets not	included	_	_	
	on Form 990, Part X?								_ Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table						
							<u> </u>		Amount	
С	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 amount on F	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liabili	ty?		Yes	No No
<u>b</u>	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatio	on has been	provided on	Part XIII				
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	orm 990, Par	t IV, line 1	0.			
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses								1	
. d	Grants or scholarships									
-	Other expenditures for facilities									
•	and programs					1				
f	Administrative expenses					i				
g g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end haland	re (line 1	a column (s	l		 -			
a	Board designated or quasi-endowment	rent year end balant	%	g, coluini (c	iji nelu as					
h	Permanent endowment	%	- ′°							
	Temporarily restricted endowment	^ %								
C	The percentages on lines 2a, 2b, and 2c sho									
0-	-							-4		
3a	Are there endowment funds not in the posse	ession of the organiz	ation the	at are neid a	na aaministe	erea for th	ie organiz	ation	Γ.	<u> </u>
	by									Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(II)	
_	If "Yes" on line 3a(ii), are the related organization	•							3b	
<u>4</u>	Describe in Part XIII the intended uses of the		owment	funds					. <u></u> -	
Par										
	Complete if the organization answere									
	Description of property	(a) Cost or o			or other	, , ,	cumulate	:d	(d) Book	value
		basis (investi	ment)	basis	(other)	dep	reciation			
1a	Land			_						
b	Buildings			9	1,113.		22,8	35.	68	<u>,278.</u>
С	Leasehold improvements									
d	Equipment		<u>_</u> <u>_</u>							
<u>e</u>	Other				3,761.		1,3	<u>52. </u>		<u>,409.</u>
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	(Oc)				70	<u>,687.</u>

Schedule D (Form 990) 2017

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

Schedule D (Form 990) 2017

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

(8) (9)

32,403.

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•	VELOPMENT COALITION	45-4807745 Page
Part XI Reconciliation of Revenue per Audited Financ	ial Statements With Revenue	per Return.
. Complete if the organization answered "Yes" on Form 990, P.	art IV, line 12a	
1 Total revenue, gains, and other support per audited financial statem		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I,	line 12)	5
Part XII Reconciliation of Expenses per Audited Finance		
Complete if the organization answered "Yes" on Form 990, P.	•	o per ricturii.
	arriv, IIIIG 12a	
		1
	اما	
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 . 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	_4b_	
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information.	I, line 18)	5
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines		V, line 4, Part X, line 2, Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pi	rovide any additional information	
		· · · · · · · · · · · · · · · · · · ·
		•
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SCHEDULÉ L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

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2017

Open To Public Inspection

Name of the organization Employer identification number GREATER WAUKEGAN DEVELOPMENT COALITION 45-4807745 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 h) Approved (d) Loan to or (a) Name of (b) Relationship (c) Purpose (e) Original (f) Balance due (i) Written (q) In by board or committee? from the interested person agreement? with organization of loan principal amount default? organization? From To No Yes No Ye<u>s</u> Yes No NAHTOL, 214,100 376,488. LLC PARTNEOPERATIN X X X DESIGN STUDIO CA DIRECTOPERATIN X 2,050. 2,287. Х Х X LITTLE VILLAGE A PARTNEOPERATIN 307,892. 752,831 X Х 606 Total Grants or Assistance Benefiting Interested Persons. Part III valeta if the ergonization annivered "Vee" on Form 900. Bort IV, line 97

(a) Name of interested person	(b) Relationship between interested person and	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
	the organization			
			 	
			•	

SEE PART V FOR CONTINUATIONS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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Schedule L (Form 990 or 990-EZ) 2017

Schedule L (Form 990 or 990 EZ) 2017 GREATER WAUKEGAN DEVELOPMENT COALITION 45-4807745 Page 2
Part IV Business Transactions Involving Interested Persons.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of	i organiza	
	porson and the organization	Tansaction			No
				103	
				ļ <u>-</u>	
			-		
Part V Supplemental Information	,			1	
Provide additional information for response	onses to questions on Schedule L (see i	nstructions)			
SCHEDULE L, PART II, LOANS	TO AND FROM INTERES	STED PERSON	is:		
(A) NAME OF PERSON: NAHTOL	. T.T.C				
(A) NAME OF PERSON. NAMEOL	1, HHC				
(B) RELATIONSHIP WITH ORGA	NIZATION: A PARTNER	OF THIS CO	MPANY IS TH	IE	
SECRETARY OF THE ORGANIZAT	'ION.				
(C) DUDDOGE OF LOAM, ODERA	MINO				
(C) PURPOSE OF LOAN: OPERA	TING				
(A) NAME OF PERSON: DESIGN	STUDIO C, LTD				
(B) RELATIONSHIP WITH ORGA	NIZATION: A DIRECTOR	R OF THIS C	COMPANY IS T	'HE	
PRESIDENT OF THE ORGANIZAT	'ION.				
(C) PURPOSE OF LOAN: OPERA	TING				
() ()					
(A) NAME OF PERSON: LITTLE	VILLAGE PARTNERS LI	LC			
(B) RELATIONSHIP WITH ORGA	NITZATION: A DADTNED	רה הדוב כנ	אוס אוע דפ יינ	ır	
				1.5	 -
SECRETARY OF THE ORGANIZAT	'ION.				
(C) PURPOSE OF LOAN: OPERA	TING				
	···				

(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.

Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information OMB No 1545:0047 Open to Public Inspection

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Department of the Treasury Internal Revenue Service Name of the organization

GREATER WAUKEGAN DEVELOPMENT COALITION

Employer identification number 45-4807745

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CREATING CORE BUSINESSES, PURSUING CATALYTIC REAL ESTATE DEVELOPMENT
PROJECTS AND ATTRACTING FOREIGN DIRECT INVESTMENT AT THE LOCAL LEVEL.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 IS REVIEWED AND APPROVED BY THE BOARD BEFORE BEING FILED.
FORM 990, PART VI, SECTION C, LINE 19:
THE RETURN IS MADE AVAILABLE TO THE PUBLIC
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(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.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for the latest information. GREATER WAUKEGAN DEVELOPMENT COALITION

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
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