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Extended to April 15, 2020
Return of Private Foundation

Form 990-PF

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning JUN 1, 2018, and ending MAY 31, 2019

Name of foundation: **Healthcare Foundation of Northern Lake County**
A Employer identification number: **20-5253008**

Number and street (or P O box number if mail is not delivered to street address): **114 South Genesee Street**
Room/suite: **505**
B Telephone number: **(847) 377-0525**

City or town, state or province, country, and ZIP or foreign postal code: **Waukegan, IL 60085**
C If exemption application is pending, check here ☐

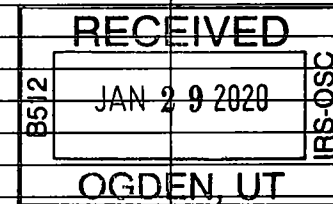
G Check all that apply:
☐ Initial return ☐ Initial return of a former public charity
☐ Final return ☐ Amended return
☐ Address change ☐ Name change

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16): **\$ 57,531,837.**
J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check ☒ if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	1,369,341.	1,369,341.		Statement 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	3,619,073.			
b Gross sales price for all assets on line 6a	11,783,689.			
7 Capital gain net income (from Part IV, line 2)		3,619,073.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	14,214.	14,214.		Statement 2
12 Total. Add lines 1 through 11	5,002,628.	5,002,628.		
13 Compensation of officers, directors, trustees, etc	209,655.	6,289.		203,366.
14 Other employee salaries and wages	179,406.	19,962.		159,444.
15 Pension plans, employee benefits	71,129.	5,168.		65,961.
16a Legal fees Stmt 3	4,775.	239.		4,536.
b Accounting fees Stmt 4	38,425.	28,979.		9,446.
c Other professional fees Stmt 5	173,690.	74,210.		99,480.
17 Interest				
18 Taxes Stmt 6	62,140.	13,619.		0.
19 Depreciation and depletion	1,452.	44.		
20 Occupancy	16,653.	500.		16,153.
21 Travel, conferences, and meetings	18,747.	293.		18,454.
22 Printing and publications	3,297.	99.		3,198.
23 Other expenses Stmt 7	35,514.	1,150.		34,364.
24 Total operating and administrative expenses. Add lines 13 through 23	814,883.	150,552.		614,402.
25 Contributions, gifts, grants paid	2,288,442.			2,327,017.
26 Total expenses and disbursements. Add lines 24 and 25	3,103,325.	150,552.		2,941,419.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	1,899,303.			
b Net investment income (if negative, enter -0-)		4,852,076.		
c Adjusted net income (if negative, enter -0-)			N/A	



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Part II Balance Sheets		Beginning of year	End of year	
Attached schedules and amounts in the description column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	891,515.	910,124.	910,124.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶	335,752.		
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	14,839.	5,867.	5,867.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock Stmt 9	40,528,768.	36,575,698.	36,575,698.
	c Investments - corporate bonds			
	Liabilities	11 Investments - land, buildings, and equipment basis ▶		
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other Stmt 10		17,751,161.	19,616,440.	19,616,440.
14 Land, buildings, and equipment basis ▶ 30,774.				
Less accumulated depreciation Stmt 11 ▶ 29,419.		2,807.	1,355.	1,355.
15 Other assets (describe ▶ Statement 12)		346,510.	422,353.	422,353.
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		59,871,352.	57,531,837.	57,531,837.
17 Accounts payable and accrued expenses		18,476.	12,535.	
18 Grants payable		1,550,500.	1,511,925.	
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ Statement 13)	1,423.	0.	
23 Total liabilities (add lines 17 through 22)	1,570,399.	1,524,460.		
24 Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. ☒	57,965,201.	55,683,406.		
25 Unrestricted				
26 Temporarily restricted				
26 Permanently restricted	335,752.	323,971.		
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ☐				
27 Capital stock, trust principal, or current funds				
28 Paid-in or capital surplus, or land, bldg., and equipment fund				
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances	58,300,953.	56,007,377.		
31 Total liabilities and net assets/fund balances	59,871,352.	57,531,837.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	58,300,953.
2 Enter amount from Part I, line 27a	2	1,899,303.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	60,200,256.
5 Decreases not included in line 2 (itemize) ▶ See Statement 8	5	4,192,879.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	56,007,377.

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Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Publicly Traded Securities at First			
b Midwest	P		
c Publicly Traded Securities at First			
d Midwest	P		
e Capital Gains Dividends			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b 484,815.		458,023.	26,792.
c			
d 10,488,324.		7,706,593.	2,781,731.
e 810,550.			810,550.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			26,792.
c			
d			2,781,731.
e			810,550.

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	3,619,073.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	2,585,170.	56,666,176.	.045621
2016	2,524,708.	52,261,927.	.048309
2015	2,703,788.	51,197,593.	.052811
2014	2,577,633.	54,952,740.	.046906
2013	2,469,354.	52,865,679.	.046710

2 Total of line 1, column (d)	2	.240357
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.048071
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	55,568,531.
5 Multiply line 4 by line 3	5	2,671,235.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	48,521.
7 Add lines 5 and 6	7	2,719,756.
8 Enter qualifying distributions from Part XII, line 4	8	2,941,419.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1.
Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).

1	48,521.
2	0.
3	48,521.
4	0.
5	48,521.
6a	109,577.
6b	0.
6c	0.
6d	0.
7	109,577.
8	0.
9	
10	61,056.
11	0.

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments:

a 2018 estimated tax payments and 2017 overpayment credited to 2018

b Exempt foreign organizations - tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments. Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be: Credited to 2019 estimated tax ☒ 61,056. Refunded ☐

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ☐ \$ 0. (2) On foundation managers. ☐ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☐ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ☐ IL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4042(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address www.hfnlc.org	X	
14 The books are in care of The Foundation Telephone no. (847) 377-0525 Located at 114 South Genesee Street, No. 505, Waukegan, IL ZIP+4 60085		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15	N/A	
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

	Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☒ Yes ☐ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ☐	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2018, did the foundation have any undistributed income (lines Gd and Ge, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☒ No If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 1720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1) (5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions
Organizations relying on a current notice regarding disaster assistance, check here ☐ N/A

c If the answer is "Yes" to question 5a(1), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

N/A

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ Nob If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

N/A

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 14		209,655.	36,934.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Angela Baran - c/o Healthcare Fdn of NLC, Waukegan, IL 60085	Program Officer 40.00	99,556.	18,465.	0.
Meredith Polirer - c/o Healthcare Fdn of NLC, Waukegan, IL 60085	Office Administrator 40.00	79,850.	16,428.	0.

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

[illegible]

Total number of others receiving over \$50,000 for professional services

Part IX-A	Summary of Direct Charitable Activities
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List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

Part IX-B	Summary of Program-Related Investments
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Arıvunıl

1	N/A	
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	57,422,048.
b	Average of monthly cash balances	1b	750,890.
c	Fair market value of all other assets	1c	337,012.
d	Total (add lines 1a, b, and c)	1d	58,509,950.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	58,509,950.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Stmt 15	4	2,941,419.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	55,568,531.
6	Minimum investment return. Enter 5% of line 5	6	2,778,427.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	2,778,427.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	48,521.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	48,521.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,729,906.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,729,906.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,729,906.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,941,419.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,941,419.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	48,521.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,892,898.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				2,729,906.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			2,301,228.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ► \$ 2,941,419.				
a Applied to 2017, but not more than line 2a			2,301,228.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2018 distributable amount				640,191.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				2,089,715.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

N/A

☐ 4042(j)(3) or ☒ 4942(j)(5)

15301206 805490 HEALTHCAREFN 2018.04030 Healthcare Foundation of No HEALTHC1

Healthcare Foundation of Northern Lake

Form 990-PF (2018)

County

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Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Advocate Charitable Foundation 3075 Highland Parkway, Suite 600 Downers Grove, IL 60515	None	PC	Healthcare	35,000.
Antioch Area Health Access Alliance 874 Main St Antioch, IL 60002	None	PC	Healthcare	102,000.
Arden Shore Child and Family Service 329 N. Genesee Street Waukegan, IL 60085	None	PC	Healthcare	200,469.
CASA Lake County Inc 700 Forest Edge Dr Vernon Hills, IL 60061	None	PC	Healthcare	20,000.
Catholic Charities of the Archdiocese of Chicago 721 N. LaSalle Chicago, IL 60654	None	PC	Healthcare	47,500.
Total See continuation sheet(s) ▶ 3a				2,327,017.
b Approved for future payment				
Antioch Area Health Access Alliance 874 Main St Antioch, IL 60002	None	PC	Healthcare	70,000.
Catholic Charities of the Archdiocese of Chicago 721 N. LaSalle Chicago, IL 60654	None	PC	Healthcare	20,000.
Childserv 8765 W. Higgins Rd Ste 450 Chicago, IL 60631	None	PC	Healthcare	20,000.
Total See continuation sheet(s) ▶ 3b				1,511,925.

Form 990-PF (2018)

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash		X
	(2) Other assets		X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

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

May the IRS discuss this return with the preparer shown below? See instr

☒ Yes ☐ No

Signature of officer or trustee

Date / /

Title

Print/Type preparer's name
Elizabeth A.
Vaccariello

Preparer's signature

Date

Check ☐ self-employed

PTIN

P00357347

**Paid
Preparer
Use Only**

Firm's name ► **Varey & Vaccariello CPAs PC**

Firm's EIN ► 36-3994838

Firm's address ► 2205 Point Boulevard, Suite 210
Elgin, IL 60123

Phone no. **847-228-6977**

Form 990-PF (2018)

**Healthcare Foundation of Northern Lake
County**

20-5253008

Part XV: Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Childserv 8765 W. Higgins Rd Ste 450 Chicago, IL 60631	None	PC	Healthcare	25,000.
Community Youth Network Inc 18640 W. Belvidere Rd. Grayslake, IL 60030	None	PC	Healthcare	95,000.
Cristo Rey St. Martin College Prep 3106 Belvidere Road Waukegan, IL 60085	None	PC	Healthcare	20,000.
ElderCARE Lake County 410 Grand Ave. Waukegan, IL 60085	None	PC	Healthcare	26,498.
Erie Family Health Center Inc 1701 W. Superior St Chicago, IL 60622	None	PC	Healthcare	60,000.
EverThrive Illinois 1256 W. Chicago Ave. Chicago, IL 60642	None	PC	Healthcare	17,500.
Family Service of Lake County 777 Central Ave, Ste 17 Highland Park, IL 60035	None	PC	Healthcare	15,000.
Forefront 208 S. Lasalle Chicago, IL 60604	None	PC	Healthcare	4,019.
Hispanic American Community Education & Services Inc 820 W. Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	17,730.
Lake County Community Development 500 W. Winchester Rd, Unit 101 Libertyville, IL 60048	None	GOV	Healthcare	75,000.
Total from continuation sheets				1,922,048.

**Healthcare Foundation of Northern Lake
County**

20-5253008

Part XV. Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Lake County Crisis Center for Prevention & Treatment of Domestic Violence 2710 17th Street, Suite 100 Zion, IL 60099	None	PC	Healthcare	124,000.
Lake County Health Department & Community Health Center 3010 Grand Ave Waukegan, IL 60085	None	GOV	Healthcare	37,500.
Lake County Sheriffs Office 25 S Martin Luther King Jr Ave Waukegan, IL 60085	None	GOV	Healthcare	100,000.
Lewis University 1 University Pkwy, #295 Romeoville, IL 60446	None	PC	Healthcare	12,500.
Mano a Mano Family Resource Center 6 E. Main St Round Lake Park, IL 60073	None	PC	Healthcare	134,806.
Mercy Housing Lakefront 120 S. LaSalle St. Suite 1850 Chicago, IL 60603	None	PC	Healthcare	39,705.
Metropolitan Chicago Breast Cancer Task Force 300 S. Ashland Ave, Ste 202 Chicago, IL 60607	None	PC	Healthcare	76,000.
Most Blessed Trinity 450 Keller Ave Waukegan, IL 60085	None	PC	Healthcare	15,000.
NICASA, NFP 31979 N. Fish Lake Rd. Round Lake, IL 60073	None	PC	Healthcare	40,000.
Northeastern Illinois University Foundation 5500 N Saint Louis Ave Chicago, IL 60625	None	PC	Healthcare	41,000.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

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Part XV. Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Northpointe Resources Inc 3441 Sheridan Rd Zion, IL 60099	None	PC	Healthcare	35,000.
One Hope United 215 N. Milwaukee Ave Lake Villa, IL 60046	None	PC	Healthcare	35,000.
PADS Lake County Inc 1800 Grand Ave Waukegan, IL 60085	None	PC	Healthcare	155,000.
Rincon Family Services 3942 W North Avenue Chicago, IL 60647	None	PC	Healthcare	25,000.
Rosalind Franklin University Health System 3333 Green Bay Rd North Chicago, IL 60064	None	SO I	Healthcare	92,500.
Rosalind Franklin University of Medicine & Science 3333 Green Bay Rd North Chicago, IL 60064	None	PC	Healthcare	45,000.
TASC Inc 700 S. Clinton St Chicago, IL 60607	None	PC	Healthcare	75,000.
The Thresholds 4101 N. Ravenswood Chicago, IL 60613	None	PC	Healthcare	45,000.
Uhlich Children's Advantage Network 3605 W. Filmore Chicago, IL 60624	None	PC	Healthcare	55,000.
United Way of Lake County 330 South Greenleaf Street Gurnee, IL 60031	None	PC	Healthcare	34,790.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

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Part XV. Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Waukegan Public Library Foundation 128 N. County St Waukegan, IL 60085	None	SO I	Healthcare	28,500.
Youth & Family Counseling 1113 S. Milwaukee Ave, Ste 104 Libertyville, IL 60048	None	PC	Healthcare	90,000.
Youth Conservation Corps 1020 W Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	20,000.
Youthbuild Lake County 1812 Morrow Ave North Chicago, IL 60064	None	PC	Healthcare	62,500.
YWCA of Lake County 1425 Tri-State Pkwy, Suite 180 Gurnee, IL 60031	None	PC	Healthcare	95,000.
Zacharias Sexual Abuse Center 4275 Old Grand Avenue Gurnee, IL 60031	None	PC	Healthcare	47,500.
Zion Benton Childrens Service Inc 1608 23rd St Zion, IL 60099	None	PC	Healthcare	5,000.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

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Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
College of Lake County 19351 W. Washington St Grayslake, IL 60030	None	NC - Public University	Healthcare	140,000.
Cristo Rey St. Martin College Prep 3106 Belvidere Road Waukegan, IL 60085	None	PC	Healthcare	20,000.
EverThrive Illinois 1256 W. Chicago Ave Chicago, IL 60642	None	PC	Healthcare	37,500.
Family Service of Lake County 777 Central Ave, Ste 17 Highland Park, IL 60035	None	PC	Healthcare	30,000.
Hispanic American Community Education & Service Inc 820 W. Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	25,425.
Illinois Collaboration On Youth 333 S Wabash Ave, Ste 2750 Chicago, IL 60604	None	PC	Healthcare	25,000.
Lake County Community Development 500 W. Winchester Rd, Unit 101 Libertyville, IL 60048	None	GOV	Healthcare	37,500.
Lake County Crisis Center for Prevention & Treatment of Domestic Violence 2710 17th Street, Ste 100 Zion, IL 60099	None	PC	Healthcare	75,500.
Lewis University 1 University Pkwy, #295 Romeoville, IL 60446	None	PC	Healthcare	12,500.
Mano a Mano Family Resource Center 6 E. Main St Round Lake Park, IL 60073	None	PC	Healthcare	37,500.
Total from continuation sheets				1,401,925.

**Healthcare Foundation of Northern Lake
County**

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Part XV: Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Mercy Housing Lakefront 120 S. LaSalle St. Suite 1850 Chicago, IL 60603	None	PC	Healthcare	30,000.
NICASA, NFP 31979 N. Fish Lake Rd. Round Lake, IL 60073	None	PC	Healthcare	160,000.
Northeastern Illinois University Foundation 5500 N Saint Louis Ave Chicago, IL 60625	None	PC	Healthcare	35,000.
Northpointe Resources Inc 3441 Sheridan Rd Zion, IL 60099	None	PC	Healthcare	35,000.
One Hope United 215 N. Milwaukee Ave Lake Villa, IL 60046	None	PC	Healthcare	50,000.
PADS Lake County Inc 1800 Grand Ave Waukegan, IL 60085	None	PC	Healthcare	145,000.
Pioneer Center for Human Services 4031 Dayton Street McHenry, IL 60050	None	PC	Healthcare	22,500.
Rosalind Franklin University Health System 3333 Green Bay Rd North Chicago, IL 60064	None	SO I	Healthcare	50,000.
Rosalind Franklin University of Medicine & Science 3333 Green Bay Rd North Chicago, IL 60064	None	PC	Healthcare	22,500.
TASC Inc 700 South Clinton Street Chicago, IL 60607	None	PC	Healthcare	80,000.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

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Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
The Thresholds 4101 N Ravenswood Chicago, IL 60613	None	PC	Healthcare	17,500.
Uhlich Children's Advantage Network 3605 W. Filmore Chicago, IL 60624	None	PC	Healthcare	45,000.
United Way of Lake County 330 South Greenleaf Street Gurnee, IL 60031	None	PC	Healthcare	17,500.
Wauconda Fire District 109 West Liberty Street Wauconda, IL 60084	None	GOV	Healthcare	75,000.
Waukegan Public Library Foundation 128 N. County St Waukegan, IL 60085	None	SO I	Healthcare	28,500.
Youth & Family Counseling 1113 S. Milwaukee Ave, Ste 104 Libertyville, IL 60048	None	PC	Healthcare	42,500.
Youth Conservation Corps 1020 W Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	20,000.
YouthBuild Lake County 1812 Morrow Ave North Chicago, IL 60064	None	PC	Healthcare	25,000.
Zacharias Sexual Abuse Center 4275 Old Grand Avenue Gurnee, IL 60031	None	PC	Healthcare Healthcare	37,500.
Zion Benton Childrens Service Inc 1608 23rd St Zion, IL 60099	None	PC	Healthcare	22,500.
Total from continuation sheets				

Form 990-PF	Dividends and Interest from Securities	Statement	1
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Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Invest-ment Income	(c) Adjusted Net Income
Investment Income	2,179,891.	810,550.	1,369,341.	1,369,341.	
To Part I, line 4	2,179,891.	810,550.	1,369,341.	1,369,341.	

Form 990-PF	Other Income	Statement	2
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Description	(a) Revenue Per Books	(b) Net Invest-ment Income	(c) Adjusted Net Income
Other Income	14,214.	14,214.	
Total to Form 990-PF, Part I, line 11	14,214.	14,214.	

Form 990-PF	Legal Fees	Statement	3
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Description	(a) Expenses Per Books	(b) Net Invest-ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal fees - Quarles & Brady LLP	4,775.	239.		4,536.
To Fm 990-PF, Pg 1, ln 16a	4,775.	239.		4,536.

Form 990-PF	Accounting Fees	Statement	4
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Description	(a) Expenses Per Books	(b) Net Invest-ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees - Varey & Vaccariello CPAs PC	27,675.	26,291.		1,384.
Audit fees - Miller Cooper & Co., Ltd	10,750.	2,688.		8,062.
To Form 990-PF, Pg 1, ln 16b	38,425.	28,979.		9,446.

Form 990-PF	Other Professional Fees			Statement	5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Investment management - Ellwood Associates	64,424.	64,424.		0.	
Investment custodial - First Midwest Bank	9,786.	9,786.		0.	
Consulting - Annual Report - Kim Abrams Design	39,210.	0.		39,210.	
Consulting - Honorarium speakers	19,270.	0.		19,270.	
Consulting - Community Needs Assessment- Rob Paral	41,000.	0.		41,000.	
To Form 990-PF, Pg 1, ln 16c	173,690.	74,210.		99,480.	

Form 990-PF	Taxes			Statement	6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Foreign Tax W/H	13,619.	13,619.		0.	
Section 4940 excise tax	48,521.	0.		0.	
To Form 990-PF, Pg 1, ln 18	62,140.	13,619.		0.	

Form 990-PF	Other Expenses			Statement	7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Advertising	6,840.	0.		6,840.	
Bank charges	224.	224.		0.	
Dues and memberships	2,100.	0.		2,100.	
Licenses and fees	435.	0.		435.	
Outside services	11,332.	340.		10,992.	
Postage and shipping	632.	0.		632.	
Telephone	2,768.	83.		2,685.	
Insurance	3,695.	197.		3,498.	
Supplies	3,398.	306.		3,092.	

Service contracts	4,090.	0.	4,090.
To Form 990-PF, Pg 1, ln 23	35,514.	1,150.	34,364.

Form 990-PF	Other Decreases in Net Assets or Fund Balances	Statement	8
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Description	Amount
Unrealized loss on investments carried at market value	4,192,879.
Total to Form 990-PF, Part III, line 5	4,192,879.

Form 990-PF	Corporate Stock	Statement	9
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Description	Book Value	Fair Market Value
First Midwest Bank - Equities	36,575,698.	36,575,698.
Total to Form 990-PF, Part II, line 10b	36,575,698.	36,575,698.

Form 990-PF	Other Investments	Statement	10
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Description	Valuation Method	Book Value	Fair Market Value
First Midwest Bank - Fixed Income	FMV	19,616,440.	19,616,440.
Total to Form 990-PF, Part II, line 13		19,616,440.	19,616,440.

Form 990-PF	Depreciation of Assets Not Held for Investment	Statement	11
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Description	Cost or Other Basis	Accumulated Depreciation	Book Value
First Pearl Software	9,760.	9,760.	0.
Minolta EP 1030 Copier Donated	1,500.	1,500.	0.
Two Desk Sets (Desk, credenza, book shelf)	1,096.	1,096.	0.
Three Filing Cabinets (36"wide x 4 drawer)	1,512.	1,512.	0.
Filing cabinet (36"wide x 4 drawer)	695.	695.	0.

Dell Inkjet 966	229.	229.	0.
Dell Latitude E5520	1,358.	1,358.	0.
Dell Latitude E6420	1,331.	1,331.	0.
Conference Table Donated 5/8/12	595.	588.	7.
L-Shaped Desk Donated 5/8/12	495.	489.	6.
L-Shaped Desk Donated 5/8/12	495.	489.	6.
Phone and Network Wiring	810.	810.	0.
Window Treatments - Blinds	539.	519.	20.
Window Treatments - Film Tint	758.	758.	0.
Dell PowerEdge T320 Server	3,107.	3,107.	0.
Window Installation	750.	750.	0.
Apple 13" MacBook Pro	1,699.	1,614.	85.
Server Hardware Additions	969.	840.	129.
Dell Computer - Program Officer	1,954.	1,563.	391.
Dell Inspiron 15 - Assistant	1,122.	411.	711.
Total To Fm 990-PF, Part II, ln 14	30,774.	29,419.	1,355.

Form 990-PF	Other Assets	Statement 12
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Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
Accrued Income	14,766.	19,016.	19,016.
Illinois Workers Compensation Commission	331,744.	342,281.	342,281.
Section 4940 Excise Tax Deposit	0.	61,056.	61,056.
To Form 990-PF, Part II, line 15	346,510.	422,353.	422,353.

Form 990-PF	Other Liabilities	Statement 13
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Description	BOY Amount	EOY Amount
Section 4940 Excise Tax Payable	1,423.	0.
Total to Form 990-PF, Part II, line 22	1,423.	0.

Form 990-PF Part VIII - List of Officers, Directors Statement 14
Trustees and Foundation Managers

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Mary Dominiak, PhD c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Chair/Director 5.00	0.	0.	0.
Luis Berrones c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Vice Chair/Director 5.00	0.	0.	0.
Dave Hatton, CFP c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Treasurer/Director 5.00	0.	0.	0.
Maria Schwartz c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Secretary/Director 5.00	0.	0.	0.
Frances Baxley, MD c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director 1.00	0.	0.	0.
Carolina Duque c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director 1.00	0.	0.	0.
Magdalena McElroy c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director 1.00	0.	0.	0.
Laura Ramirez c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director 1.00	0.	0.	0.
Carol Sonnenschein, PhD c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director 1.00	0.	0.	0.

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Casandra Slade c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director	1.00	0.	0.	0.
Michael Duffy c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director	1.00	0.	0.	0.
Jesus Ruiz c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director	1.00	0.	0.	0.
Nancy Waites c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Director	1.00	0.	0.	0.
Ernest Vasseur c/o Healthcare Fdn of Northern Lake Cnty, 114 S Genesee St Waukegan, IL 60085	Executive Director	40.00	209,655.	36,934.	0.

Totals included on 990-PF, Page 6, Part VIII

209,655.	36,934.	0.
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Form 990-PF	Cash Deemed Charitable Explanation Statement	Statement 15
	Part X, Line 4	

PART X - LINE 4 - MINIMUM INVESTMENT RETURN

The Healthcare Foundation of Northern Lake County chooses to use the amount of administrative expenses and charitable disbursements, as shown in Part I, Line 26D of the return, as the cash deemed held for charitable activities due to the large distributions of the organization.

Form 990-PF	Grant Application Submission Information	Statement 16
	Part XV, Lines 2a through 2d	

Name and Address of Person to Whom Applications Should be Submitted

www.hfnlc.org - All applicants must complete their applications online

Telephone Number	Name of Grant Program
(847) 377-0525	Clinical Care Program

Email Address

www.hfnlc.org

Form and Content of Applications

The Foundation uses an online grant application and management system for both letters of inquiry and full proposals. We do not accept hard copies of either letters of inquiry or proposals.

A letter of inquiry must be submitted prior to a full proposal. The letter of inquiry should include a description of the proposed program or project and the outcomes you hope to achieve, an explanation of the need for the program or project, and a budget including expenses and anticipated sources of support.

All applications must address the following components: Need, Access, Sustainability and Evaluation.

You can download and print the full set of questions from the online grant application and management system after you are invited to submit a full proposal.

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

The Healthcare Foundation of Northern Lake County makes grants only to tax-exempt nonprofit organizations and rarely funds organizations outside Lake County. Grants typically range from \$25,000 to \$100,000. We give priority to organizations that serve residents of Antioch, Fox Lake, Grayslake--Third Lake, Great Lakes, Gurnee, and Lake Villa--Lindenhurst, North Chicago, Round Lake, Wadsworth, Waukegan, and Zion. We give priority to specific initiatives rather than to general operating support. The Foundation does not fund Biomedical research, Patient financial aid, Religious activities and Services provided by unqualified persons. A grantee organization may receive up to five consecutive years of funding, at the Foundation's discretion. After five consecutive years of funding the organization will be asked to take a year off in seeking support.

Name and Address of Person to Whom Applications Should be Submitted

www.hfnlc.org - All applicants must complete their applications online

<u>Telephone Number</u>	<u>Name of Grant Program</u>
(847) 377-0525	Linkage To Care Program

Email Address

www.hfnlc.org

Form and Content of Applications

The Foundation uses an online grant application and management system for both letters of inquiry and full proposals. We do not accept hard copies of either letters of inquiry or proposals.

A letter of inquiry must be submitted prior to a full proposal. The letter of inquiry should include a description of the proposed program or project and the outcomes you hope to achieve, an explanation of the need for the program or project, and a budget including expenses and anticipated sources of support.

All applications must address the following components: Need, Access, Sustainability and Evaluation.

You can download and print the full set of questions from the online grant application and management system after you are invited to submit a full proposal.

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

The Healthcare Foundation of Northern Lake County makes grants only to tax-exempt nonprofit organizations and rarely funds organizations outside Lake County. Grants typically range from \$25,000 to \$100,000. We give priority to organizations that serve residents of Antioch, Fox Lake, Grayslake--Third Lake, Great Lakes, Gurnee, and Lake Villa--Lindenhurst, North Chicago, Round Lake, Wadsworth, Waukegan, and Zion. We give priority to specific initiatives rather than to general operating support. The Foundation does not fund Biomedical research, Patient financial aid, Religious activities and Services provided by unqualified persons. A grantee organization may receive up to five consecutive years of funding, at the Foundation's discretion. After five consecutive years of funding the organization will be asked to take a year off in seeking support.

Name and Address of Person to Whom Applications Should be Submitted

www.hfnlc.org - All applicants must complete their applications online

Telephone Number Name of Grant Program

(847) 377-0525 Scholarships Program

Email Address

www.hfnlc.org

Form and Content of Applications

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Name and Address of Person to Whom Applications Should be Submitted

www.hfnlc.org - All applicants must complete their applications online

Telephone NumberName of Grant Program

(847) 377-0525

Organizational Capacity Building Program

Email Address

www.hfnlc.org

Form and Content of Applications

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Name and Address of Person to Whom Applications Should be Submitted

www.hfnlc.org - All applicants must complete their applications online

Telephone NumberName of Grant Program

(847) 377-0525

System Capacity Building Program

Email Address

www.hfnlc.org

Form and Content of Applications

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2018 DEPRECIATION AND AMORTIZATION REPORT

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990-PF

Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	First Pearl Software	12/21/07	167	36M		43	9,760.				9,760.	9,760.		0.	9,760.
	Minolta EP 1030 Copier	12/26/07	SL	5.00		16	1,500.				1,500.	1,500.		0.	1,500.
3	Donated	03/05/08	SL	7.00		16	1,096.				1,096.	1,096.		0.	1,096.
5	Two Desk Sets (Desk, credenza, book shelf)	05/29/08	SL	7.00		16	1,512.				1,512.	1,512.		0.	1,512.
6	Three Filing Cabinets (36"wide x 4 drawer)	06/29/10	SL	7.00		16	695.				695.	695.		0.	695.
9	Filing cabinet (36"wide x 4 drawer)	06/29/07	SL	5.00		16	229.				229.	229.		0.	229.
11	Dell Inkjet 966	09/01/11	SL	5.00		16	1,358.				1,358.	1,358.		0.	1,358.
12	Dell Latitude E5520	03/01/12	SL	5.00		16	1,331.				1,331.	1,331.		0.	1,331.
13	Dell Latitude E6420	07/09/12	SL	7.00		16	595.				595.	503.		85.	588.
14	Conference Table Donated 5/8/12	07/09/12	SL	7.00		16	495.				495.	418.		71.	489.
15	L-Shaped Desk Donated 5/8/12	07/09/12	SL	7.00		16	495.				495.	419.		70.	489.
16	L-Shaped Desk Donated 5/8/12	07/09/12	SL	7.00		16	810.				810.	810.		0.	810.
17	Phone and Network Wiring	09/24/12	SL	7.00		16	539.				539.	442.		77.	519.
18	Window Treatments - Blinds	02/01/13	SL	5.00		16	758.				758.	758.		0.	758.
19	Window Treatments - Film Tint	06/01/13	SL	5.00		16	3,107.				3,107.	3,107.		0.	3,107.
20	Dell PowerEdge T320 Server	11/01/13	SL	5.00		16	750.				750.	750.		0.	750.
21	Window Installation	08/31/14	SL	5.00		16	1,699.				1,699.	1,274.		340.	1,614.
22	Apple 13" MacBook Pro	02/01/15	SL	5.00		16	969.				969.	646.		194.	840.
23	Server Hardware Additions					16									

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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[illegible]

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone