2949306008,914<sub>00MB</sub> Nd 1545-0047

**Return of Organization Exempt From Income Tax** 

2018

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

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/Form990 for instructions and the latest information.

Open	to	Pub	lic
Inst	ec	tion	

A F	or the	2018 calend	ar year, or tax year be	ginning	07-01 , 2018, and e	ending 0	6-30 ,2019
		ipplicable		AUKEGAN TO COLLEGE NFP	······································		D Employer identification no
$\overline{}$	ddress c	• •	Doing business as	100000000000000000000000000000000000000	<del></del>		45-4860376
ᆷ	ame cha	•		) box if mail is not delivered to street address)		Room/suite	E Telephone number
$\overline{}$		-				Rochivatile	(630) 306-5512
声	ntial retu		410 Grand Av	<del></del>		<u> </u>	<del>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </del>
$\overline{}$		rn/terminated		ince, country, and ZIP or foreign postal code			G Gross receipts
$\equiv$	mended		Waukegan, IL				\$ 693,288
□ ^	pplicatio	n pending	F Name and address of prir	cipal officer		H(a) Is this a group return	
		-			2	H(b) Are all subordina	
<u></u>	ax-exem	pt status X	501(c)(3) 501(c) (	) (insert no ) 4947(a)(1) or	527	If "No," attac	h a list (see instructions)
7 A	ebsite		KEGANTOCOLLEGE	. ORG		H(c) Group exempte	on number
		rganization 🛚 🗵		Association Other >	L Year of formation	2012 M State of le	egal domicile IL
Pai	rt I	Summar	у				
	1	Briefly descri	be the organization's m	ission or most significant activities	TO CREATE BRIGH	TER FUTURES FO	OR STUDENTS,
Ð		FAMILIES	AND COMMUNITIE	S BY PREPARING STUDENTS	TO ENROLL IN AN	D GRADUATE FRO	M COLLEGE.
Activities & Governance							
Ĕ				<u> </u>			
Š	2	Check this b	ox ▶ 🔲 if the organiza	tion discontinued its operations or disj	posed of more than 25% of	fits net assets	
Ő	3	Number of ve	oting members of the go	overning body (Part VI, line 1a)		3	16
တ္	4	Number of in	ndependent voting mem	bers of the governing body (Part VI, lir	ne 1b) • • • • • •	4	16
ij	5			d in calendar year 2018 (Part V, line 2			
÷	6		r of volunteers (estimate	•			
Ă	7a		•	m Part VIII, column (C), line 12		7	a 0
	1			ne from Form 990-T, line 38		7	b 0
	+ -	THE GITTERE	d basiliess taxable illes	<u> </u>	120 2020	Prior Year	Current Year
Revenue	8	Contribution	s and grants (Part VIII, I	ne 1h)	100000	490,0	
	1					430,0	030,127
	9	•	vice revenue (Part VIII,	•,			
ě	10		•	n (A), lines 3, 4, and 7d) · · · · ·	ľ	<del></del>	97 675
œ	11			, lines 5, 6d, 8c, 9c, 10c, and 11e)		1,3	<del></del>
	12			1 (must equal Part VIII, column (A), lir	ne 12) · · · · · · ·	491,9	
	13		•	art IX, column (A), lines 1-3) · · ·		23,7	23,400
	14	•	I to or for members (Pa	• • •			0
ý	15			oyee benefits (Part IX, column (A), line	es 5-10) · · · · · ·	253,6	80 293,919
Expenses	16a	Professional	fundraising fees (Part I	X, column (A), line 11e) · · · · ·			0
be	b	Total fundras	sing expenses (Part IX,	column (D), line 25)	108,799		
ŭ	17	Other expen	ses (Part IX, column (A)	, lines 11a-11d, 11f-24e)		181,2	193,376
	18	Total expens	es Add lines 13-17 (m	ust equal Part IX, column (A), line 25)		458,6	32 510,695
	19	Revenue les	s expenses Subtract li	ne 18 from line 12		33,3	14 182,593
or						Beginning of Current Yea	r End of Year
Net Assets or Fund Balances	20	Total assets	(Part X, line 16) · ·			345,5	81 528,129
Ass	21 ,	Total liabilitie	es (Part X, line 26)			4,8	20 4,775
Ę.	22		r fund balances Subtra	ict line 21 from line 20		340,7	61 523,354
Pai	rt II	Signatu	re Block				
Unde	r penalti	es of perjury, I dec	clare that I have examined this	return, including accompanying schedules and s	statements, and to the best of my k	nowledge and belief, it is	
true,	comect, a	and complete De	claration of preparer (other tha	n officer) is based on all information of which pre	eparer has any knowledge		. / — /
	O	ELYS	E DANCKERS	lung & have	2010		1/28/2020
Sigi	า		re of officer			0	ate
Her	e	ELVS	E DANCKERS	Executive Direct	at		
	•	I <b>B</b>	print name and title	/	<del></del>		
	50	1.		Preparer's signature	Date	Check f	PTIN
Paid	€ 1.\		eparer's name		7	self-employed	P00156618
	$\Rightarrow$		Kinnavy CPA	Kevin Kindavy CPA v	/ 12-23-2019		1 500130010
	garei			KAMSCHULTE JACOBS & CO I	שטער	Firm's EIN	<del></del>
O26	Only	Firm's addres		YEOMAN STREET		Phone no	660 0000
				gan IL 60087			-662-8300 ☑ No.
May	the IRS	discuss this	return with the preparer	shown above? (see instructions)		<del></del> .	· · · · · Yes 🐰 No

	Int III Statement of Program Service Accomplishments	Page 2
Га		
1	Check if Schedule O contains a response or note to any line in this Part III	• • • •
•	Briefly describe the organization's mission	
	TO CREATE BRIGHTER FUTURES FOR STUDENTS, FAMILIES AND COMMUNITIES BY PREPARING STUDENTS	TO
	ENROLL IN AND GRADUATE FROM COLLEGE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		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?	No No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported	
40	/C-1-	
4a	(Code) (Expenses \$ 336,739 including grants of \$) (Revenue \$	
	TUTORING AND PROGRAM SERVICES	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	)
		.,
	·	
	·····	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	)
		<del></del>
4d	, , , , , , , , , , , , , , , , , , ,	
•	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 336,739	n <b>990</b> (2018)
EEA	Port	1 330 (2010)



# Form 990'(2018) WAUKEGAN TO COLLEGE NFP Part IV Checklist of Required Schedules

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III  Is is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  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  If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part	X X X X X X X X X X X X X X X X X X X
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the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  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  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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 VIII  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 VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	X X X
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point the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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 VIII  11c  11d	X
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debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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 VIII  11c	X
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VII, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"  complete Schedule D, Part VI	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"  complete Schedule D, Part VI	
complete Schedule D, Part VI	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<u> </u>
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	
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	x
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	
Topolito III and II and	x
	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	x
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del></del>
11.	х
b Was the organization included in consolidated, independent audited financial statements for the tax year? If	-
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	<del></del>
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	l x
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	<del></del>
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	x
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	<del></del>
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	x
dollarie to the long-real state of the state	
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on  Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	x
	<del> </del>
	x
	4
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	X
11 100, 00 mp. etc 00 me etc 0, 1 d. v.m.	$\frac{1}{x}$
20 a Did the organization operate one of more mospital roomers in 700, complete consession?	<del>-   ^</del>
The feet to line 200, and the organization attacks a sopy of the desired interest of the feet attacks.	-+
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 12 if "Yes " complete Schedule I. Parts I and II	Ι.
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X

			Yes	No
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 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			.,
240	employees? If "Yes," complete Schedule J	23	<del> </del>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		Х
b	through 24d and complete Schedule K If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> </u>
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		<b></b>
·	to defease any tax-exempt bonds?	24c		l
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<del></del>		
	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?			ĺ
	If "Yes," complete Schedule L, Part I	25b	L	Х
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	L	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	ĺ		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	<u> </u>		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		Х
С	Schedule L, Part IV	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		$\frac{\lambda}{X}$
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	<del></del>		
•	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			i
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ь	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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		
30	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	х	i
Par			_^	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable	1 '		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
EEA		Form	990 (2	018)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Χ 4a 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 Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b С If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a Χ organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or qifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was C Χ 7c d X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Χ g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the R sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? а b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders а b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) ..................... 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 C Enter the amount of reserves on hand Χ 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 15 Is the organization 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 15 If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes Enter the number of voting members of the governing body at the end of the tax year 16 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 16 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Х 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following b Each committee with authority to act on behalf of the governing body? . . . . . . . . . . . . . . . . Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 Х 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? 15a a The organization's CEO, Executive Director, or top management official 15b X Other officers or key employees of the organization 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 16a X ............. with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Illinois 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply I I Own website Another's website ♥ Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records ELYSE DANCKERS (630)306-5512, 410 GRAND AVENUE, Waukegan, IL 60085

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

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

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

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

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

Check this box if neither the organization nor any related	organization	compe	nsat	ed a	ny cı	urrent	offic	er, director, or trust	ee	
<u> </u>		(C)						-		
(A)	(B)			Pos	ition			(D)	(E)	(F)
(A) Name and Title	Average	,				an one		Reportable	Reportable	Estimated
Mame and Title	hours per					both ar (trustee)		compensation	compensation from	amount of
	week (list any							from	related	other
	hours for related	악	Ιį	ç	<u>چ</u>	en H	6	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest ∞n employee	Former	(W-2/1099-MISC)		organization
	below dotted line)	tor nai	onal		ploy	e 8				and related organizations
		stee	trust		8	pen				
		"	ee			mpensated				
						<b>"</b>				
(1) JOAN BOUGHTON	1.00									
TREASURER		Х		X	_			0	0	0_
(2) ELAINE EISEN	1.00									
BOARD MEMBER	ļ	Х						0	0	0
(3) KAREN PAPP	1.00								]	
SECRETARY		X		Х	_			0	0	0
(4) JIM SUMMERS	1.00									
BOARD MEMBERS		Х						0	0	0
(5) LIAM CONNELL	1.00									
BOARD MEMBER		X			_			0	0	0
(6) LOUISE HAYES	1.00									
BOARD MEMBER	ļ	Х			_			0	0	0
(7) LAUREN JONHSON	1.00_									
VICE PRESIDENT		Х		X				0	0	0
(8) MARY SUE WELCH	1.00									
PRESIDENT		Х		Х				0	0_	0
(9) EILEEN SHANLEY-ROBERTS	1.00									
BOARD MEMBER		X			_			0	0_	<u> </u>
(10) IAIN LOPATA	1.00								:	
BOARD MEMBER		X		_X			Щ	0	0	0_
(11) LENNY GONZALEZ	1.00					,				
BOARD MEMBER	ļ	Х			_		L	0	0	0
(12)REYNA MONTES DE OCA	1.00									
BOARD MEMBER	ļ	X					Щ	0	. 0	0
(13)DAVID VILLALOBOS	1.00									
BOARD MEMBER		Х					Щ	0	0_	0
(14)JILL FORD	1.00									
BOARD MEMBER		X					L	0	0	0

Part	VII Section A. Officers, Directors, Trustees, Ke	y Employee	s, and	Hig	hest	Co	mpens	ate	d Employees (cont	inued)			
	(A) Name and title	(B)  Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimate amount		
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f org an	pensation rom the ganization id related anizations	1
	NNIFER SPARROW ARD MEMBER	1.00_	Х						0	0			0
(16)LI	LIANA GAYTON ARD MEMBER	1.00	Х						0				0
(17)												•	
(18)_													
(19)													
(20)_													
(21)													
(22)													
(23)													
(24)_													
(25)								•					
1b c	Sub-total	n A · ·				• •		<b>&gt;</b>	0	0			0
2	Total number of individuals (including but not limited to reportable compensation from the organization									0	1.		
	Did the organization list any former officer, director, or	trustoo kou	mala	,00 v	or bic		t compe	anc	ated			Yes	No
3 4	employee on line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the sum of repo	r such ındıvıdı	ual					•			3		Χ
	organization and related organizations greater than \$19										4		Х
5	Did any person listed on line 1a receive or accrue confor services rendered to the organization? If "Yes," con	-		-					or individual		5		Х
Secti 1	on B. Independent Contractors  Complete this table for your five highest compensate compensation from the organization. Report compenses year.												
	(A) Name and business address							-	(B) Description of			(C) pensation	
						~							
2	Total number of independent contractors (including b	ut not limited	to tho	se lu	sted	abov	ve) who	 					
-	received more than \$100,000 of compensation from			<b>Þ</b>							•		

Form 990 (2018) WAUKEGAN TO COLLEGE NFP 45-4860376 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Related or Unrelated Revenue excluded from tax Total revenue exempt function business revenue under sections 512-514 Federated campaigns . . . . . . . 1a Contributions, Gifts, Grants and Other Similar Amounts 1b **c** Fundraising events . . . . . . . . . 1c 128,587 1d d Related organizations . . . . . . . 1e e Government grants (contributions) · · 561,540 f All other contributions, gifts, grants, 1f and similar amounts not included above Noncash contributions included in lines 1a-1f \$ 14,328 . . . . . . . 690,127 **Business Code** Program Service Revenue 2a f All other program service revenue . . . . . . g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) · · · · · · · · · · ▶ Income from investment of tax-exempt bond proceeds (ı) Real (II) Personal 6a Gross rents . . . . . . . **b** Less rental expenses · · · · c Rental income or (loss) · · · (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses . . . . c Gain or (loss) d Net gain or (loss) · · · · · · Other Revenue 8a Gross income from fundraising events (not including \$ 128,587 of contributions reported on line 1c) See Part IV, line 18 . . . . . . . . . a b Less direct expenses .... b c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 . . . . . . . . . . a c Net income or (loss) from gaming activities · · · · · · · ▶ 10a Gross sales of inventory, less returns and allowances . . . . . . . . a  $\textbf{b} \ \ \text{Less cost of goods sold} \quad \cdot \ \cdot \ \cdot \ \cdot \ \cdot \ \ \textbf{b}$ c Net income or (loss) from sales of inventory . . . . . . . . . . .

**Business Code** 

900099

2,486

2,486

693,288

2,486

2,486

675

Miscellaneous Revenue

d All other revenue

11a MISCELLANEOUS

e Total. Add lines 11a-11d

Total revenue. See instructions

b c

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, 7b, Fundraising Total expenses Program service Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 23,400 23,400 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members . . . . . Compensation of current officers, directors, 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 262,103 191,597 27,783 42,723 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 977 1,502 9,215 6,736 10 22,601 16,521 2,396 3,684 11 Fees for services (non-employees) b Legal 4,045 C 4,045 d Professional fundraising services See Part IV, line 17 f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 9,586 6,834 27,334 43,754 12 <u>6,4</u>51 6,451 13 8,849 2,311 6,326 212 14 578 405 173 15 16 17,482 1,418 18,900 17 2,322 2,322 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 2,234 2,234 20 21 22 Depreciation, depletion, and amortization 23 3,279 1,803 1,476 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 6,453 6,453 a COLLEGE VISITS 18,033 18,033 SUMMER PROGRAMS 4,555 4,555 c INTERN d EXPANDING HORIZONS 1,923 1,923 33,344 All other expenses 72,000 33,612 5,044 25 Total functional expenses. Add lines 1 through 24e 510,695 336,739 65,157 108,799 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)

. WAUKEGAN TO COLLEGE NFP 45-4860376 Page 11 Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>		<u> </u>
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	345,581	1	525,101
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions) Complete Part II of Schedule L		6	
<b>"</b>	7	Notes and loans receivable, net		7	
set	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D   10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded secunties		11	3,028
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	345,581	16	528,129
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,			
iliti		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated third parties · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	4,820	25	4,775
	26	Total liabilities. Add lines 17 through 25	4,820	26	4,775
		Organizations that follow SFAS 117 (ASC 958), check here ► 🗓 and			
ces		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	304,586	27	483,040
Ba	28	Temporarily restricted net assets	36,175	28	40,314
pui	29	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·	29	
<u> </u>		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and		1	
S 0		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds	<del></del>	30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds		32	
_	33	Total net assets or fund balances	340,761	33	523,354
	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	345,581	34	528,129

		<u>15-486037</u>	6	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				$\cdot \Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	•	593,2	288
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	510,6	<u> 595</u>
3	Revenue less expenses Subtract line 2 from line 1	3	1	.82,5	593
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	340,	761_
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	5	523,3	354
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		• • •		<u>· LL</u>
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1		
	Schedule O			<u> </u>	
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	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
					· 1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				<u> </u>
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in				. 1
	Schedule O				ш
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u> </u>	3b		
EEA			Form	990 (2	2018)

#### SCHEDULE A

**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.

2018

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

(Form 990 or 990-EZ)

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number

UAV	KEG	AN TO COLLEGE NFP					45-48603					
Pa	rt I	Reason for Public Charity	Status (All org	janizations must co	mplete t	his part	See instructions	5				
The	orgar	nization is not a private foundation becau	use it is (For lines 1	through 12, check only	one box )		Λ					
1	$\dot{\Box}$	A church, convention of churches, or as				i).						
2	Ħ	A school described in section 170(b)(1				•	()					
3	Ħ	A hospital or a cooperative hospital serv					$\bigcup$					
4	H	A medical research organization operate	~			/h\/1\/ <b>∆</b> \/i	ii) Enter the					
•	Ш	· · · · · · · · · · · · · · · · · · ·	ed in Conjunction wit	ir a nospital described in s	occion ire	(V)( 1)(A)(1	ny. Emer the					
_	П	hospital's name, city, and state			d bu o oou	ramantal.	unit described in					
5	Ш	An organization operated for the benef		versity owned or operate	o by a gove	mentart	init described in					
		section 170(b)(1)(A)(iv). (Complete Pa										
6	닏	A federal, state, or local government or										
7	X	An organization that normally receives	a substantial part o	fits support from a gover	nmental ur	ut or from t	he general public					
	_	described in section 170(b)(1)(A)(vi). (	Complete Part II)									
8		A community trust described in section										
9		An agricultural research organization de	scribed in section 1	70(b)(1)(A)(ix) operated	ın conjunctı	on with a la	ind-grant college					
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
		university										
10		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross										
		receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its										
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
		acquired by the organization after June										
11	П	An organization organized and operated				4).						
12	Ħ	An organization organized and operate	•	•			rry out the purposes					
_		of one or more publicly supported organ										
		Check the box in lines 12a through 12d						3				
	а	Type I. A supporting organization o						•				
	_	the supported organization(s) the										
		supporting organization You must			0, 1,0 0,00		3,000 0, 11.0					
		Type II. A supporting organization s	•		sunnorted o	rnanization	n(s) by having					
	b											
		control or management of the supp			Ulis Iliai CU	111101 01 1116	mage the supported					
		organization(s) You must comple	•		an with an	d functional	ly intograted with					
	С	Type III functionally integrated.					iy irilegraleu wilii,					
	_	its supported organization(s) (see in					-td(-)					
	d	Type III non-functionally integra										
		that is not functionally integrated. I					ing an attentiveness					
		requirement (see instructions) You	•	•								
	e	Check this box if the organization				Type I, Ty	pe II, Type III					
		functionally integrated, or Type III i	non-functionally inte	grated supporting organi	zation							
	f	Enter the number of supported organiz	ations · · · ·									
	g	Provide the following information abou	t the supported orga	anization(s)	<del>-</del>		··-	<del></del>	·			
	(1	) Name of supported organization	(II) EIN	(III) Type of organization	(iv) is the or	_	(v) Amount of monetary	(vi) Amou				
				(described on lines 1-10 above (see instructions))	listed in you docum		support (see instructions)	other suppo				
						r	,					
					Yes	No						
Δ.												
(A)					<b></b>							
D)												
(B)						ļ						
·C\					ŀ							
(C)				· · · · · · · · · · · · · · · · · · ·								
יחי												
(D)												
E)												
(E)												
Tota	ı				1	!	1					

45-4860376 Page 2

90 or 990-EZ) 2018 WAUKEGAN TO COLLEGE NFP 45-4860376
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III )

Sec	tion A. Public Support						<del></del>
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	302,843	409,043	448,157	490,091	690,127	2,340,261
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						_
4	Total. Add lines 1 through 3	302,843	409,043	448,157	490,091	690,127	2,340,261
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly					1	
	supported organization) included on	·					
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						65,166
6	Public support. Subtract line 5 from line 4						2,275,095
Sec	tion B. Total Support		\	·	···	<del></del> -	
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	302,843	· · · · · · · · · · · · · · · · · · ·	448,157	490,091	690,127	2,340,261
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	331	22	1,421	497	675	2,946
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)				1,358	2,486	3,844
11	Total support. Add lines 7 through 10			_			2,347,051
12	Gross receipts from related activities, etc. (se	e instructions)				12	
13	First five years. If the Form 990 is for the organization, check this box and stop here		<del></del>	fth tax year as a se	ction 501(c)(3)		▶ 🗆
	tion C. Computation of Public Su	· · · · · · · · · · · · · · · · · · ·					
14	Public support percentage for 2018 (line 6, co	•			ı		96.93 %
15	Public support percentage from 2017 Schedu				•	15	98.42 %
16a	33 1/3% support test - 2018. If the organization						. O
	box and stop here. The organization qualifies						▶ 🏻
b	33 1/3% support test - 2017. If the organization						<b>,</b> n
4	this box and stop here. The organization quali						▶ ⊔
17a		•					
	10% or more, and if the organization meets the			· ·	•		
	Part VI how the organization meets the "facts						
	organization						▶ 📙
b	10%-facts-and-circumstances test - 2017.						
	15 is 10% or more, and if the organization mee						
	Explain in Part VI how the organization meets						. 🗂
40	•		40 40 40 47				▶ ∐
18	Private foundation. If the organization did no						, n
	instructions			· · · · · · · · · ·			▶ 📙

45-4860376 Schedule A (Form 990 or 990-EZ) 2018 WAUKEGAN TO COLLEGE NFP Support Schedule for Organizations Described in Section 509(a)(2) Part III (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 Support Calendar year (or fiscal year beginning in), (d) 2017 (e) 2018 (a) 2014 (b) 2015 (c) 2016 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose · · · · Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year C Add lines 7a and 7b · · · · · · · Public support. (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) (b)/2015 (c) 2016 (e) 2018 (a) 2014 (d) 2017 (f) Total Amounts from line 6 . . . . . . . 10a Gross income from interest, dividends, payments received on securities loans, rents. royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 C Add lines 10a and 10b · · Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12,) . . . . . . . . . . . . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 Public support percentage from 2017 Schedule A, Part III, line 15 ...... 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17

18

Investment income percentage from 2017 Schedule A, Part III, line 17

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support tests / 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

18

%

Schedule A (Form 990 or 990-EZ) 2018

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)

	Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Pa	art V)		
Sect	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		1	
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation If historic and continuing relationship, explain	1		
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	<u> </u>		
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			1
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
-	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
<b>4</b> a	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	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	·		
·	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
		4c		$\vdash$
<b>5</b> 0	purposes  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	10		1
Ja	answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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	1		شا
		5a		لتسا
	was accomplished (such as by amendment to the organizing document)	- Ja		<del>                                     </del>
D	Type I or Type II only. Was any added or substituted supported organization part of a class already	5b		ļl
	designated in the organization's organizing document?	5c		<del>                                     </del>
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	30	<del> </del>	<del> </del>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		1	
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	İ		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	<u> </u>		
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	<b>├</b>	<del>                                     </del>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	7		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		<del></del>	├
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		<b> </b>	<u> </u>
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	ļ	<u> </u>
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	- <u>-</u> -		
	in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b>	9a	ļ	<u> </u>
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	9b		
С	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	9с	ļ	
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	10a		
_	Did the erganization have any excess histories holdings in the tay year? (I se Schedule C. Form 4720 to			

determine whether the organization had excess business holdings )

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Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	,		1 1
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		<u> </u>
	, , , , , , , , , , , , , , , , , , , ,	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	11c		
<u>Sec</u>	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	•		
	tax year? If "No," describe in <b>Part VI</b> 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			لـــــا
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		<b></b>
_				
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 carned out the purposes of the supported organization(s) that operated,			اــــا
<u> </u>	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations		Vaa	NI.
4	NAVaria a seconda and the accompany of the discontinuous and second and the design of the discontinuous for th		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			i [
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
500	the supported organization(s). tion D. All Type III Supporting Organizations	_ <u>'</u> _		
360	HOILD: 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			110
•	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			1
	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			i
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions	s).	
а	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	ınstru	ctions	;)
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			<u> </u>
	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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	tractices of each of the supported organizations of fortus details in the traction	3a		
þ	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		

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Part V   Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying true			
instructions. All other Type III non-functionally integrated supporting organiza	tions m	ust complete Sections	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other		•	
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	•	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	•	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally	ıntegra	ted Type III supporting	organization (see
instructions)			

rai	t v Type III Non-Functionally integrated 309(a)(3)	Supporting Organiza	itions (continued)	<del></del>
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exem	pt 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 organizati	ons	
	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			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	organization is responsi	ve	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
S	section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI) See			
	instructions			
	Excess distributions carryover, if any, to 2018			
	From 2013			<del>-</del>
	From 2014		·	
	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)		<del></del>	
j_	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
	Section D, line 7 \$			
	Applied to underdistributions of prior years			i
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, 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 2018 Subtract lines 3h		-	
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2019 Add lines 3j			
	and 4c			
8	Breakdown of line 7			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
_	EVEREE ITOM ALLX			

## SCHEDULE D (Form 990)

Department of the Treasury

**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.

2018

OMB No 1545-0047

Open to Public Inspection

	JKEGAN TO COLLEGE NFP	45-4860376
Pa		
ı aı	Complete if the organization answered "Yes" on Form 990, Part IV, line 6	•
		Unit Friede and other property
1	(a) Donor advised funds  Total number at end of year	(b) Funds and other accounts
2	Aggregate value of contributions to (during year)	<del></del>
3	· · · · · · · · · · · · · · · · · · ·	<del></del>
4	Aggregate value of grants from (during year)	
5	Aggregate value at end of year	
3	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property subject to the organization's exclusive legal control?	
6	terral and and anguine property, caspear to the organizations organization.	
0	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
Pai	conferning impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
rai	<del></del>	
	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)	-
	Protection of natural habitat  Preservation of a certified histor	one structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conserv	
	easement on the last day of the tax year	Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	on during the
	tax year •	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	п., п.,
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easi	sements during the year
_	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easemed	ents during the year
_	<b>&gt;</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	Пу Пи.
_	and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · Yes · · No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement,	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that des	cribes the
Dai	organization's accounting for conservation easements  † III   Organizations Maintaining Collections of Art, Historical Treasures, or Othe	r Similar Assets
Гаі		a Jillilai Assets.
4-	Complete if the organization answered "Yes" on Form 990, Part IV, line 8	lance check
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and ball	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	ance or
	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	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	ance of
	public service, provide the following amounts relating to these items	<b>.</b>
	(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, provi	ide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	· · · · · <b>&gt;</b> \$

	rt III   Organizations Maintaining Co	LLEGE	NFP	rt Histor	ical Tro	acures o	r Otho	45-4860	
3									s (continued)
3	Using the organization's acquisition, accession, a	ina otne	er recoras, cn	eck any or	ne tollowir	ig that are a s	signincar	it use of its	
2	collection items (check all that apply)  Public exhibition		ما □ ام		nao nro <i>ar</i> a	\ma			
a			_	an or excha	nge progra	ams			
b	Scholarly research		e   Oth	ner					
C 4	Preservation for future generations			ale a Coalea	41			D	
4	Provide a description of the organization's collection	ions an	na expiain nov	v tney turtne	er the orga	nization's exe	mpt pur	oose in Part	
_	XIII			1 4 14					
5	During the year, did the organization solicit or reco								Пу. Пы.
Pa	assets to be sold to raise funds rather than to be rt IV   Escrow and Custodial Arrang			i the organi	zation's co	niecuon /	<del></del>	<u> </u>	·   Yes   No
1 4	Complete if the organization and	-		n Form (	000 Par	t IV/ line 0	or rer	orted an amour	at on Form
	990, Part X, line 21	124461	eu les o	ii i Oiiii s	750, i ai	tiv, iiie o,	, or ter	orted an amour	it on i oilii
42				Tan annimbud					<del></del>
1a	Is the organization an agent, trustee, custodian or included on Form 990, Part X?								. Tyes TNo
<b>h</b>									·   Yes   No
b	If "Yes," explain the arrangement in Part XIII and o	comple	ete the following	ig table					
_	Paginging halanas						1	Amo	bunt
C C							-	<del></del>	
đ							10		
e f	- · · · · · · · · · · · · · · · · · · ·						11	<del></del>	
2a	Ending balance								□ Vac □ Na
za b	If "Yes," explain the arrangement in Part XIII Che						-		- =
	rt V Endowment Funds.	CK HEI	e ii tile explan	ation nas b	een provid	eu on Fait Ai			····
	Complete if the organization an	swer	ed "Yes" o	n Form 9	90 Par	t IV line 10	2		
			Current year	(b) Pri		(c) Two years		(d) Three years back	(e) Four years back
1a	Beginning of year balance	(a)	Current year	(6) FI	or year	(c) Iwo years	s back	(d) Three years back	(e) Four years back
b	Contributions		<del></del>	<del>                                     </del>					<del> </del>
c	Net investment earnings, gains, and			<del>                                     </del>	<del>,</del>	<del> </del>		<del></del>	<del> </del>
·	losses · · · · · · · · · · · · · · · · · ·								
d	Grants or scholarships			<del>                                     </del>				<del></del>	<del> </del>
e	Other expenditures for facilities and			<del>                                     </del>		<del>                                     </del>			<del> </del>
Ū	programs								
f	Administrative expenses			<del>                                     </del>		<del></del>			<del> </del>
g g	End of year balance			<del> </del>					
2	Provide the estimated percentage of the current y	ear en	d halance (lin	e 1a. colum	n (a)) held	l as		<u> </u>	
a	Board designated or quasi-endowment	real ell	% Salarice (III)	c ig, coluin	11 (u)) 11010	. 43			
ь	Permanent endowment  %	·							
c	Temporarily restricted endowment		%						
•	The percentages on lines 2a, 2b, and 2c should e	oual 10	_						
3a	Are there endowment funds not in the possession	-		that are hel	d and adm	inistered for t	he		
	organization by		o.g						Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations · · · · · · · · ·								3a(ii)
b	If "Yes" on line 3a(ii), are the related organizations	s listed	as required o	n Schedule	R?				3b
4	Describe in Part XIII the intended uses of the orga		·-						<u> </u>
Pai	rt VI Land, Buildings, and Equipme								
	Complete if the organization an		ed "Yes" o	n Form 9	90, Parl	t IV, line 11	la Se	e Form 990, Par	t X, line 10
	Description of property		(a) Cost or oth			or other basis	ſ .	Accumulated	(d) Book value
			(investm			other)		epreciation	
1a	Land								<del></del>
b	Buildings	۱ أ							
С	Leasehold improvements	۱ أ		<del>.</del>					
d	Equipment	۱ أ					-		
e	Other	۱ أ							
Total	I. Add lines 1a through 1e (Column (d) must equal F	Form 9:	90, Part X, coi	lumn (B), lin	e 10c)				<del></del>

			<u>-</u>
Schedule D (Form 990) 2018 WAUKEGAN TO COL Part VII Investments - Other Securities.		45-486	
Complete if the organization answered	Yes on Form 990, Pai	TIV, line IID See Form 990,	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market v	
(Including name of security)  (1) Financial derivatives		Cost of Brid-or-year market	YAIUO
(2) Closely-held equity interests		<del></del>	
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.			
Complete if the organization answered	d "Yes" on Form 990, Pa	rt IV, line 11c See Form 990,	Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuatio Cost or end-of-year market v	
(1)			
(2)			· · · · · · · · · · · · · · · · · · ·
(3)			
(4)			
(5)			
(6)			<del>-,</del>
(7)			<del></del>
(8)			
(9)			
Total (Column (b) must equal Form 990, Part X, col (8) line 13 )			-
Part IX Other Assets.  Complete if the organization answered	d "Yes" on Form 990, Pa	rt IV, line 11d See Form 990,	
	escription		(b) Book value
(1)			
(2)			
(3)	<del></del> .		
(4)			
(5)			
(6) (7)	<del></del>		
(8)			
(9)		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			
Part X Other Liabilities.			
Complete if the organization answere line 25	d "Yes" on Form 990, Pa	rt IV, line 11e or 11f See Forr	n 990, Part X,
1. (a) Description of liability	(b) Book value		· · · · · · · · · · · · · · · · · · ·
(1) Federal income taxes	(b) Book value	7	
(2) DEPOSITS	4,775	7	,
(3)		7	
(4)		7	
(5)		7	
(6)			
(7)			
(8)			
(9)			

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.

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

### **SCHEDULE G** (Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ

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

2018

OMB No 1545-0047

Department of the Treasury Name of the or

Open to Public

Name of the organization	GO to www.iis govi	7 0777330 101 11130	Tuctions a	are latest information		Employer ide	intification number
WAUKEGAN TO COLLEGE NFP					ŀ	45-48	60376
Part I Fundraising Activities	. Complete if	the organiza	tion ans	wered "Yes" on F	orm 990	, Part IV,	line 17.
Form 990-EZ filers are no						_	_
1 Indicate whether the organization rais	ed funds through	any of the follow	ing activiti	es Check all that appl	у		
a Mail solicitations				of non-government gra	nts		
b Internet and email solicitations		f 🗌 So	olicitation (	of government grants			
c Phone solicitations		g 🗌 Sp	oecial fund	Iraising events			
d In-person solicitations							
2a Did the organization have a written or	oral agreement w	ith any individua	ıl (ıncludın	g officers, directors, tru	ustees,		
or key employees listed in Form 990,	Part VII) or entity	in connection wit	th profess	ional fundraising service	ces?	_ Y	es 🗌 No
b if "Yes," list the 10 highest paid individ	luals or entities (fu	ındraisers) pursi	uant to agi	eements under which	the fundrais	ser is to be	
compensated at least \$5,000 by the o	rganization						
() blome and address of ordered		(III) Did fundra	ser have	(i.) C		unt paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(II) Activity	custody or co	ontrol of	(iv) Gross receipts from activity		ained by) er listed in	(or retained by)
		contribute	ons?	,		(i)	organization
	1	Yes	No				
1							
2							
3							
<del></del>							
4							
				·			
5			J				
			_				
6							
7							
		-					
8			ļ				
9	<del></del>						
3							
10	<del> </del>	<del>                                     </del>		<del></del>			
		[ [	ĺ				
						· <del> "</del>	
Total							
3 List all states in which the organization				ons or has been notified	d it is exemi	ot from	
registration or licensing							
regionalism or mosticing							
						·	
				<del></del>			
							·····

	rt II			nswered "Yes" on Form	990, Part IV, line 18, or re	
		gross receipts greater than		(b) Event #2	(c) Other events	(d) Total events
			OCTOBER FEST		None	(add col (a) through col (c))
е			(event type)	(event type)	(total number)	(-1)
Revenue	1	Gross receipts				
æ	2	Less Contributions				
	3	Gross income (line 1 minus				
		line 2)				
	4	Cash prizes				
	-	Odan prizes				
	5	Noncash prizes · · · · · · ·				
S	6	Rent/facility costs · · · · · · ·				
ense		Trendrating cools				
Expe	7	Food and beverages · · · · ·				
Direct Expenses	8	Entertainment				
۵		Lines daminera				
	9	Other direct expenses · · · · ·				
	10	Direct expense summary Add lines 4	through 9 in column (d)			
	11	Net income summary Subtract line 1	0 from line 3, column (d)			
$D_{\sim}$	rt II	Gaming. Complete if the or	ganization answered "Y	'ac" an Earm 000 Dart IV	/ line 10 er renembed mes	
Га				es on rollingso, raitiv	, line 19, or reported moi	re
		than \$15,000 on Form 990	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
				<u> </u>	(c) Other gaming	
Revenue 7		than \$15,000 on Form 990	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
	1		EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue		than \$15,000 on Form 990	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue	1 2	than \$15,000 on Form 990  Gross revenue	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue	1	than \$15,000 on Form 990.  Gross revenue	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue	1 2	than \$15,000 on Form 990  Gross revenue	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
	1 2 3 4	than \$15,000 on Form 990  Gross revenue	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue	1 2 3	than \$15,000 on Form 990  Gross revenue	EZ, line 6a	(b) Pull tabs/instant		(d) Total gaming (add
Revenue	1 2 3 4	than \$15,000 on Form 990  Gross revenue	EZ, line 6a (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue	1 2 3 4 5	than \$15,000 on Form 990  Gross revenue	EZ, Irne 6a (a) Bingo  Yes % No	(b) Pull tabs/instant bingo/progressive bingo  Yes%	(c) Other gaming	(d) Total gaming (add
Revenue	1 2 3 4 5	than \$15,000 on Form 990  Gross revenue	EZ, Irne 6a (a) Bingo  Yes % No	(b) Pull tabs/instant bingo/progressive bingo  Yes%	(c) Other gaming	(d) Total gaming (add
Revenue	1 2 3 4 5	than \$15,000 on Form 990  Gross revenue	Yes % No  through 5 in column (d)	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue	1 2 3 4 5 6 7 8	than \$15,000 on Form 990  Gross revenue	Yes %  Ithrough 5 in column (d)  Act line 7 from line 1, column	(b) Pull tabs/instant bingo/progressive bingo  Yes %  No	(c) Other gaming	(d) Total gaming (add
Direct Expenses Revenue	1 2 3 4 5 7 8	than \$15,000 on Form 990  Gross revenue	Yes % No  2 through 5 in column (d) act line 7 from line 1, column	(b) Pull tabs/instant bingo/progressive bingo  Yes %  No in (d)	(c) Other gaming	(d) Total gaming (add
Direct Expenses Revenue	1 2 3 4 5 6 7 8 Entist	than \$15,000 on Form 990  Gross revenue	Yes % No  2 through 5 in column (d) act line 7 from line 1, column	(b) Pull tabs/instant bingo/progressive bingo  Yes %  No in (d)	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses Revenue	1 2 3 4 5 6 7 8 Entist	than \$15,000 on Form 990  Gross revenue	Yes % No  2 through 5 in column (d) act line 7 from line 1, column	(b) Pull tabs/instant bingo/progressive bingo  Yes %  No in (d)	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
grap 6 Direct Expenses Revenue	1 2 3 4 5 6 7 8 En is t	than \$15,000 on Form 990  Gross revenue	Yes % No 2 through 5 in column (d) act line 7 from line 1, column in conducts gaming activities in each of the	(b) Pull tabs/instant bingo/progressive bingo  Yes %  No  In (d)	(c) Other gaming	(d) Total gaming (add col (a) through col (c))

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 45-4860376 WAUKEGAN TO COLLEGE NFP 01. Form 990 governing body review (Part VI, line 11) FORM 990 IS PRESENTED TO THE BOARD FOR REVIEW. 02. Conflict of interest policy compliance (Part VI, line 12c) THE BOARD DISCUSSED DURING THEIR MONTHLY MEETINGS. 03. CEO, executive director, top management comp (Part VI, line 15a) THE BOARD OF DIRECTORS MONITORS PERFORMANCE AND APPROVES COMPENSATION. 04. Other officer or key employee compensation (Part VI, line 15b BOARD OF DIRECTORS APPROVES COMPENSATION. 05. Governing documents, etc, available to public (Part VI, line 19) AVAILABLE UPON REQUEST. 06. List of other expenses (Part IX, line 24e) THE ORGANIZATION HIRED A PROFESSIONAL CONSULTANT TO HELP ADVANCE THEIR PROGRAMS.