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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
Versiti Illinois Inc

% JOANNA MCCOY
Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1200 N Highland Avenue

City or town, state or province, country, and ZIP or foreign postal code
Aurora, IL 60506

F Name and address of principal officer:
Chris Miskel
638 N 18th Street
Milwaukee, WI 532332121

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

D Employer identification number
36-2179768

E Telephone number
(630) 892-7055

G Gross receipts \$ 51,238,955

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀(insert no.) ☐ 4947(a)(1) or ☐ 527
J Website: ▶ www.versiti.org

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

L Year of formation: 1943 M State of legal domicile: IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO SERVE HOSPITALS BY RECRUITING VOLUNTEER DONORS, COLLECTING, PROCESSING, TESTING, AND DISTRIBUTING BLOOD AND BLOOD COMPONENTS.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.
3 Number of voting members of the governing body (Part VI, line 1a) 3 16
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 454
6 Total number of volunteers (estimate if necessary) 6 15
7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0
b Net unrelated business taxable income from Form 990-T, line 39 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 8 6,653 3,637
9 Program service revenue (Part VIII, line 2g) 9 51,111,157 49,736,838
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1,024,270 1,083,706
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 134,680 283,773
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 52,276,760 51,107,954

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 13 81,522 117,094
14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 21,608,495 19,536,498
16a Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 0
b Total fundraising expenses (Part IX, column (D), line 25) ▶0
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 17 30,015,693 31,676,281
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 18 51,705,710 51,329,873
19 Revenue less expenses. Subtract line 18 from line 12 19 571,050 -221,919

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 20 51,988,055 55,435,935
21 Total liabilities (Part X, line 26) 21 5,256,724 4,943,290
22 Net assets or fund balances. Subtract line 21 from line 20 22 46,731,331 50,492,645

Part II Signature Block

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

Sign Here

Signature of officer

CHRIS MISKEL CEO
Type or print name and title

2020-11-12
Date

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date
Firm's name ▶ Grant Thornton LLP Firm's EIN ▶
Firm's address ▶ 100 E WISCONSIN AVE
MILWAUKEE, WI 53202 Phone no. (414) 289-8200

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ ☒**1** Briefly describe the organization's mission:

WE ARE BLOOD HEALTH INNOVATORS WHO ENHANCE LIVES THRU DISCOVERY, DIAGNOSIS, AND TREATMENT. OUR MISSION IS TO PROVIDE AND MAINTAIN AN ADEQUATE SUPPLY OF BLOOD AND BLOOD PRODUCTS FOR AREA HOSPITALS TO DRAW UPON IN ORDER TO MEET THE ANTICIPATED AND ACTUAL NEEDS OF PATIENTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 43,196,965 including grants of \$ 117,094) (Revenue \$ 50,002,930)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 43,196,965

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No

Part IV Checklist of Required Schedules (continued)

		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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

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Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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	No
1a	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.		
b	Enter the number of voting members included in line 1a, above, who are independent	15	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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	Yes
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	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

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

☐ 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:
▶ JOANNA MCCOY 1200 N HIGHLAND AVE AURORA, IL 60506 (630) 801-3147

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

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

[illegible]

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Part VIII Statement of Revenue													
Check if Schedule O contains a response or note to any line in this Part VIII										☐			
										(A)	(B)	(C)	(D)
										Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns		1a										
	b Membership dues		1b										
	c Fundraising events		1c										
	d Related organizations		1d										
	e Government grants (contributions)		1e										
	f All other contributions, gifts, grants, and similar amounts not included above		1f	3,637									
	g Noncash contributions included in lines 1a - 1f:\$		1g										
	h Total. Add lines 1a-1f ▶		3,637										
Program Service Revenue	2a BLOOD SERVICES		Business Code										
			621500	46,859,933		46,859,933		0		0			
	b DIAGNOSTIC LABORATORIES		621500	2,876,905		2,876,905		0		0			
	c												
	d												
	e												
	f All other program service revenue.												
	g Total. Add lines 2a-2f. ▶		49,736,838										
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			1,075,932						1,075,932			
	4 Income from investment of tax-exempt bond proceeds ▶			0									
	5 Royalties ▶			0									
			(i) Real	(ii) Personal									
	6a Gross rents		6a										
	b Less: rental expenses		6b										
	c Rental income or (loss)		6c	0		0							
	d Net rental income or (loss) ▶			0									
			(i) Securities	(ii) Other									
	7a Gross amount from sales of assets other than inventory		7a	133,973									
	b Less: cost or other basis and sales expenses		7b	126,199									
	c Gain or (loss)		7c	7,774									
	d Net gain or (loss) ▶			7,774						7,774			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a	0									
	b Less: direct expenses		8b	0									
	c Net income or (loss) from fundraising events . . ▶			0									
	9a Gross income from gaming activities. See Part IV, line 19		9a	0									
	b Less: direct expenses		9b	0									
	c Net income or (loss) from gaming activities . . ▶			0									
	10a Gross sales of inventory, less returns and allowances		10a	43,601									
b Less: cost of goods sold		10b	4,802										
c Net income or (loss) from sales of inventory . . ▶			38,799		38,799								
Miscellaneous Revenue			Business Code										
11a EARNED DISCOUNTS		621500		198,687		198,687							
b RISK RETENTION REFUND		621500		28,606		28,606							
c PATRONAGE DIVIDENDS		900099		14,681		0		0		14,681			
d All other revenue				3,000				0		3,000			
e Total. Add lines 11a-11d ▶					244,974								
12 Total revenue. See instructions ▶					51,107,954		50,002,930		0		1,101,387		

Form 990 (2019)

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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	51,976	51,976		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	65,118	65,118		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	845,070		845,070	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	14,454,797	13,229,467	1,225,330	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	740,318	673,667	66,651	
9 Other employee benefits	2,462,542	2,170,705	291,837	
10 Payroll taxes	1,033,771	898,223	135,548	
11 Fees for services (non-employees):				
a Management	0			
b Legal	13,467	4,000	9,467	
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	6,964		6,964	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,206,786	8,084,007	122,779	0
12 Advertising and promotion	134,110	34,110	100,000	
13 Office expenses	224,153	207,475	16,678	
14 Information technology	507,427	384,107	123,320	
15 Royalties	0			
16 Occupancy	1,848,672	1,097,958	750,714	
17 Travel	555,589	481,883	73,706	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	10,321	8,869	1,452	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,175,919	647,573	528,346	
23 Insurance	131,044		131,044	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a COST OF IMPORTED PRODUCTS	10,290,951	10,290,951	0	0
b VERSITI SERVICES ALLOCATION	4,098,630	621,722	3,476,908	
c MEDICAL LAB SUPPLIES	3,060,838	3,060,838	0	0
d DONOR COST	757,802	757,802		
e All other expenses	653,608	426,514	227,094	
25 Total functional expenses. Add lines 1 through 24e	51,329,873	43,196,965	8,132,908	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,000	1	0
	2	Savings and temporary cash investments		4,828,478	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		5,975,704	4	9,500,162
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	0
	7	Notes and loans receivable, net		416,043	7	436,269
	8	Inventories for sale or use		1,879,174	8	2,000,841
	9	Prepaid expenses and deferred charges		590,460	9	139,272
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	28,273,505		
	b	Less: accumulated depreciation	10b	21,564,222		
	11	Investments—publicly traded securities		31,321,110	11	0
	12	Investments—other securities. See Part IV, line 11		0	12	36,441,268
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		206,740	15	208,840
16	Total assets. Add lines 1 through 15 (must equal line 34)		51,988,055	16	55,435,935	
Liabilities	17	Accounts payable and accrued expenses		5,106,142	17	4,789,478
	18	Grants payable		0	18	0
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	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		150,582	25	153,812
	26	Total liabilities. Add lines 17 through 25		5,256,724	26	4,943,290
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		46,731,331	27	50,492,645
	28	Net assets with donor restrictions		0	28	0
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
32	Total net assets or fund balances		46,731,331	32	50,492,645	
33	Total liabilities and net assets/fund balances		51,988,055	33	55,435,935	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,107,954
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,329,873
3	Revenue less expenses. Subtract line 2 from line 1	3	-221,919
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	46,731,331
5	Net unrealized gains (losses) on investments	5	4,004,170
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	-20,937
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	50,492,645

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
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?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Software ID:

Software Version:

EIN: 36-2179768

Name: Versiti Illinois Inc

Form 990 (2019)

Form 990, Part III, Line 4a:

COLLECT, TEST, PROCESS AND DISTRIBUTE BLOOD AND BLOOD COMPONENTS TO OVER 67 AREA HOSPITALS. VERSITI ILLINOIS WORKS TOWARD COLLECTING 141,000 UNITS OF BLOOD AND DISTRIBUTING 206,000 BLOOD COMPONENTS ANNUALLY.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRIS MISKEL CEO	10.0 45.0	X		X				165,170	752,436	41,657
THOMAS ABSHIRE MD EVP MSI & CHIEF MED OFFICER	0.0 55.0			X				0	577,401	24,817
BRIAN BAUTISTA EVP & Chief Operating Officer	10.0 45.0			X				99,242	452,104	41,657
GILBERT C WHITE MD EVP OF RESEARCH - thru 6/19	0.0 55.0			X				0	500,655	37,934
GITESH DUBAL EVP & CHIEF MARKETING OFFICER	10.0 45.0			X				85,418	389,130	41,657
ANTHONY WATKINS EVP & CHIEF FINANCIAL OFFICER	10.0 45.0			X				85,337	388,754	40,559
JAMES WEIDNER EVP & CHIEF HR OFFICER	10.0 45.0			X				69,840	318,160	41,551
LYNNE BRIGGS VP & CHIEF INFORMATION OFFICER	10.0 45.0			X				60,040	273,516	44,457
BART REUTER EVP & GEN. COUNSEL-As Of 1/19	10.0 45.0			X				57,061	259,942	40,545
BRADLEY PIETZ EVP & Chief Innovation Officer	10.0 45.0			X				55,248	251,687	25,901

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARGARET MCELLIGOTT VP & CHIEF QUALITY OFFICER	10.0 45.0			X				51,342	233,897	36,791
MAUREEN KWIECINSKI FORMER EVP & GEN. COUNSEL	0.0 0.0						X	52,992	241,410	729
COLLEEN MCCARTHY Chief of Staff & VP Organ Don.	10.0 45.0			X				45,625	207,844	38,262
ANN LIETZ Exec Dir Business Development	55.0 0.0					X		260,422	0	23,639
DANA KNIGHT DIRECTOR OF QUALITY ASSURANCE	55.0 0.0					X		148,246	0	14,865
JOANNA MCCOY CONTROLLER	55.0 0.0					X		145,971	0	17,070
SHELLEY M WHITSEY-MIT Regional Mgr Donor Recruitment	55.0 0.0					X		111,830	0	20,167
JESSICA S DROUILLARD Director, IR Lab Operations	55.0 0.0					X		113,606	0	9,196
DALE KENT CHAIR	1.0 4.0	X		X				0	0	0
L ALAN WHALEY VICE CHAIR	1.0 4.0	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MITCHELL G WATT SECRETARY	1.0 3.0	X		X				0	0	0
JAMES M RAUH TREASURER	1.0 4.0	X		X				0	0	0
CATHY BUCK BOARD MEMBER	1.0 3.0	X						0	0	0
FRED GEILFUSS BOARD MEMBER; LEGAL ADVISOR	1.0 3.0	X						0	0	0
DAVID GINSBURG MD BOARD MEMBER - AS OF 11/19	1.0 3.0	X						0	0	0
GAIL HANSON BOARD MEMBER - AS OF 11/19	1.0 3.0	X						0	0	0
THOMAS HAUSKE JR BOARD MEMBER	1.0 3.0	X						0	0	0
GREGORY LARKIN MD BOARD MEMBER	1.0 4.0	X						0	0	0
ROBERT H MANEGOLD BOARD MEMBER	1.0 4.0	X						0	0	0
JEFFREY S MCDONALD BOARD MEMBER	1.0 3.0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RON MILLER BOARD MEMBER - AS OF 1/19	1.0 3.0	X						0	0	0
JOHN PERRAS BOARD MEMBER	1.0 3.0	X						0	0	0
PETER ZIEGLER BOARD MEMBER	1.0 4.0	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Versiti Illinois Inc

Employer identification number
36-2179768

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-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 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						
6	Public support. Subtract line 5 from line 4.						
Section B. Total Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
9	Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						
Section C. Computation of Public Support Percentage							
14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))					14	
15	Public support percentage for 2018 Schedule A, Part II, line 14					15	
16a	33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐						
b	33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐						
17a	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐						
b	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐						
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐						

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

(Complete only if you checked the box on line 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) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,060	1,527	2,590	6,653	3,637	15,467
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	49,573,861	51,410,124	53,103,939	51,247,872	50,007,732	255,343,528
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	49,574,921	51,411,651	53,106,529	51,254,525	50,011,369	255,358,995
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
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.	5,636,817	4,418,127	4,016,266	5,335,972	5,006,469	24,413,651
c Add lines 7a and 7b.	5,636,817	4,418,127	4,016,266	5,335,972	5,006,469	24,413,651
8 Public support. (Subtract line 7c from line 6.)						230,945,344

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6.	49,574,921	51,411,651	53,106,529	51,254,525	50,011,369	255,358,995
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	346,203	466,528	761,450	937,136	1,075,932	3,587,249
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						0
c Add lines 10a and 10b.	346,203	466,528	761,450	937,136	1,075,932	3,587,249
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	364	3,693	384	421	17,681	22,543
13 Total support. (Add lines 9, 10c, 11, and 12.)	49,921,488	51,881,872	53,868,363	52,192,082	51,104,982	258,968,787
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	89.179 %
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	88.101 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	1.385 %
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	1.125 %

- 19a 33 1/3% support tests—2019.** 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—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
4a		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
7		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9a		
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? <i>If "Yes," provide detail in Part VI.</i>		
9b		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c		
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)? <i>If "Yes," answer line 10b below.</i>		
10a		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
10b		

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions):		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer (a) and (b) below.		
a 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
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? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1		☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.	
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)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			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-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions			Current Year
1			Amounts paid to supported organizations to accomplish exempt purposes
2			Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity
3			Administrative expenses paid to accomplish exempt purposes of supported organizations
4			Amounts paid to acquire exempt-use assets
5			Qualified set-aside amounts (prior IRS approval required)
6			Other distributions (describe in Part VI). See instructions
7			Total annual distributions. Add lines 1 through 6.
8			Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions
9			Distributable amount for 2019 from Section C, line 6
10			Line 8 amount divided by Line 9 amount

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1			Distributable amount for 2019 from Section C, line 6
2			Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.
3			Excess distributions carryover, if any, to 2019:
a			From 2014.
b			From 2015.
c			From 2016.
d			From 2017.
e			From 2018.
f			Total of lines 3a through e
g			Applied to underdistributions of prior years
h			Applied to 2019 distributable amount
i			Carryover from 2014 not applied (see instructions)
j			Remainder. Subtract lines 3g, 3h, and 3i from 3f.
4			Distributions for 2019 from Section D, line 7:
			\$
a			Applied to underdistributions of prior years
b			Applied to 2019 distributable amount
c			Remainder. Subtract lines 4a and 4b from 4.
5			Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.
6			Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
7			Excess distributions carryover to 2020. Add lines 3j and 4c.
8			Breakdown of line 7:
a			Excess from 2015.
b			Excess from 2016.
c			Excess from 2017.
d			Excess from 2018.
e			Excess from 2019.

Additional Data

Software ID:
Software Version:
EIN: 36-2179768
Name: Versiti Illinois Inc

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization Versiti Illinois Inc	Employer identification number 36-2179768
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	\$
3	Volunteer hours for political campaign activities (see instructions)	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV.	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000	\$1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ Yes ☐ No	

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		216
j	Total. Add lines 1c through 1i			216
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	LOBBYING ACTIVITIES \$216 OF THE DUES PAID TO AMERICA'S BLOOD CENTERS HAS BEEN ALLOCATED TO LOBBYING.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Versiti Illinois Inc

Employer identification number
36-2179768

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

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

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the 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 during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i)

Revenue included on Form 990, Part VIII, line 1 ► \$

(ii)

Assets included in Form 990, Part X ► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a

Revenue included on Form 990, Part VIII, line 1 ► \$

b

Assets included in Form 990, Part X ► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D

Schedule D (Form 990) 2019

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

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

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	77,632,272	86,045,725	76,439,806	72,401,518	
b Contributions	2,512,261	301,738	2,294,914	793,676	
c Net investment earnings, gains, and losses	14,163,049	-4,472,887	11,411,375	7,045,041	
d Grants or scholarships					
e Other expenditures for facilities and programs	4,314,900	4,242,304	4,100,370	3,800,429	
f Administrative expenses					
g End of year balance	89,992,682	77,632,272	86,045,725	76,439,806	

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶ 97.760 %

b

Permanent endowment ▶ 2.240 %

c

Temporarily restricted endowment ▶

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

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		425,219		425,219
b Buildings		14,588,125	10,565,683	4,022,442
c Leasehold improvements		285,186	33,272	251,914
d Equipment		10,459,091	8,967,210	1,491,881
e Other		2,515,884	1,998,057	517,827
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				6,709,283

Schedule D (Form 990) 2019

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) MUTUAL FUNDS	36,441,268	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	36,441,268	

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	153,812

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 ☒

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	54,882,669
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	4,004,170
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	4,802
e	Add lines 2a through 2d	2e	4,008,972
3	Subtract line 2e from line 1	3	50,873,697
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,964
b	Other (Describe in Part XIII.)	4b	227,293
c	Add lines 4a and 4b	4c	234,257
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	51,107,954

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	51,121,355
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	25,739
e	Add lines 2a through 2d	2e	25,739
3	Subtract line 2e from line 1	3	51,095,616
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,964
b	Other (Describe in Part XIII.)	4b	227,293
c	Add lines 4a and 4b	4c	234,257
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	51,329,873

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 36-2179768
Name: Versiti Illinois Inc

Supplemental Information

Return Reference	Explanation
PART V	ENDOWMENTS THE FILING ORGANIZATION IS A BENEFICIARY OF THE VERSITI BLOOD RESEARCH INSTITUTE FOUNDATION'S ("VBRIF") ENDOWMENT AS A SUPPORTED ORGANIZATION. THE BOARD DESIGNATED ENDOWMENT FUNDS ARE DESIGNATED BY THE BOARD AS ENDOWMENT FUNDS TO ENSURE THE CONTINUING AVAILABILITY OF FUNDS FOR RESEARCH PURPOSES.

Supplemental Information

Return Reference	Explanation
PART X	INCOME TAXES VERSITI, WISCONSIN, ILLINOIS, MICHIGAN, INDIANA AND THE FOUNDATION HAVE ALL RECEIVED TAX DETERMINATION LETTERS CONFIRMING THAT THE ORGANIZATIONS QUALIFY AS TAX-EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). THE ORGANIZATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. VERSITI, WISCONSIN, ILLINOIS, MICHIGAN, INDIANA AND THE FOUNDATION ARE EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(3), THOUGH THEY ARE SUBJECT TO TAX ON INCOME UNRELATED TO THEIR EXEMPT PURPOSES, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. THE ORGANIZATION HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. WISCONSIN AND THE FOUNDATION HAVE FILED FEDERAL AND STATE OF WISCONSIN INCOME TAX RETURNS TO REPORT UNRELATED BUSINESS INCOME THROUGH 2009 AND ARE NO LONGER SUBJECT TO TAX AUTHORITY EXAMINATIONS FOR YEARS PRIOR TO 2010 UNDER THE FEDERAL AND STATE STATUTE. MANAGEMENT HAS DETERMINED THAT THERE IS NO UNRELATED BUSINESS INCOME TO REPORT FOR WISCONSIN FOR 2010 THROUGH 2017, AND INCOME TAX RETURNS ARE NOT REQUIRED TO BE FILED; HOWEVER INCOME TAX RETURNS WERE FILED FOR 2018. THEREFORE, AS THE STATUTE OF LIMITATIONS WILL REMAIN OPEN FOR RETURNS NOT FILED, TAX YEARS 2010 THROUGH 2017, WILL REMAIN OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. MANAGEMENT HAS DETERMINED THAT THE FOUNDATION WILL BE FILING INCOME TAX RETURNS FOR TAX YEARS 2016 AND 2017. THEREFORE, AS THE STATUTE OF LIMITATIONS WILL REMAIN OPEN FOR RETURNS NOT FILED, TAX YEARS 2010 THROUGH 2015, WILL REMAIN OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. MICHIGAN HAS NOT HISTORICALLY FILED ANY UNRELATED BUSINESS INCOME TAX RETURNS; THEREFORE, TAX YEARS REMAIN OPEN FOR YEARS IN WHICH AN INCOME TAX RETURN HAS NOT BEEN FILED; HOWEVER INCOME TAX RETURNS WERE FILED FOR 2018 BUT ARE NOT EXPECTED TO BE FILED FOR 2019. IN YEARS PRIOR TO 2014, ILLINOIS FILED BOTH FEDERAL AND STATE OF ILLINOIS INCOME TAX RETURNS TO REPORT A ZERO AMOUNT OF UNRELATED BUSINESS INCOME. MANAGEMENT HAS DETERMINED THAT THERE IS NO UNRELATED BUSINESS INCOME TO REPORT FOR ILLINOIS FOR TAX YEARS 2014 THROUGH 2017; HOWEVER INCOME TAX RETURNS WERE FILED FOR 2018 BUT ARE NOT EXPECTED TO BE FILED FOR

Supplemental Information

Return Reference	Explanation
PART X	2019. THEREFORE, AS THE STATUTE OF LIMITATIONS WILL REMAIN OPEN FOR RETURNS NOT FILED, TA X YEARS 2014 THROUGH 2017, WILL REMAIN OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. IN YEARS PRIOR TO 2014, INDIANA FILED FEDERAL UNRELATED BUSINESS INCOME TAX RETURNS TO REP ORT A ZERO AMOUNT OF UNRELATED BUSINESS INCOME. IN 2014 THROUGH 2016, INDIANA FILED FEDERA L AND INDIANA RETURNS TO REPORT AN UNRELATED BUSINESS LOSS. IN 2017 AND 2018, INDIANA FILE D INCOME TAX RETURNS TO REPORT A ZERO AMOUNT OF UNRELATED BUSINESS INCOME IN ORDER TO MAIN TAIN THE PRIOR YEAR NET OPERATING LOSS. INDIANA IS EXPECTED TO FILE INCOME TAX RETURNS FOR 2019. THE STATUTE OF LIMITATIONS WILL REMAIN OPEN FOR BOTH FEDERAL AND STATE PURPOSES FOR ANY RETURNS NOT FILED. VERSITI HAS NOT FILED ANY UNRELATED BUSINESS INCOME TAX RETURNS; T HEREFOR E THE YEARS SINCE 2012, THE YEAR OF INCEPTION, ARE STILL OPEN TO EXAMINATION. THE O RGANIZATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS. SALUS HAS BEEN ORGANI ZED AS A LIMITED LIABILITY COMPANY AND, ACCORDINGLY, IS NOT SUBJECT TO FEDERAL OR STATE IN COME TAXES. ALL INCOME TAX ATTRIBUTES OF THE ENTITY ARE PASSED THROUGH TO ITS SOLE MEMBER, WISCONSIN. THE ENTITY IS INCLUDED IN THE CONSOLIDATED INFORMATION RETURN FILED BY VERSITI . CENETRON IS FORMED AS A LIMITED LIABILITY COMPANY AND HAS ELECTED TO BE TREATED AS A WHO LLY OWNED LLC THAT HAS ELECTED TO BE TREATED AS A C-CORPORATION FOR TAX PURPOSES AND SO IS SUBJECT TO FEDERAL AND STATE INCOME TAXES. INCOME TAXES ARE PROVIDED FOR THE TAX EFFECTS OF TRANSACTIONS REPORTED BY CENETRON AND CONSIST OF TAXES CURRENTLY DUE AND DEFERRED TAXES . DEFERRED TAXES ARE RECOGNIZED FOR DIFFERENCES BETWEEN THE BASIS OF ASSETS AND LIABILITIE S FOR FINANCIAL STATEMENT AND INCOME TAX PURPOSES. THE DIFFERENCES RELATED PRIMARILY TO IN VENTORY, PROPERTY AND EQUIPMENT, INTANGIBLE ASSETS AND ACCRUED LIABILITIES. THE DEFERRED T AX ASSETS AND LIABILITIES REPRESENT THE FUTURE TAX RETURN CONSEQUENCES OF THOSE DIFFERENCE S, WHICH WILL EITHER BE TAXABLE OR DEDUCTIBLE WHEN THE ASSETS AND LIABILITIES ARE RECOVER E D OR SETTLED. CENETRON IS SUBJECT TO TAXATION IN THE UNITED STATES AND VARIOUS CERTAIN, LI MITED STATE JURISDICTIONS. THE ORGANIZATION RECOGNIZES, IF NECESSARY, INTEREST AND PENALTI ES RELATED TO UNRECOGNIZED TAX BENEFITS IN THE PROVISION FOR INCOME TAXES. THERE WERE NO I NTEREST OR PENALTIES RELATED TO INCOME TAXES THAT HAVE BEEN ACCRUED OR RECOGNIZED AS OF AN D FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D	OTHER ADJUSTMENTS TO REVENUE COST OF GOODS SOLD 4,802 PART XI, LINE 4B OTHER ADJUSTMENTS TO REVENUE EARNED DISCOUNTS 198,687 RISK RETENTION REFUND 28,606 ----- TOTAL 227,293

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D	OTHER ADJUSTMENTS TO EXPENSES COST OF GOODS SOLD 4,802 BAD DEBT RESERVE ADJUSTMENT 20,937 ----- TOTAL 25,739 PART XII, LINE 4B OTHER ADJUSTMENTS TO EXPENSES EARNED DISCOUNTS 198,687 RISK RETENTION REFUND 28,606 ----- TOTAL 227,293

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
Versiti Illinois Inc

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number
36-2179768

Part I

General Information on Grants and Assistance

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

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	12	65,118			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U.S. From time to time, VERSITI ILLINOIS PROVIDES GRANT ASSISTANCE TO VERSITI WISCONSIN, INC. AND OTHER ORGANIZATIONS. THESE FUNDS WILL SUPPORT FUTURE BLOOD RESEARCH AND OTHER INITIATIVES TO SERVE MORE PATIENTS AND REDUCE OVERALL COSTS. MONITORING THE INVESTMENT OF THESE FUNDS, THE DISTRIBUTIONS AND WHAT THESE FUNDS ARE USED FOR IS COMPLETED BY THE LEADERSHIP OF VERSITI. ADDITIONALLY, THE FOLLOWING ORGANIZATION OFFERS SCHOLARSHIPS TO EMPLOYEES AND COMMUNITY MEMBERS IF CERTAIN CRITERIA ARE MET. THE SCHOLARSHIPS ARE SENT TO THE COLLEGE OR UNIVERSITY WHERE THE STUDENT IS ENROLLED.

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization Versiti Illinois Inc		Employer identification number 36-2179768

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
☒ First-class or charter travel	☐ Housing allowance or residence for personal use		
☐ Travel for companions	☐ Payments for business use of personal residence		
☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
☒ Compensation committee	☐ Written employment contract		
☐ Independent compensation consultant	☒ Compensation survey or study		
☒ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b Yes	
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b Yes	
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7 Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Part III Supplemental Information

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

Return Reference	Explanation
Part I, Line 1A	CHARTER TRAVEL VERSITI ILLINOIS CHARTERED AN AIRPLANE FOR ALL OF ITS DIRECTORS and one of its officers, Bart Reuter, FOR THE 2019 BOARD MEETING. THE CHARTERED TRAVEL EXPENSES ARE NOT TREATED AS TAXABLE COMPENSATION. Part I, Line 4a SEVERANCE PAYMENT AN INDIVIDUAL LEFT THE ORGANIZATION IN 2018. THE INDIVIDUAL RECEIVED SEVERANCE IN 2019, WHICH IS INCLUDED ON SCHEDULE J, PART II. DUE TO a CONFIDENTIALITY AGREEMENT, NEITHER THE NAME NOR THE AMOUNT WILL BE LISTED.
Part I, Lines 5b, 6b and 7	NON-FIXED PAYMENTS INCENTIVE PAYOUT OPPORTUNITIES, BASED ON PERCENTAGE OF BASE PAY RATE, ARE AVAILABLE TO CERTAIN EMPLOYEES OF THE FILING ORGANIZATION. WHILE LEVELS OF THE INCENTIVE PAYOUT OPPORTUNITY ARE FIXED AND DETERMINED PERCENTAGES OF BASE COMPENSATION; THE INCENTIVE PAYOUT IS DETERMINED; IN PART, ON THE CONSOLIDATED REVENUE AND NET EARNINGS OF OPERATING DIVISIONS. THE INCENTIVE PAYOUT IS SUBJECT TO THE REVIEW OF ACCOMPLISHMENTS / OBJECTIVES AND THE ULTIMATE DETERMINATION OF INCENTIVE COMPENSATION IS SUBJECT TO PRESIDENT / CEO AND EXECUTIVE COMMITTEE OF THE BOARD APPROVAL.

Additional Data

Software ID:
Software Version:
EIN: 36-2179768
Name: Versiti Illinois Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1CHRIS MISKEL CEO	(i)	114,370	50,580	220	3,528	3,970	172,668	0
	(ii)	521,016	230,420	1,000	16,072	18,087	786,595	0
1BRIAN BAUTISTA EVP & Chief Operating Officer	(i)	76,462	22,523	257	3,528	3,970	106,740	0
	(ii)	348,327	102,604	1,173	16,072	18,087	486,263	0
2JAMES WEIDNER EVP & CHIEF HR OFFICER	(i)	52,256	16,972	612	3,509	3,970	77,319	0
	(ii)	238,055	77,317	2,788	15,985	18,087	352,232	0
3GITESH DUBAL EVP & CHIEF MARKETING OFFICER	(i)	62,626	22,641	151	3,528	3,970	92,916	0
	(ii)	285,298	103,143	689	16,072	18,087	423,289	0
4LYNNE BRIGGS VP & CHIEF INFORMATION OFFICER	(i)	49,716	9,716	608	4,032	3,970	68,042	0
	(ii)	226,484	44,263	2,769	18,368	18,087	309,971	0
5ANTHONY WATKINS EVP & CHIEF FINANCIAL OFFICER	(i)	70,767	13,795	775	3,528	3,773	92,638	0
	(ii)	322,383	62,843	3,528	16,072	17,186	422,012	0
6MARGARET MCELLIGOTT VP & CHIEF QUALITY OFFICER	(i)	42,998	7,226	1,118	3,837	2,785	57,964	0
	(ii)	195,882	32,919	5,096	17,482	12,687	264,066	0
7GILBERT C WHITE MD EVP OF RESEARCH - thru 6/19	(i)	0	0	0	0	0	0	0
	(ii)	412,806	82,238	5,611	22,400	15,534	538,589	0
8THOMAS ABSHIRE MD EVP MSI & CHIEF MED OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	486,567	84,012	6,822	22,400	2,417	602,218	0
9BRADLEY PIETZ EVP & Chief Innovation Officer	(i)	49,559	5,407	282	3,098	1,564	59,910	0
	(ii)	225,767	24,634	1,286	14,114	7,125	272,926	0
10DANA KNIGHT DIRECTOR OF QUALITY ASSURANCE	(i)	138,480	8,612	1,154	7,299	7,566	163,111	0
	(ii)	0	0	0	0	0	0	0
11JOANNA MCCOY CONTROLLER	(i)	130,365	14,095	1,511	9,507	7,563	163,041	0
	(ii)	0	0	0	0	0	0	0
12MAUREEN KWIECINSKI FORMER EVP & GEN. COUNSEL	(i)	0	6,106	46,886	0	131	53,123	0
	(ii)	0	27,817	213,593	0	598	242,008	0
13COLLEEN MCCARTHY Chief of Staff & VP Organ Don.	(i)	40,505	4,978	142	2,917	3,970	52,512	0
	(ii)	184,522	22,676	646	13,288	18,087	239,219	0
14BART REUTER EVP & GEN. COUNSEL-As Of 1/19	(i)	56,777	0	284	3,504	3,794	64,359	0
	(ii)	258,650	0	1,292	15,965	17,282	293,189	0
15ANN LIETZ Exec Dir Business Development	(i)	257,551	0	2,871	15,565	8,074	284,061	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Versiti Illinois Inc

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

2019

Open to Public Inspection

Employer identification number

36-2179768

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINE 6	MEMBERS OR STOCKHOLDERS VERSITI, INC. (A 501(C)(3) ORGANIZATION) IS THE SOLE CORPORATE MEMBER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION A, LINES 7A AND 7B	MEMBER OR STOCKHOLDER POWERS VERSITI, INC. HAS RESERVE POWERS; INCLUDING THE ABILITY TO ELECT A MAJORITY OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 11	FORM 990 REVIEW VERSITI ILLINOIS UTILIZES GRANT THORNTON LLP TO COMPLETE THE IRS FORM 990 AND RELATED SCHEDULES. FOLLOWING COMPLETION, THEY ARE REVIEWED BY THE CONTROLLER AND CEO. THE DRAFT FORMS ARE THEN REVIEWED BY THE COMPLIANCE AND AUDIT COMMITTEE PRIOR TO SUBMISSION TO THE IRS. THE FULL BOARD IS PROVIDED A COPY OF THE FORM 990 PRIOR TO FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY VERSITI ILLINOIS MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY. ON AN ANNUAL BASIS, CURRENT DIRECTORS AND OFFICERS ARE ASKED TO COMPLETE A DISCLOSURE FORM BASED ON IRS REQUIREMENTS THAT INCLUDES THE FOLLOWING: WHETHER THEY HAVE ANY DIRECT OR INDIRECT RELATIONSHIP EITHER THROUGH BUSINESS OR FAMILY MEMBER WITH THE ORGANIZATION. WHETHER THEY RECEIVED COMPENSATION FROM ANY ORGANIZATION THAT SHARES COMMON OWNERSHIP OR CONTROL WITH THE ORGANIZATION. WHETHER THEY HAVE SERVED AS AN OFFICER, DIRECTOR, KEY EMPLOYEE, PARTNER OR MEMBER OF AN ENTITY (OR SHAREHOLDER OF A PROFESSIONAL CORPORATION) DOING BUSINESS WITH THE ORGANIZATION. THESE ANSWERS ARE ACCUMULATED, SUMMARIZED AND EVALUATED BY MANAGEMENT TO DETERMINE IF ANY CONFLICTS EXIST. IDENTIFIED CONFLICTS ARE ADDRESSED IN ACCORDANCE WITH THE WRITTEN POLICY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINES 15A AND 15B	COMPENSATION PROCESS THE COMPENSATION COMMITTEE OF THE VERSITI BOARD OF DIRECTORS, ACTING IN ITS CAPACITY AS THE COMPENSATION COMMITTEE, SETS AND MONITORS THE COMPENSATION PHILOSOPHY FOR VERSITI AND THE RELATED ENTITIES THAT IT SUPPORTS, INCLUDING VERSITI ILLINOIS. OTHER THAN THE VERSITI PRESIDENT & CHIEF EXECUTIVE OFFICER, THE COMPENSATION COMMITTEE DOES NOT INCLUDE MEMBERS OF MANAGEMENT AND IS COMPRISED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO VERSITI OR VERSITI ILLINOIS COMPENSATION ARRANGEMENTS. THE VERSITI PRESIDENT AND CHIEF EXECUTIVE OFFICER RECUSES HER/HIMSELF FROM ALL DISCUSSIONS AND APPROVALS RELATED TO HER/HIS COMPENSATION. THE VERSITI COMPENSATION COMMITTEE REVIEWS VERSITI ILLINOIS EXECUTIVE COMPENSATION ARRANGEMENTS TO ENSURE SUCH ARRANGEMENTS ARE FAIR, REASONABLE, AND NOT EXCESSIVE WHEN COMPARED TO SIMILARLY-SITUATED EXECUTIVES. EXECUTIVE COMPENSATION ARRANGEMENTS ARE REVIEWED FOR REASONABLENESS AND APPROVED BY THE COMPENSATION COMMITTEE ANNUALLY IN ACCORDANCE WITH THE VERSITI REASONABLENESS REVIEW POLICY. THE COMPENSATION COMMITTEE ASSESSES THE REASONABLENESS OF EXECUTIVE COMPENSATION ARRANGEMENTS AFTER IT OBTAINS AND REVIEWS APPROPRIATE DATA FOR COMPARABILITY FROM THE HUMAN RESOURCE DEPARTMENT AND AN INDEPENDENT COMPENSATION CONSULTANT. THE COMPENSATION COMMITTEE ENGAGES A QUALIFIED INDEPENDENT COMPENSATION CONSULTANT ANNUALLY. THE INDEPENDENT CONSULTANT PERFORMS AN ANALYSIS OF COMPENSATION LEVELS AT REGIONAL AND NATIONAL ORGANIZATIONS OF COMPARABLE SIZE, SCOPE AND STRUCTURE AND PROVIDES THE COMMITTEE WITH COMPREHENSIVE DATA ON THE AVAILABILITY OF SIMILAR SERVICES WITHIN THE GEOGRAPHIC AREA, COMPENSATION SURVEYS, WRITTEN OFFERS FROM SIMILAR INSTITUTIONS, AND OTHER INFORMATION RELEVANT TO COMPARABILITY OF COMPENSATION. THE COMPENSATION COMMITTEE'S REVIEW, RECOMMENDATIONS AND APPROVALS ARE DOCUMENTED CONCURRENTLY IN THE COMMITTEE MINUTES, WHICH ARE SUBSEQUENTLY REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE AS REASONABLE, ACCURATE AND COMPLETE. VERSITI AND VERSITI ILLINOIS HAVE INCENTIVE PROGRAMS FOR THE CHIEF EXECUTIVE OFFICER AND OTHER CORPORATE OFFICERS DESCRIBED IN DETAILED WRITTEN POLICIES APPROVED BY THE COMPENSATION COMMITTEE ANNUALLY. EVALUATION AND COMPENSATION REVIEW -CEO - EACH YEAR, THE EXECUTIVE/COMPENSATION COMMITTEE EVALUATES THE VERSITI/VERSITI ILLINOIS CEO'S PERFORMANCE AGAINST ESTABLISHED OBJECTIVES, DETERMINES INCENTIVE PAYMENT AND MERIT INCREASE BASED UPON PERFORMANCE AND MARKET DATA PROVIDED BY THE THIRD PARTY COMPENSATION CONSULTANT, AND WORKS WITH THE CEO TO ESTABLISH OBJECTIVES FOR THE NEXT YEAR. -OTHER CORPORATE OFFICERS - EACH YEAR, THE VERSITI/VERSITI ILLINOIS CEO REVIEWS THE PERFORMANCE AND THE ACHIEVEMENT OF INDIVIDUAL GOALS AND OBJECTIVES OF EACH VERSITI/ VERSITI ILLINOIS CORPORATE OFFICER. THE VERSITI/VERSITI ILLINOIS CEO PRESENTS HIS/HER RECOMMENDATIONS TO THE COMPENSATION COMMITTEE, WHICH REVIEWS AND APPROVES RECOMMENDED COMPENSATION RANGES, AND APPROVES FINAL

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINES 15A AND 15B	L SALARY AND INCENTIVE PAYMENTS. CORPORATE OFFICERS ARE POSITIONED WITHIN THE APPROPRIATE SALARY RANGE BASED UPON: -EXECUTIVE'S KNOWLEDGE, COMPETENCIES, AND EXPERIENCE, -PERFORMANCE OF THE EXECUTIVE'S AREAS OF RESPONSIBILITY, -THE EXECUTIVE'S CONTRIBUTION TO OVERALL PERFORMANCE, -THE IMPORTANCE OF RETAINING THE EXECUTIVE, -INTERNAL EQUITY CONSIDERATIONS, -THE FINANCIAL RESOURCES AVAILABLE, AND -EXECUTIVE BASE SALARY INCREASES PROVIDED IN THE COMPETITIVE MARKET

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION C, LINE 19	ORGANIZATION'S DOCUMENTS OPEN TO THE PUBLIC THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST DURING NORMAL BUSINESS HOURS AND AT THE ORGANIZATION'S LOCATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VII	AVERAGE HOURS THE HOURS LISTED ON FORM 990, PART VII ARE REPRESENTATIVE OF AN AVERAGE FOR THE OFFICERS AND EXECUTIVE TEAM. EACH INDIVIDUAL PERSON'S WEEKLY TALLY MAY BE GREATER OR LESSER PER WEEK BASED ON THEIR INDIVIDUAL ROLES AND RESPONSIBILITIES WITHIN THE FILING ORGANIZATION AND RELATED PARTIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XI, LINE 9	OTHER CHANGES IN NET ASSETS BAD DEBT RESERVE ADJUSTMENT (20,937)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:DONOR TESTING TOTAL FEES:4924279

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION: PURCHASED SERVICES TOTAL FEES: 2652691

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION: CUSTOMER TESTING TOTAL FEES: 222075

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:TEMPORARY HELP TOTAL FEES:146692

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:SHIPPING & TRANSPORTATION TOTAL FEES:157932

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:RECORD STORAGE TOTAL FEES:24318

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:CONSULTING SERVICES TOTAL FEES:23372

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Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:LICENSES, PERMITS, & HOSP FEES TOTAL FEES:18391

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:CREDIT CARD FEES TOTAL FEES:16751

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:OUTSIDE LAB SERVICE TOTAL FEES:10020

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:EDUCATION TOTAL FEES:4531

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:NN-MARKETING PRINTING COSTS TOTAL FEES:4130

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:MEDICAL REPORTS TOTAL FEES:798

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION: BANK ACCOUNT FEES TOTAL FEES: 714

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION:PUBLICATION SERVICES TOTAL FEES:92

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
Versiti Illinois Inc

Employer identification number
36-2179768

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)VERSITI INC PO BOX 2178 638 N 18TH ST MILWAUKEE, WI 53201 45-4675354	SUPPORTING	WI	501(c)(3)	12B	NA		No
(2)VERSITI WISCONSIN INC PO BOX 2178 638 N 18TH ST MILWAUKEE, WI 53201 39-0807235	BLOOD	WI	501(c)(3)	7	VERSITI		No
(3)VERSITI MICHIGAN INC PO BOX 1704 GRAND RAPIDS, MI 49501 38-1550001	BLOOD	MI	501(c)(3)	10	VERSITI		No
(4)VERSITI BLOOD RESEARCH INSTITUTE FNDN PO BOX 2178 638 NORTH 18TH MILWAUKEE, WI 53201 39-1372542	SUPPORTING	WI	501(c)(3)	12B	VERSITI		No
(5)VERSITI INDIANA INC 3450 N MERIDIAN ST INDIANAPOLIS, IN 46208 35-0991629	BLOOD	IN	501(c)(3)	10	VERSITI		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

Yes

1n

No

1o

Yes

1p

Yes

1q

Yes

1r

Yes

1s

Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation