**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

	10.110.0	GO TO WWW.IIS.gov/FORM990PF TO	or instructions and t	ine lates	st miormati	on. Open	to rabile inspection
		dar year 2019 or tax year beginning	, 2019	9, and e		<del></del>	, 20
Nam	e.of four	ndation			A Employe	r identification number	er
		HIGH SCHOOL ACTIVITIES FOUNDATION			D. Talankan	37-1322645	
		street (or P O box number if mail is not delivered to street address)	Hoom	√suite	B Telephon	ie number (see instructi	ons)
		RAW DRIVE , state or province, country, and ZIP or foreign postal code			<u> </u>	309-663-6377	
-					C If exempt	tion application is pend	ing, check here ▶ 🗌
_		GTON, IL 61704					
G	Crieck	call that apply   Initial return ☐ Initial return  Amended  Final return ☐ Amended	n of a former public	chanty	D 1. Foreig	n organizations, check	here ► 📗
		☐ Address change ☐ Name chai				n organizations meeting	
н	Check	type of organization:  Section 501(c)(3) exempt p		011		here and attach computed foundation status was	
		on 4947(a)(1) nonexempt charitable trust   Other tax		{ NA	- •	07(b)(1)(A), check here	
		narket value of all assets at J Accounting method					
		f year (from Part II, col. (c),				ndation is in a 60-mont ction 507(b)(1)(B), checl	
		80131 (Part I, column (d), must b	e on cash basis )				_
Pa	art I		(a) Revenue and	!			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment come	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	44758				
	2	Check ► ☐ If the foundation is not required to attach Sch. B					1
	3	Interest on savings and temporary cash investments	756		756	756	
	4	Dividends and interest from securities	О О		0	0	
	5a	Gross rents	0		0	0	
	b	Net rental income or (loss) 0					
<u>re</u>	6a	Net gain or (loss) from sale of assets not on line 10	0				
en Je	_b	Gross sales price for all assets on line 6a 0			_		
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
ш	8	Net short-term capital gain				0	<u> </u>
	9 10a	Income modifications	1111 ( (0) 11602	oospanijeste 🗆		(F. (11111) olibin) /	м начинаваналишного и г
	b	Less: Cost of goods sold 0					
	C	Gross profit or (loss) (attach schedule)	0			0	
	11	Other income (attach schedule)	o o		0		
	12	Total. Add lines 1 through 11	45514		756		
	13	Compensation of officers, directors, trustees, etc.	0		0		0
enses	14	Other employee salaries and wages	0		0	0	0
ë	15	Pension plans, employee henefits	0		0	0	0
Exp	16a	Legal fees (attach schedule) RECE	INFD   9		0	0	0
Ш	b	Accounting fees (attach schedule)	တ္တြ စ		Q	0	0
Ę	С	Other professional fees (attach schedul $rac{89}{2}$ . JUN $2$	<b>2</b> 2020   0		0	0	0
tra	17	Interest	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		0	0	
is	18	Taxes (attach schedule) (see instructions)	NIT		0	0	
Ē	19	Depreciation (attach schedule) and depletion OGDE	17, 01		0	0	
Ą	20	Occupancy	0		. 0	0	0
ğ	21	Travel, conferences, and meetings	0		0		0
a	22	Printing and publications	35050		0	0	26060
ng	23	Other expenses (attach schedule)	36059		0	0	36059
ati	24	<b>Total operating and administrative expenses.</b> Add lines 13 through 23	2000			` n	36059
Operating and Administrative	25	Contributions, gifts, grants paid	36059 26000		0	0	26000
Ō	26 26	Total expenses and disbursements. Add lines 24 and 25	62059		0	0	62059
_	27	Subtract line 26 from line 12	02039	_			02000
	<i>г,</i>	Excess of revenue over expenses and disbursements	(16545)	ra tanb <b>an</b>	annerty cortex ( ) in	Ment optimic i	conduct assistant f
	b	Net investment income (if negative, enter -0-) .			756		
	l	Adjusted net income (if negative, enter -0-)				756	]

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2019)



Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	130	177	177
	2	Savings and temporary cash investments	70546	77954	77954
	3	Accounts receivable ► 2000			
		Less: allowance for doubtful accounts ▶0	0	2000	2000
	4	Pledges receivable ▶			106 / 10
		Less. allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule) ▶			
		Less. allowance for doubtful accounts ▶	0	0	0
\$	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments – U.S. and state government obligations (attach schedule)	0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	15	Other assets (describe ▶ )	0	0	0
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item l)	70676	80131	80131
	17	Accounts payable and accrued expenses	0	0	[
g	18	Grants payable	0	0	
Liabilities	19	Deferred revenue	0	26000	
豆	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
ᆵ	21	Mortgages and other notes payable (attach schedule)	0	0	<u> </u>
_	22	Other liabilities (describe ▶)	0	0	
	23	Total liabilities (add lines 17 through 22)	0	26000	
alances		Foundations that follow FASB ASC 958, check here			
2		and complete lines 24, 25, 29, and 30.			
8	24	Net assets without donor restrictions			<u> </u>
∞	25	Net assets with donor restrictions			
≧		Foundations that do not follow FASB ASC 958, check here ▶ ☑			
ᄯᅵ		and complete lines 26 through 30.			
6	26	Capital stock, trust principal, or current funds	0	0	<u> </u>
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	<u> </u>
SS	28	Retained earnings, accumulated income, endowment, or other funds	70676	54131	
Ä	29	Total net assets or fund balances (see instructions)	70676	54131	
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see instructions)	70276	00121	1
	rt III	Analysis of Changes in Net Assets or Fund Balances	70676	80131	<u> </u>
		I net assets or fund balances at beginning of year—Part II, colur	mn (a) line 20 (mile	t agree with	
1		in net assets or fund balances at beginning of year—Part II, coluing of year—Part II, coluing of year—Part II, coluing of year—Part III, coluing of			70676
9		er amount from Part I, line 27a			(16545)
					0
		lines 1, 2, and 3			54131
				<del> 1</del>	0
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lir	ne 29 <b>6</b>	54131

Part	(a) List and describe the kir	Losses for Tax on Investmen nd(s) of property sold (for example, real estati se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr)
1a	None						
<u>b</u>							
<u> </u>			<u>.</u>				
<u>d</u>	<del></del>						·
<u>е</u>				<u> </u>	-		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale			n or (loss) f) minus (g)) ———————————————————————————————————
a							
<u> </u>							
C							
<u>d</u>							
<u>e</u>	Complete only for assets sho	wing gain in column (h) and owned by	the foundation	on 12/31/69.		4D 0 /0 /	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	C	col (k), but not	(h) gain minus t less than -0-) <b>or</b> rom col (h))
а				-			<del></del>
b							
С							
d							
е							
2	Capital gain net income of		o enter in Pa iter -0- in Pai		2		
3	If gain, also enter in Part	n or (loss) as defined in sections 12 I, line 8, column (c). See instruction	ons. If (loss)	, enter -0- in	3		
Part		er Section 4940(e) for Reduce			_	ne	
Was t		e this part blank. section 4942 tax on the distributab qualify under section 4940(e). Do no			oase pe	eriod?	☐ Yes ☑ No
1	Enter the appropriate amo	ount in each column for each year;	see the instru	uctions before ma	akıng a	ny entries.	
Cal	<b>(a)</b> Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a	ssets		(d) inbution ratio divided by col (c))
	2018	445	29		0		0
	2017	776	00		0	· · · · · · · · · · · · · · · · · · ·	0
	2016	445			0		0
	2015	736			0		0
	2014	437	<u>B4</u>		0	т т	0
2	Total of line 1, column (d)				_ ⊢	2	0
3		for the 5-year base period—divide bundation has been in existence if I			- [	3	0
4	Enter the net value of non	charitable-use assets for 2019 fron	n Part X, line	5		4	0
5	Multiply line 4 by line 3				.	5	0
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			.	6	
7	Add lines 5 and 6				.  -	7	0
8		ons from Part XII, line 4 ater than line 7, check the box in P			_	rt using a 1	62059 % tax rate. See the

Part \		nstru	uctio	<u>18)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ ☐ and enter 1% of Part I, line 27b			İ
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	<del>-</del>		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0
	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0
6	Credits/Payments			1
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0			1
b	Exempt foreign organizations—tax withheld at source			•
С	Tax paid with application for extension of time to file (Form 8868) 6c 0			}
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	_		<u> </u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  If Form 2220 is attached			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			0
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 0 Refunded ▶ 11			0
	VII-A Statements Regarding Activities	T	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	res	No ✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		<b>-</b>
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		<del></del> -
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		<del>-</del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			لبِـــ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		<u>√</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by $General$ Instruction $T$	5		<del>-</del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	<u></u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<b>✓</b>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			/
•	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		✓_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	<b> </b> ✓	_

Part	VII-A Statements Regarding Activities (continued)	<b>,</b>		
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		/
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address ► www.ihsa.org			
14	The books are all the second and the second are all	9-663-		
45	Located at ► 2715 McGraw Drive, Bloomington, IL ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	6170	4	
15	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15	• •	•	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No ✓
	See the instructions for exceptions and filing requirements for FinČEN Form 114. If "Yes," enter the name of the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
ı aı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	l	Yes	No
1a	During the year, did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes   (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		_
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	***************************************	7
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?		:	
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  • 20 , 20 , 20 , 20, 20			
3a .	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		-

Part	VII-B S	tatements Regarding Activities	for W	/hich Form	4720	May Be R	equire	d (contii	nued)			
5a		ear, did the foundation pay or incur a						-			Yes	No
		propaganda, or otherwise attempt to		•	•		•	☐ Yes	<b>✓ N</b> o			1
		the outcome of any specific public				=	-	_	_			
	•	or indirectly, any voter registration dri						☐ Yes	☑ No			
	· •	a grant to an individual for travel, stud	•	,					✓ No			
		a grant to an organization other than 1945(d)(4)(A)? See instructions			-	ation desci	ibea iii	∏Yes	<b>⊘</b> No			l
		for any purpose other than religious,			•	rv. or educ	ational		(V) INO			l
		s, or for the prevention of cruelty to c							<b>⊘</b> No			1
b	If any answe	er is "Yes" to 5a(1)-(5), did any of th	e trans	actions fail t	o qualif	y under the	e excep	tions des	scribed			
	ın Regulatıor	ns section 53.4945 or in a current no	tice reg	garding disas	ter assı	stance? Se	e instri	uctions		5b		
	_	ns relying on a current notice regarding	-									- 1
С		er is "Yes" to question 5a(4), does the										l
		naintained expenditure responsibility		-				Yes	∐ No			1
6a		ach the statement required by Reguland in the statement required by Reguland in the state of the					miums					
- Ou		al benefit contract?						☐Yes	✓ No			i
b	Did the foun	dation, during the year, pay premium	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	າ .	6b		<u> </u>
	If "Yes" to 6	b, file Form 8870.				•		_	_			
7a		during the tax year, was the foundation										
р		the foundation receive any proceeds ation subject to the section 4960 tax							ነ? .	7b		i
8		n or excess parachute payment(s) du							☑ No			
Par		ormation About Officers, Direct									ees,	<del>'</del>
	and	d Contractors						_				
1	List all offic	ers, directors, trustees, and found								).		
	ı	(a) Name and address	hou	e, and average rs per week ed to position	` (if n	mpensation iot paid, ter -0-)	emplo	Contribution tyee benefit erred compe	plans	(e) Expe	nse aco allowan	
See At	tached Statem	nent										
							_			_		
	<u> </u>					•						
												<u> </u>
					L							
2	Compensat "NONE."	tion of five highest-paid employee	es (oth	er than tho	se incli	uded on li	ne 1—:			s). If n	one,	enter •
	(a) Name and add	dress of each employee paid more than \$50,00	0	(b) Title, and a	veek	(c) Comper	nsation	(d) Contribi employee plans and	benefit	(e) Expe	nse acc	
				devoted to p	osition			compen	sation			
NONE												_
		<del></del>			-							
								<u>-</u>				
												•
		•	<b></b>									
Total	number of oth	her employees paid over \$50,000 .		<u> </u>				L	. ▶		0	
. 5241		Simple your paid over worker t			· ·	<u> </u>				Form <b>99</b>		(2019)

a	nformation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors <i>(continued)</i>	
3 Five hig	hest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE		
tal number of	of others receiving over \$50,000 for professional services	0
art IX-A	Summary of Direct Charitable Activities	
	tion's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	_
organizations a	nd other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 NONE		
2		
<u> </u>		
3	· · · · · · · · · · · · · · · · · · ·	
•		
. ——		
\$ 		
art IX-B	Summary of Program-Related Investments (see instructions)	
	to largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
NONE	o taligoti program rotates interest interest in the control of the	
i None		
	<del></del>	
All other progra	m-related investments. See instructions	
_	TOTAL OF THE STATE	1
3		
tal Add lies	s 1 through 3	

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreigne instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
а	purposes.  Average monthly fair market value of securities	1a	•
a b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
-	Total (add lines 1a, b, and c)	1d	
d e	Reduction claimed for blockage or other factors reported on lines 1a and	iu	0
-			
_		2	
2	Acquisition indebtedness applicable to line 1 assets		0
3	Subtract line 2 from line 1d	3	0
4	· · · · · · · · · · · · · · · · · · ·		
_	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	ouridation	18
1	Minimum investment return from Part X, line 6	1	0
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	62059
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	62059
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62059
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

	90-PF (2019)					Page 9
Part	XIII Undistributed Incon	<b>ne</b> (see instruction	T	T		
	•		(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
1	Distributable amount for 201	•				
•	line 7					(
2	Undistributed income, if any, as o					
a b	Enter amount for 2018 only . Total for prior years 20,			0	0	
3	Excess distributions carryover					
a	From 2014	1 '	43.0% .	,		·
b	From 2015	73603	1			
С	From 2016	44595				
d	From 2017	77600				
е	From 2018	44529				
f	Total of lines 3a through e .		284111			
4	Qualifying distributions for 20	•				
	line 4: ▶ \$ 62059				_	
a	Applied to 2018, but not more		······································		0	
b	Applied to undistributed incon (Election required—see instruc			0		
С	Treated as distributions out of required—see instructions).		o		ů	
d	Applied to 2019 distributable a	amount				(
е	Remaining amount distributed	out of corpus	62059			
5	Excess distributions carryover (If an amount appears in colur amount must be shown in colu	nn (d), the same	0			
6	Enter the net total of ea indicated below:			n × 5× 5		,
a	Corpus. Add lines 3f, 4c, and 46		346170	-		
b	Prior years' undistributed in line 4b from line 2b			0		
C	Enter the amount of prior yea income for which a notice of been issued, or on which the tax has been previously assess	f deficiency has section 4942(a)		، ،		
d	Subtract line 6c from line amount—see instructions .	e 6b. Taxable	`	,		
e	Undistributed income for 201 4a from line 2a. Taxable instructions	e amount-see			o	
f	Undistributed income for 2019 4d and 5 from line 1. This a	9. Subtract lines				
-	distributed in 2020					(
7	Amounts treated as distribution to satisfy requirements important 170(b)(1)(F) or 4942(g)(3) (El required—see instructions).	sed by section lection may be	0			
8	Excess distributions carryove applied on line 5 or line 7 (see		43784	######################################	S / A MANAGEMENT () A/	v / 55 is an 2 2/2 /
9	Excess distributions carry Subtract lines 7 and 8 from line	over to 2020.	302386		M 17	1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
10	Analysis of line 9:	• • •	552,560		,	
а	Excess from 2015	73603		]	ρην.«Τάδρ.ζη · 1.1.λ.χ. ·	Minus ar * * c a a
b	Excess from 2016	44595				nanagrai zai
С	Excess from 2017	77600	,	10 10 H 2 10 1 10 10 10 10 10 10 10 10 10 10 10 1	7 AAA 10 10 10 10 10 10 10 10 10 10 10 10 10	н н т
d	Excess from 2018	11529	A BILL CONTRACTOR		the the second	[ · · · · · · · · · · · · · · · · · · ·
_	Evenes from 2010	62059	1 . ^ \$	1	1 7 7 7	I

Form 99	00-PF (2019)					Page 10
Part	XIV Private Operating Founda	i <b>tions</b> (see instru	ctions and Part	VII-A, question 9	))	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo				N/A	. /
b	Check box to indicate whether the four	ndation is a private	operating founda	tion described in se	ection	or 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	(e) Total
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter <sup>2</sup> / <sub>3</sub> of minimum investment return shown in Part X, line 6, for each year listed					
С	"Support" alternative test-enter.					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	/				
Part				he foundation h	ad \$5,000 or mo	re in assets a
	any time during the year-		<u>18.)</u>			
1 a	Information Regarding Foundation List any managers of the foundation before the close of any tax year (but of	who have contribu				y the foundation
NONE						
b	List any managers of the foundation ownership of a partnership or other e					je portion of the
NONE						
2	Information Regarding Contribution Check here ▶ ☐ If the foundation unsolicited requests for funds. If the f complete Items 2a, b, c, and d. See IT	only makes controlling	ributions to prese	elected charitable		
а	The name, address, and telephone no		dress of the perso	on to whom applica	ations should be add	Iressed:
See At	tached Statement					
b	The form in which applications should	d be submitted and	d information and	materials they sho	uld include	<u> </u>
See At	tached Statement	1				
	Any submission deadlines:					
See At	tached Statement					
d	Any restrictions or limitations on av factors:	vards, such as b	y geographical a	reas, charitable fi	elds, kınds of instit	utions, or othe

See Attached Statement

Pari 3	XV Supplementary Information (cont Grants and Contributions Paid During to	inued)	od for Eut	ture Payment	
				Ture rayment	· -
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	0.0.00	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
See A	ttached Statement				
Jee A	ttached Statement				
					:
					'
	•				
					1
	Total			▶ 3a	26000
b	Approved for future payment	<u> </u>			
	T-A-1	<u> </u>		D 2h	

ΙРа	rt XV	I-A Analysis of Income-Producing Ac	ctivities				
		ss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	
	, g. c.	ar arrivortio arrivoro ottro marcatoa.			1		(e) Related or exemp
			(a)	(b)	(c)	(d)	function income
1	Proc	ram service revenue.	Business code	Amount	Exclusion code	Amount	(See instructions.
•	a	rain service revenue ,				<u> </u>	
	ь -	<del></del>			<del> </del>		
	-			-			
	<u>-</u> -		<del></del>		<del></del>		
	d _		· · · · · ·	<del></del>	<del> </del>		
	e _						
	T						
_		ees and contracts from government agencies			<u> </u>		
2		bership dues and assessments			ļ	· · · · · · · · · · · · · · · · · · ·	
3		est on savings and temporary cash investments			ļ		
4		dends and interest from securities		C	14	756	
5		rental income or (loss) from real estate:		A7AAA A	<u> </u>		
		Debt-financed property			ļ		
		Not debt-financed property			ļ		
6		rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	b _						
	c _	b					
	d _						
	е _						
		otal. Add columns (b), (d), and (e)			)	756	(
						40	
		II. Add line 12, columns (b), (d), and (e)				13	750
(See	work	sheet in line 13 instructions to verify calculation	ıs.)			13 	750
(See	work	sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) <b>.ccomplishm</b>	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	s.) <b>.ccomplishm</b>	ent of Exemp	t Purposes		
(See	work	sheet in line 13 instructions to verify calculation	s.) <b>.ccomplishm</b>	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation  -B Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	s.) <b>.ccomplishm</b>	ent of Exemp	t Purposes		
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(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
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(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
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(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
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(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		mportantly to the
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		
(See	work rt XV e No.	sheet in line 13 instructions to verify calculation   -B   Relationship of Activities to the A	is.) Incomplishm Income is repoposes (other that	ent of Exemp	t Purposes		

Part :	XVII	Informatio Organizati	n Regarding Trai	nsfers to and Tr	ansactio	ns and F	Relationship	s With I	Nonchar	itabl	е Ехе	mpt
	ın sı orga	he organization of ection 501(c) (continued)	directly or indirectly other than section porting foundation t	501(c)(3) organiz	ations) or	in secti	on 527, rela				Yes	No
						-				1a(1)		<b>√</b>
		Other assets .								1a(2)		<b>✓</b>
b	Othe	r transactions.										
			a noncharitable ex							1b(1)		<b>✓</b>
			ets from a noncharit							1b(2)		✓_
			, equipment, or other							1b(3)		<b>✓</b>
			rrangements							1b(4)		<b>√</b>
			irantees ervices or members							1b(5) 1b(6)		<b>√</b>
			equipment, mailing li							10(0)		<del></del>
			of the above is "Ye								taır m	
			ther assets, or serv									
	value	e in any transàcti	on or sharing arrang	jement, show in co	olumn ( <b>d)</b> tl	he value o	of the goods, o	other ass	ets, or ser	vices	recei	ved.
(a) Line	no	(b) Amount involved	(c) Name of nonc	haritable exempt organi	ızatıon	(d) Desci	nption of transfers	, transactio	ons, and shar	ring arr	angeme	ents
N/A												
	_				-							
<del>.</del>					<del>.</del>							
	$\dashv$											—
						_						
								<del>-</del>				
											_	
	desc	ribed in section 5 es," complete the	l ectly or indirectly a 501(c) (other than se e following schedule	ection 501(c)(3)) or	in section						es 🗸	No
		(a) Name of organ	nzatiVII	(b) Type of	organization		- 10	, Description	on of relation	July		
												—
						-						
							_					
			declare that I have examination of preparer (other the						my knowledo	ge and I	belief, it	is true,
Sign Here		set, and complete dec	Honden	5-20-		xecutiv	e Dhut	or	May the IR with the pre	eparer s	hown b	etow?
	- 9	Print/Type preparer		Preparer's signature	7		Date	Ch.	. П <u>.</u> Р	PTIN		
Paid		Tammy Craig		Janner (	Harr		52000	)   cned	ck if   employed			
Prepa				Tanio II				irm's EIN	<del></del>			
Jse C	ıııy	Firm's address ▶						hone no				
							•		Fo	rm <b>99</b>	0-PF	(2019)

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

# **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

**Employer identification number** 

37-1322645 Illinois High School Activities Foundation Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF √ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

Name of organization

Employer identification number

Illinois Highs School Activities Foundation

37-1322645

Part I	Contributors (see instructions). Use duplicate co	opies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Caterpillar Inc. 100 NE Adms	\$ 26000	Person   Payroll   Noncash
	Реогіа, IL 61629-1480		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	· (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person

Name of organization
Illinois High School Activities Foundation

Employer identification number 37-1322645

Part II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional space	ce is needed.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	/A		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
a) No. from Part I	(b) > Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

	rganization				Employer identification number			
	gh.School Activities Foundation				37-1322645			
Part III	Exclusively religious, charitable, et (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions.	or the year from any ations completing Pa the year. (Enter this in	one contributor.  art III, enter the tota  nformation once. S	Complete I of <i>exclusi</i>	columns (a) through (e) and wely religious, charitable, etc.,			
(a) No.	<u> </u>	1		7.5.				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Des	scription of how gift is held			
	N/A							
	Transferee's name, address, a		fer of gift	nship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De:	scription of how gift is held			
	Transferee's name, address, a		sfer of gift  Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(e) Trans	fer of gift					
	Transferee's name, address, a	and ZIP + 4	Relation	nship of tra	nsferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Des	scription of how gift is held			
Part I								
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee					

# ILLINOIS HIGH SCHOOL ACTIVITIES FOUNDATION EIN: 37-1322645

# STATEMENTS TO 2019 FORM 990-PF (RETURN OF PRIVATE FOUNDATION)

### **STATEMENT 1**

# Part I, Line 1 -- Schedule of Donors Contributing \$5,000 or More During Year

Caterpillar Inc Corporate Support 100 NE Adams Street Peoria, IL 61629-1480 12/13/2019

\$ 26,000 00

**TOTAL** 

\$ 26,000 00

# **STATEMENT 2**

# Part I, Line 23 -- Schedule of Other Expenses

Ball Raffle Expenses		\$ 1,705 00
Golf Outing Expenses		\$ 7,083 99
Administration Expenses		\$ 28.00
Student Leadership Conference		\$ 17,884.68
All State Academic Expenses		\$ 9,357.66
	TOTAL	\$ 36,059.33

#### **STATEMENT 3**

### Part VII-A, Line 10 -- Schedule of Substantial Contributors

### **Current Year**

Caterpillar Inc, 100 NE Adams Street, Peoria IL 61629-1480

# **Prior Years**

Caterpillar Inc, 100 NE Adams Street, Peoria IL 61629-1480

#### STATEMENT 4

#### Part VIII, Line 1 -- Schedule of Officers and Directors

Name and Address	Title & hours/week	Compensation	Contributions to employee benefit plan	Expense account
(a)	(b)	(c)	(d)	(e)
Tim McConnell	President	0	0	0
6710 Cordova Rd	Director			
Erie, IL 61250	4 hrs/wk			
Katy Hasson	Secretary	0	0	0
9825-86th St. Ct W	Director			
Taylor Ridge, IL 61284	2 hrs/wk			
Scott Adreon	Treasurer	0	0	0
9102 W. Brimfield-Jubilee Rd.	Director			
Dunlap, IL 61525	2 hrs/wk			
Robert Nolting	Director	0	0	0
15018 Albright Dr	2 hrs/wk			
Lockport, IL 60441				
Craig Anderson	Director	0	0	0
2715 McGraw Drive	2 hrs/wk			
Bloomington, IL 61702				
Kraig Garber	Director	0	0	0
10060 Wolf Hill Rd.	2 hrs/wk			
Bloomington, IL 61705				

#### STATEMENT 5

#### Part XV, Line 2a, 2b, 2c, and 2d -- Information Regarding Scholarship Programs

The Foundation awards scholarships to Illinois high school students selected to the Illinois High School Association's "All-State Academic Team" ("Team") consisting of 26 students. Students are selected to the Team based on academic achievement, participation in high school athletics, and community service.

Illinois high school students wishing to be named to the Team must be nominated by their high schools. To be nominated, students must submit an application form to their high school (the application forms are available at the high schools). Students are nominated by the high schools based on (1) scholastic standing, (2) participation in high school athletics, (3) community service, and (4) two letters of recommendation. Nominees are evaluated by a committee of high school principals from each school division, and 26 nominees are selected to the Team.

The number and amount of scholarships awarded by the Foundation depends on the amount of funds available. In 2018, sufficient funds were available to award \$1,000 scholarships to each of the 26 students selected to the Team. In future years, if more funds are available, the Foundation will award larger scholarships to the students on the Team and/or will award scholarships to students who qualify as "honorable mentions." If less funds are available, the Foundation will award smaller scholarships, or the Foundation will determine the number of scholarships and then hold a drawing among the 26 students selected to the Team to determine scholarship winners.

**STATEMENT 6** 

# Part XV, Line 3a -- Schedule of Scholarship Recipients Paid During Year

Name and Address	Relationship	Foundation Status	Purpose	Ar	nount
Abygale Ahn Timothy Christian High School Elmhurst, IL	None	No	Scholarship	\$	1,000
Zachary Anderson Walter Payton College Prep H.S Chicago, IL	None	No	Scholarship	\$	1,000
Megan Breslin Pinckneyville High School Pinckneyville, IL	None	No	Scholarship	\$	1,000
Julie Bottarini Rosary High School Aurora, IL	None	No	Scholarship	\$	1,000
Rory Caven Glenbard West High School Glen Ellyn, IL	None	No	Scholarship	\$	1,000
Isabelle Christiansen Oswego High School Oswego, IL	None	No	Scholarship	\$	1,000
Noah Conner Pınckneyville High School Pinckneyville, IL	None	No	Scholarship	\$.	1,000
Sean Ford Tinley Park High School Tinley Park, IL	None	No	Scholarship	\$	1,000
Nathan Garard Gıbson City-Melvin-Sibley H.S. Gıbson City, IL	None	No	Scholarship	\$	1,000

Cal Granite Rockford Christian High School Rockford, IL	None	No	Scholarship	\$ 1,000
Christopher Hartrich Marquette Catholic High School Alton, IL	None	No	Scholarship	\$ 1,000
Trevor Heath Peoria Heights High School Peoria Heights, IL	None	No	Scholarship	\$ 1,000
Katherine Hohe Glenbard West High School Glen Ellyn, IL	None	No	Scholarship	\$ 1,000
Sarah Litchfield Farmington High School Farmington, IL	None	No	Scholarship	\$ 1,000
James McDonald Vernon Hills High School Vernon Hills, IL	None	No	Scholarship	\$ 1,000
Brisa McGrath Mahomet-Seymour High School Mahomet, IL	None	No	Scholarship	\$ 1,000
Eleanor Michaud Stevenson High School Lincolnshire, IL	None	No	Scholarship	\$ 1,000
Lauryn Pugh St. Teresa High Schhool Decatur, IL	None	No	Scholarship	\$ 1,000
Alicia Repka Hononegah High School Rockton, IL	None	No	Scholarship	\$ 1,000

Hannah Ritter Marengo High School Marengo, IL	None	No	Scholarship	\$ 1,000
Luke Robert Stillman Valley High School Stillman Valley, IL	None	No	Scholarship - `	\$ 1,000
Aaron Shepard Marengo High School Marengo, IL	None	No	Scholarship	\$ 1,000
Seth Sloan Taylorville High School Taylorville, IL	None	No	Scholarship	\$ 1,000
Abigail Smith Northside College Prep H S. Chicago, IL	None	No	Scholarship	\$ 1,000
Sierra Sonnemaker Washington High School Washington, IL	None	No	Scholarship	\$ 1,000
Benjamin Strullmyer St. Anthony High School Effingham, IL	None	No	Scholarship	\$ 1,000

Total Scholarships \_\_\_\$ 26,000