

Extended to April 15, 2021
Return of Private Foundation

Form 990-PF

Department of the Treasury
Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning JUN 1, 2019, and ending MAY 31, 2020

Name of foundation
Healthcare Foundation of Northern Lake County

Number and street (or P O box number if mail is not delivered to street address) Room/suite
1200 University Center Drive

City or town, state or province, country, and ZIP or foreign postal code
Grayslake, IL 60030

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

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation **04**
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 58,455,545.** J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____

(Part I, column (d), must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check ☒ If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,305,605.	1,305,605.		Statement 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,709,954.			
	b Gross sales price for all assets on line 6a 7,656,599.				
	7 Capital gain net income (from Part IV, line 2)		1,709,954.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	8,272.	8,272.		Statement 2
	12 Total. Add lines 1 through 11	3,023,831.	3,023,831.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	215,513.	6,465.		209,047.
	14 Other employee salaries and wages	184,153.	20,554.		163,599.
	15 Pension plans, employee benefits	91,210.	6,829.		84,381.
	16a Legal fees Stmt 3	4,028.	201.		3,827.
	b Accounting fees Stmt 4	35,735.	26,948.		8,787.
	c Other professional fees Stmt 5	79,178.	77,128.		2,050.
	17 Interest				
	18 Taxes Stmt 6	73,410.	16,054.		0.
	19 Depreciation and depletion	1,064.	32.		
	20 Occupancy	16,164.	485.		15,679.
	21 Travel, conferences, and meetings	9,091.	81.		9,010.
	22 Printing and publications	1,006.	30.		976.
	23 Other expenses Stmt 7	27,211.	1,247.		25,964.
	24 Total operating and administrative expenses. Add lines 13 through 23	737,763.	156,054.		523,320.
	25 Contributions, gifts, grants paid	2,387,491.			2,253,916.
	26 Total expenses and disbursements. Add lines 24 and 25	3,125,254.	156,054.		2,777,236.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	<101,423.>			
	b Net investment income (if negative, enter -0-)		2,867,777.		
	c Adjusted net income (if negative, enter -0-)			N/A	

**Healthcare Foundation of Northern Lake
County**

Form 990-PF (2019)

20-5253008

Page 2

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		910,124.	1,002,885.	1,002,885.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		5,867.	11,481.	11,481.
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock Stmt 9		36,575,698.	35,246,161.	35,246,161.
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis ▶				
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other Stmt 10		19,616,440.	21,819,905.	21,819,905.	
14	Land, buildings, and equipment: basis ▶ 30,748.					
	Less: accumulated depreciation Stmt 11 ▶ 28,784.		1,355.	1,964.	1,964.	
15	Other assets (describe ▶ Statement 12)		422,353.	373,149.	373,149.	
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		57,531,837.	58,455,545.	58,455,545.	
Liabilities	17	Accounts payable and accrued expenses		12,535.	40,794.	
	18	Grants payable		1,511,925.	1,645,500.	
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)		1,524,460.	1,686,294.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☒ and complete lines 24, 25, 29, and 30.					
	24	Net assets without donor restrictions		55,683,406.	56,487,634.	
	25	Net assets with donor restrictions		323,971.	281,617.	
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 26 through 30.					
	26	Capital stock, trust principal, or current funds				
	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
	28	Retained earnings, accumulated income, endowment, or other funds				
	29	Total net assets or fund balances		56,007,377.	56,769,251.	
30	Total liabilities and net assets/fund balances		57,531,837.	58,455,545.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	56,007,377.
2	Enter amount from Part I, line 27a	2	<101,423.>
3	Other increases not included in line 2 (itemize) ▶ See Statement 8	3	863,297.
4	Add lines 1, 2, and 3	4	56,769,251.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	56,769,251.

Form 990-PF (2019)

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b 152,899.		170,058.	<17,159.>
c			
d 6,597,696.		5,776,587.	821,109.
e 906,004.			906,004.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			<17,159.>
c			
d			821,109.
e			906,004.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	1,709,954.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	2,892,898.	55,568,531.	.052060
2017	2,585,170.	56,666,176.	.045621
2016	2,524,708.	52,261,927.	.048309
2015	2,703,788.	51,197,593.	.052811
2014	2,577,633.	54,952,740.	.046906

2 Total of line 1, column (d)	2	.245707
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.049141
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	56,015,210.
5 Multiply line 4 by line 3	5	2,752,643.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	28,678.
7 Add lines 5 and 6	7	2,781,321.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	2,777,236.

Healthcare Foundation of Northern Lake

Form 990-PF (2019)

County

20-5253008

Page 4

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		1	57,356.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	57,356.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	57,356.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	61,056.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	5,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	66,056.	
8 Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,700.	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ☐ 8,700. Refunded ☒	11	0.	

Part VII-A Statements Regarding Activities

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

N/A

Form 990-PF (2019)

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address www.hfnlc.org	13	X
14 The books are in care of The Foundation Telephone no. (847) 377-0525 Located at 1200 University Center Drive, Grayslake, IL ZIP+4 60030		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15		N/A
16 At any time during calendar year 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country	16	X

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☒ Yes ☐ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No	
(6) Agree to pay money or property to a government official? (Exception Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	☐ Yes ☒ No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years	☐ Yes ☒ No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No	
b If "Yes," did it have excess business holdings in 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.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	X

Form 990-PF (2019)

Healthcare Foundation of Northern Lake

Form 990-PF (2019)

County

20-5253008

Page 6

Part VII-B, Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

Organizations relying on a current notice regarding disaster assistance, check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

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

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

If "Yes" to 6b, file Form 8870.

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

N/A

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 13		215,513.	49,013.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Angela Baran - c/o Healthcare Fdn of NLC, Grayslake, IL 60030	Program Officer 40.00	101,936.	21,290.	0.
Meredith Polirer - c/o Healthcare Fdn of NLC, Grayslake, IL 60030	Office Administrator 40.00	82,217.	21,628.	0.

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

0

Form 990-PF (2019)

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	57,926,891.
b	Average of monthly cash balances	1b	519,138.
c	Fair market value of all other assets	1c	346,417.
d	Total (add lines 1a, b, and c)	1d	58,792,446.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	58,792,446.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Stmt 14	4	2,777,236.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	56,015,210.
6	Minimum investment return. Enter 5% of line 5	6	2,800,761.

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

1	Minimum investment return from Part X, line 6	1	2,800,761.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	57,356.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	57,356.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,743,405.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,743,405.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,743,405.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,777,236.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,777,236.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,777,236.

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

**Healthcare Foundation of Northern Lake
County**

Form 990-PF (2019)

20-5253008

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				2,743,405.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			2,089,715.	
b Total for prior years:		0.		
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	0.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ <u>2,777,236.</u>				
a Applied to 2018, but not more than line 2a			2,089,715.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				687,521.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus: Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				2,055,884.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Healthcare Foundation of Northern Lake

Form 990-PF (2019)

County

20-5253008

Page 10

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling



b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c 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

e 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:

a "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 2/3 of minimum investment return shown in Part X, line 6, for each year listed

c "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 XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

None

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

See Statement 15

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Healthcare Foundation of Northern Lake

Form 990-PF (2019)

County

20-5253008

Page 11

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Advocate Charitable Foundation 3075 Highland Parkway, Suite 600 Downers Grove, IL 60515	None	PC	Healthcare	17,500.
Antioch Area Health Access Alliance 874 Main St Antioch, IL 60002	None	PC	Healthcare	76,285.
Arden Shore Child and Family Service 329 N. Genesee Street Waukegan, IL 60085	None	PC	Healthcare	1,788.
Aspire of Illinois 1815 S. Wolf Road Hillside, IL 60162	None	PC	Healthcare	10,000.
Cancer Wellness Center 215 Revere Dr Northbrook, IL 60062	None	PC	Healthcare	5,000.
Total			See continuation sheet(s)	2,253,916.
b Approved for future payment				
Advocate Charitable Foundation 3075 Highland Parkway, Ste 600 Downers Grove, IL 60515	None	PC	Healthcare	17,500.
Antioch Area Health Access Alliance 874 Main St Antioch, IL 60002	None	PC	Healthcare	50,000.
Arden Shore Child and Family Service 329 N. Genesee Street Waukegan, IL 60085	None	PC	Healthcare	80,000.
Total			See continuation sheet(s)	1,580,500.

Form 990-PF (2019)

Healthcare Foundation of Northern Lake
County

20-5253008

Part XV, Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
Catholic Charities of the Archdiocese of Chicago 721 N. LaSalle Chicago, IL 60654	None	PC	Healthcare	50,000.
Childserv 8765 W. Higgins Rd Ste 450 Chicago, IL 60631	None	PC	Healthcare	50,000.
College of Lake County 19351 W. Washington St Grayslake, IL 60030	None	NC - Public University	Healthcare	140,000.
Cristo Rey St. Martin College Prep 3106 Belvidere Road Waukegan, IL 60085	None	PC	Healthcare	40,000.
ElderCARE Lake County 410 Grand Ave. Waukegan, IL 60085	None	PC	Healthcare	9,164.
Erie Family Health Center Inc 1701 W. Superior St Chicago, IL 60622	None	PC	Healthcare	72,500.
EverThrive Illinois 1256 W. Chicago Ave. Chicago, IL 60642	None	PC	Healthcare	55,000.
Family Service of Lake County 777 Central Ave, Ste 17 Highland Park, IL 60035	None	PC	Healthcare	40,000.
Hispanic American Community Education & Services Inc 820 W. Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	50,425.
Josselyn Center 405 Central Ave Northfield, IL 60093	None	PC	Healthcare	50,000.
Total from continuation sheets				2,143,343.

Healthcare Foundation of Northern Lake
County

20-5253008

Part XV. Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Lake County Community Development 500 W. Winchester Rd, Unit 101 <u>Libertyville, IL 60048</u>	None	GOV	Healthcare	75,000.
Lake County Crisis Center for Prevention & Treatment of Domestic Violence 2710 17th Street, Suite 100 <u>Zion, IL 60099</u>	None	PC	Healthcare	130,500.
Lake County Health Department & Community Health Center 3010 Grand Ave <u>Waukegan, IL 60085</u>	None	GOV	Healthcare	50,000.
Lewis University 1 University Pkwy, #295 <u>Romeoville, IL 60446</u>	None	PC	Healthcare	12,500.
Mano a Mano Family Resource Center 6 E. Main St <u>Round Lake Park, IL 60073</u>	None	PC	Healthcare	42,500.
Mercy Housing Lakefront 120 S. LaSalle St. Suite 1850 <u>Chicago, IL 60603</u>	None	PC	Healthcare	36,401.
Metropolitan Chicago Breast Cancer Task Force 300 S. Ashland Ave, Ste 202 <u>Chicago, IL 60607</u>	None	PC	Healthcare	10,000.
NICASA, NFP 31979 N. Fish Lake Rd. <u>Round Lake, IL 60073</u>	None	PC	Healthcare	170,000.
Northeastern Illinois University Foundation 5500 N Saint Louis Ave <u>Chicago, IL 60625</u>	None	PC	Healthcare	45,000.
Northpointe Resources Inc 3441 Sheridan Rd <u>Zion, IL 60099</u>	None	PC	Healthcare	35,000.
Total from continuation sheets				

Healthcare Foundation of Northern Lake
County

20-5253008

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
One Hope United 215 N. Milwaukee Ave Lake Villa, IL 60046	None	PC	Healthcare	60,000.
PADS Lake County Inc 1800 Grand Ave Waukegan, IL 60085	None	PC	Healthcare	145,000.
Rosalind Franklin University Health System 3333 Green Bay Rd North Chicago, IL 60064	None	SO I	Healthcare	100,000.
Rosalind Franklin University of Medicine & Science 3333 Green Bay Rd North Chicago, IL 60064	None	PC	Healthcare	22,500.
TASC Inc 700 S. Clinton St Chicago, IL 60607	None	PC	Healthcare	40,000.
The Thresholds 4101 N. Ravenswood Chicago, IL 60613	None	PC	Healthcare	45,000.
Uhlich Children's Advantage Network 3605 W. Filmore Chicago, IL 60624	None	PC	Healthcare	55,000.
United Way of Lake County 330 South Greenleaf Street Gurnee, IL 60031	None	PC	Healthcare	22,500.
Wauconda Fire District 109 West Liberty Street Wauconda, IL 60084	None	GOV	Healthcare	75,000.
Waukegan Public Library Foundation 128 N. County St Waukegan, IL 60085	None	SO I	Healthcare	63,500.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

20-5253008

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Waukegan Township 149 S. Genesee St Waukegan, IL 60085	None	GOV	Healthcare	20,000.
Youth & Family Counseling 1113 S. Milwaukee Ave, Ste 104 Libertyville, IL 60048	None	PC	Healthcare	95,000.
Youth Conservation Corps 1020 W Greenwood Ave Waukegan, IL 60087	None	PC	Healthcare	35,000.
Youth Network Council 333 S Wabash Ave, Ste 2750 Chicago, IL 60604	None	PC	Healthcare	25,000.
Youthbuild Lake County 1812 Morrow Ave North Chicago, IL 60064	None	PC	Healthcare	62,500.
YWCA of Lake County 1425 Tri-State Pkwy, Suite 180 Gurnee, IL 60031	None	PC	Healthcare	47,500.
Zacharias Sexual Abuse Center 4275 Old Grand Avenue Gurnee, IL 60031	None	PC	Healthcare	37,500.
Zion Benton Childrens Service Inc 1608 23rd St Zion, IL 60099	None	PC	Healthcare	28,353.
Total from continuation sheets				

**Healthcare Foundation of Northern Lake
County**

20-5253008

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Cancer Wellness Center 215 Revere Dr Northbrook, IL 60062	None	PC	Healthcare	5,000.
Catholic Charities of the Archdiocese of Chicago 721 N. LaSalle Chicago, IL 60654	None	PC	Healthcare	20,000.
Childserv 8765 W. Higgins Rd Ste 450 Chicago, IL 60631	None	PC	Healthcare	20,000.
College of Lake County 19351 W. Washington St Grayslake, IL 60030	None	NC - Public University	Healthcare	75,000.
Community Youth Network Inc 18640 W. Belvidere Rd. Grayslake, IL 60030	None	PC	Healthcare	95,000.
Cristo Rey St. Martin College Prep 3106 Belvidere Road Waukegan, IL 60085	None	PC	Healthcare	20,000.
ElderCARE Lake County 1701 W. Superior St Chicago, IL 60622	None	PC	Healthcare	30,000.
Erie Family Health Center 1701 W. Superior St Chicago, IL 60622	None	PC	Healthcare	62,500.
EverThrive Illinois 1256 W. Chicago Ave Chicago, IL 60642	None	PC	Healthcare	17,500.
Family Service of Lake County 777 Central Ave, Ste 17 Highland Park, IL 60035	None	PC	Healthcare	40,000.
Total from continuation sheets				1,433,000.

**Healthcare Foundation of Northern Lake
County**

20-5253008

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
Josselyn Center 405 Central Ave Northfield, IL 60093	None	PC	Healthcare	50,000.
Lake County Community Development 500 W. Winchester Rd, Unit 101 Libertyville, IL 60048	None	GOV	Healthcare	37,500.
Lake County Crisis Center for Prevention & Treatment of Domestic Violence 2710 17th Street, Ste 100 Zion, IL 60099	None	PC	Healthcare	135,000.
Lake County Health Department & Community Health Center 3010 Grand Ave Waukegan, IL 60085	None	GOV	Healthcare	50,000.
NICASA, NFP 31979 N. Fish Lake Rd. Round Lake, IL 60073	None	PC	Healthcare	255,000.
One Hope United 215 N. Milwaukee Ave Lake Villa, IL 60046	None	PC	Healthcare	60,000.
PADS Lake County Inc 1800 Grand Ave Waukegan, IL 60085	None	PC	Healthcare	140,000.
Rosalind Franklin University Health System 3333 Green Bay Rd North Chicago, IL 60064	None	SO I	Healthcare	50,000.
The Thresholds 4101 N Ravenswood Chicago, IL 60613	None	PC	Healthcare	17,500.
Uhlich Children's Advantage Network 3605 W. Filmore Chicago, IL 60624	None	PC	Healthcare	60,000.
Total from continuation sheets				

Healthcare Foundation of Northern Lake
County

20-5253008

Part XV. Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Waukegan Public Library Foundation 128 N. County St Waukegan, IL 60085	None	SO I	Healthcare	35,000.
Waukegan Township 149 S. Genesee St Waukegan, IL 60085	None	GOV	Healthcare	20,000.
Youth & Family Counseling 1113 S. Milwaukee Ave, Ste 104 Libertyville, IL 60048	None	PC	Healthcare	42,500.
YouthBuild Lake County 1812 Morrow Ave North Chicago, IL 60064	None	PC	Healthcare	27,500.
YWCA of Lake County 1425 Tri-State Pkwy, Suite 180 Gurnee, IL 60031	None	PC	Healthcare	37,500.
Zion Benton Childrens Service Inc 1608 23rd St Zion, IL 60099	None	PC	Healthcare	30,500.
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	1,305,605.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income			14	8,272.		
8 Gain or (loss) from sales of assets other than inventory			18	1,709,954.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e)		0.		3,023,831.		0.
13 Total. Add line 12, columns (b), (d), and (e)					13	3,023,831.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Form 990-PF	Dividends and Interest from Securities	Statement	1
-------------	--	-----------	---

Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Investment Income	2,211,609.	906,004.	1,305,605.	1,305,605.	
To Part I, line 4	2,211,609.	906,004.	1,305,605.	1,305,605.	

Form 990-PF	Other Income	Statement	2
-------------	--------------	-----------	---

Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Other Income	8,272.	8,272.	
Total to Form 990-PF, Part I, line 11	8,272.	8,272.	

Form 990-PF	Legal Fees	Statement	3
-------------	------------	-----------	---

Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal fees - Quarles & Brady LLP	4,028.	201.		3,827.
To Fm 990-PF, Pg 1, ln 16a	4,028.	201.		3,827.

Form 990-PF	Accounting Fees	Statement	4
-------------	-----------------	-----------	---

Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees - E. Vaccariello & Co PC	25,735.	24,448.		1,287.
Audit fees - Sikich, LLP	10,000.	2,500.		7,500.
To Form 990-PF, Pg 1, ln 16b	35,735.	26,948.		8,787.

Form 990-PF	Other Professional Fees			Statement	5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Investment management - Ellwood Associates	65,214.	65,214.		0.	
Investment custodial - First Midwest Bank	11,914.	11,914.		0.	
Consulting - Philanthropic relationships	2,050.	0.		2,050.	
To Form 990-PF, Pg 1, ln 16c	79,178.	77,128.		2,050.	

Form 990-PF	Taxes			Statement	6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Foreign Tax W/H	16,054.	16,054.		0.	
Section 4940 excise tax	57,356.	0.		0.	
To Form 990-PF, Pg 1, ln 18	73,410.	16,054.		0.	

Form 990-PF	Other Expenses			Statement	7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Advertising	1,215.	0.		1,215.	
Bank charges	564.	564.		0.	
Dues and memberships	1,322.	0.		1,322.	
Licenses and fees	254.	0.		254.	
Outside services	11,473.	344.		11,129.	
Postage and shipping	247.	0.		247.	
Telephone	3,165.	95.		3,070.	
Insurance	3,806.	203.		3,603.	
Supplies	1,365.	41.		1,324.	
Service contracts	3,800.	0.		3,800.	
To Form 990-PF, Pg 1, ln 23	27,211.	1,247.		25,964.	

Form 990-PF	Other Increases in Net Assets or Fund Balances	Statement	8
-------------	--	-----------	---

Description	Amount
Unrealized gain on investments carried at market value	863,297.
Total to Form 990-PF, Part III, line 3	863,297.

Form 990-PF	Corporate Stock	Statement	9
-------------	-----------------	-----------	---

Description	Book Value	Fair Market Value
First Midwest Bank - Equities	35,246,161.	35,246,161.
Total to Form 990-PF, Part II, line 10b	35,246,161.	35,246,161.

Form 990-PF	Other Investments	Statement	10
-------------	-------------------	-----------	----

Description	Valuation Method	Book Value	Fair Market Value
First Midwest Bank - Fixed Income	FMV	21,819,905.	21,819,905.
Total to Form 990-PF, Part II, line 13		21,819,905.	21,819,905.

Form 990-PF	Depreciation of Assets Not Held for Investment	Statement	11
-------------	--	-----------	----

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
First Pearl Software	9,760.	9,760.	0.
Minolta EP 1030 Copier Donated	1,500.	1,500.	0.
Two Desk Sets (Desk, credenza, book shelf)	1,096.	1,096.	0.
Three Filing Cabinets (36"wide x 4 drawer)	1,512.	1,512.	0.
Filing cabinet (36"wide x 4 drawer)	695.	695.	0.
Dell Inkjet 966	229.	229.	0.
Dell Latitude E5520	1,358.	1,358.	0.
Dell Latitude E6420	1,331.	1,331.	0.
Conference Table Donated 5/8/12	595.	595.	0.

L-Shaped Desk Donated 5/8/12	495.	495.	0.
L-Shaped Desk Donated 5/8/12	495.	495.	0.
Phone and Network Wiring	810.	810.	0.
Window Treatments - Blinds	539.	539.	0.
Window Treatments - Film Tint	758.	758.	0.
Dell PowerEdge T320 Server	3,107.	3,107.	0.
Window Installation	750.	750.	0.
Server Hardware Additions	969.	969.	0.
Dell Computer - Program Officer	1,954.	1,954.	0.
Dell Inspiron 15 - Assistant	1,122.	636.	486.
Apple MacBook Pro	1,673.	195.	1,478.
Total To Fm 990-PF, Part II, ln 14	30,748.	28,784.	1,964.

Form 990-PF	Other Assets	Statement	12
-------------	--------------	-----------	----

Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
Accrued Income	19,016.	18,897.	18,897.
Illinois Workers Compensation Commission	342,281.	350,552.	350,552.
Section 4940 Excise Tax Deposit	61,056.	3,700.	3,700.
To Form 990-PF, Part II, line 15	422,353.	373,149.	373,149.

Form 990-PF Part VIII - List of Officers, Directors Statement 13
 Trustees and Foundation Managers

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan	Expense Contrib	Account
Mary Dominiak, PhD c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Chair/Director 5.00	0.	0.	0.	
Luis Berrones c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Vice Chair/Director 5.00	0.	0.	0.	
Dave Hatton, CFP c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Treasurer/Director 5.00	0.	0.	0.	
Maria Schwartz c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Secretary/Director 5.00	0.	0.	0.	
Frances Baxley, MD c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director 1.00	0.	0.	0.	
Carolina Duque c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director 1.00	0.	0.	0.	
Magdalena McElroy c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director 1.00	0.	0.	0.	
Laura Ramirez c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director 1.00	0.	0.	0.	
Carol Sonnenschein, PhD c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director 1.00	0.	0.	0.	

Casandra Slade c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director	1.00	0.	0.	0.
Michael Duffy c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director	1.00	0.	0.	0.
Jesus Ruiz c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director	1.00	0.	0.	0.
Nancy Waites c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Director	1.00	0.	0.	0.
Ernest Vasseur c/o Healthcare Fdn of Northern Lake Cnty, 1200 University Ctr Dr Grayslake, IL 60030	Executive Director	40.00	215,513.	49,013.	0.
Totals included on 990-PF, Page 6, Part VIII			215,513.	49,013.	0.

Form 990-PF	Cash Deemed Charitable Explanation Statement	Statement	14
	Part X, Line 4		

PART X - LINE 4 - MINIMUM INVESTMENT RETURN

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

Form 990-PF	Grant Application Submission Information	Statement 15
	Part XV, Lines 2a through 2d	

Name and Address of Person to Whom Applications Should be Submitted

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

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

Email Address

www.hfnlc.org

Form and Content of Applications

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

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

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

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

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

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

Name and Address of Person to Whom Applications Should be Submitted

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

Telephone NumberName of Grant Program

(847) 377-0525

Linkage To Care Program

Email Address

www.hfnlc.org

Form and Content of Applications

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

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

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

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

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

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

Name and Address of Person to Whom Applications Should be Submitted

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

<u>Telephone Number</u>	<u>Name of Grant Program</u>
-------------------------	------------------------------

(847) 377-0525	Scholarships Program
----------------	----------------------

Email Address

www.hfnlc.org

Form and Content of Applications

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

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

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

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

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

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

Name and Address of Person to Whom Applications Should be Submitted

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

Telephone NumberName of Grant Program

(847) 377-0525

Organizational Capacity Building Program

Email Address

www.hfnlc.org

Form and Content of Applications

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

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

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

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

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

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

Name and Address of Person to Whom Applications Should be Submitted

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

Telephone Number

Name of Grant Program

(847) 377-0525

System Capacity Building Program

Email Address

www.hfnlc.org

Form and Content of Applications

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

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

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

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

Any Submission Deadlines

Letter of inquiry due June 15 and December 15

Proposal due (if invited) August 1 and February 1

Restrictions and Limitations on Awards

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

2019 DEPRECIATION AND AMORTIZATION REPORT

Form 990-PF Page 1

990-PF

Asset No	Description	Date Acquired	Method	Life	C o v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	First Pearl Software	12/21/07	167	36M		HY43	9,760.				9,760.	9,760.		0.	9,760.
3	Minolta EP 1030 Copier Donated	12/26/07	SL	5.00		16	1,500.				1,500.	1,500.		0.	1,500.
5	Two Desk Sets (Desk, credenza, book shelf)	03/05/08	SL	7.00		16	1,096.				1,096.	1,096.		0.	1,096.
6	Three Filing Cabinets (36"wide x 4 drawer)	05/29/08	SL	7.00		16	1,512.				1,512.	1,512.		0.	1,512.
9	Filing cabinet (36"wide x 4 drawer)	06/29/10	SL	7.00		16	695.				695.	695.		0.	695.
11	Dell Inkjet 966	06/29/07	SL	5.00		16	229.				229.	229.		0.	229.
12	Dell Latitude E5520	09/01/11	SL	5.00		16	1,358.				1,358.	1,358.		0.	1,358.
13	Dell Latitude E6420	03/01/12	SL	5.00		16	1,331.				1,331.	1,331.		0.	1,331.
14	Conference Table Donated 5/8/12	07/09/12	SL	7.00		16	595.				595.	588.		7.	595.
15	L-Shaped Desk Donated 5/8/12	07/09/12	SL	7.00		16	495.				495.	489.		6.	495.
16	L-Shaped Desk Donated 5/8/12	07/09/12	SL	7.00		16	495.				495.	489.		6.	495.
17	Phone and Network Wiring	07/09/12	SL	5.00		16	810.				810.	810.		0.	810.
18	Window Treatments - Blinds	09/24/12	SL	7.00		16	539.				539.	519.		20.	539.
19	Window Treatments - Film Tint	02/01/13	SL	5.00		16	758.				758.	758.		0.	758.
20	Dell PowerEdge T320 Server	06/01/13	SL	5.00		16	3,107.				3,107.	3,107.		0.	3,107.
21	Window Installation	11/01/13	SL	5.00		16	750.				750.	750.		0.	750.
22	(D)Apple 13" MacBook Pro	08/31/14	SL	5.00		16	1,699.				1,699.	1,614.		85.	1,699.
23	Server Hardware Additions	02/01/15	SL	5.00		16	969.				969.	840.		129.	969.

928111 04-01-18

(D) - Asset disposed

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

990-066

990-066

928111 04-01-18

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