Department of the

# Return of Organization Exempt From Income Tax

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

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

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

2020

**DLN: 93493033012302**OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service For the 2020 calendar year, or tax year beginning 07-01-2020 , and ending 06-30-2021 **C** Name of organization D Employer identification number B Check if applicable: Crossroads Fund Inc ☐ Address change 36-3092907 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3411 West Diversey 20 □ Application pending (773) 227-7676 City or town, state or province, country, and ZIP or foreign postal code Chicago, IL  $\,$  60647  $\,$ G Gross receipts \$ 6,663,316 Name and address of principal officer: H(a) Is this a group return for Aanes Meneses □Yes ☑No subordinates? 3411 West Diversey 20 H(b) Are all subordinates Chicago, IL 60647 ☐ Yes ☐No included? Tax-exempt status: **☑** 501(c)(3) ☐ 501(c)( ) **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► www.crossroadsfund.org L Year of formation: 1980 **M** State of legal domicile: IL K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► Summary 1 Briefly describe the organization's mission or most significant activities: The mission of Crossroads Fund, Inc. is to support community organizations working on issues of racial, social, and economic justice in the Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 4 18 Number of independent voting members of the governing body (Part VI, line 1b) 5 8 Total number of individuals employed in calendar year 2020 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . 6 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 39 7b **Prior Year Current Year** 5,743,429 2,503,729 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 121,907 125,956 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 164,241 670,233 6,539,618 2,789,877 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 1,221,289 3,393,744 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 586,252 617,916 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶347,698 334,887 381,844 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,142,428 4,393,504 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 . 647,449 2,146,114 Net Assets or Fund Balances Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . 6,828,847 10,335,139 751,866 21 Total liabilities (Part X, line 26) . 458,902 22 Net assets or fund balances. Subtract line 21 from line 20 . 9,583,273 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2022-02-02 Signature of officer Sign Here Agnes Meneses Co-Chair Type or print name and title Date Print/Type preparer's name Preparer's signature Check 🗹 if P00237741 Paid self-employed Firm's name > James M Babic PC Firm's EIN ▶ 20-0713860 Preparer Use Only Firm's address ► 6414 Sinclair Ave Phone no. (708) 749-7030

Berwyn, IL 60402

May the IRS discuss this return with the preparer shown above? (see instructions)

☑ Yes ☐ No

Form	990 (2	020)					Page <b>2</b>
Pa	rt III	Statement of	of Program Servic	e Accomplis	hments		
		Check if Sched	ule O contains a respo	nse or note to	any line in this Part III .		🗆
1	Briefly	describe the or	ganization's mission:				
The i		of Crossroads Fi	und, Inc. is to support	community org	janizations working on is	ssues of racial, social, and econom	nic justice in the Chicago
2	Did th	e organization u	ındertake any significa	nt program ser	vices during the year wh	nich were not listed on	
	the pr	ior Form 990 or	990-EZ?				🗌 Yes 🗹 No
	If "Yes						
3	Did th						
	servic	es?					🗌 Yes 🗹 No
	If "Yes						
4	Sectio	n 501(c)(3) and		ns are required	to report the amount of	argest program services, as meas f grants and allocations to others,	
4a	(Code:		) (Expenses \$	3,393,744	including grants of \$	3,393,744 ) (Revenue \$	)
	See Ad	lditional Data					, 
	(Code:		) (Expenses \$	377,553	including grants of \$	) (Revenue \$	)
	See Ad	lditional Data					
4c	(Code:		) (Expenses \$		including grants of \$	) (Revenue \$	)
4d			es (Describe in Schedu	•			
	<u> </u>	nses \$		uding grants of	·	) (Revenue \$	)
4e	Total	program servi	ce expenses ▶	3,771,2	97		

Form	rm 990 (2020) Pa									
Par	tiv Checklist of Required Schedules									
			Yes	No						
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes							
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes							
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No						
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes							
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No						
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete</i>									
	Schedule D,Part I 🥦	6	Yes							
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No						
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No						
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No						
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes							
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.									
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes							
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No						
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No						
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No						
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 😼	11e		No						
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes							
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes							
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No						
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No						
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No						
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No						
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No						
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No						
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No						
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes							
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No						

 ${f 20a}$  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  $\,$  .

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Νo

Yes

20a

20b

21

Form	990 (2020)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   23		Yes	No

1b

**b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

**1**c

Yes

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage <b>J</b>			
	Enter the number of employees reported on Form W-3, Transmittal of Wage and						
	Tax Statements, filed for the calendar year ending with or within the year covered by this return						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:	4a		No			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No			
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
	Organizations that may receive deductible contributions under section 170(c).						
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			No			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No			
a	If "Yes," indicate the number of Forms 8282 filed during the year						
e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No			
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9</b> a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders						
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.						
13							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans						
С	Enter the amount of reserves on hand						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No			
16	16		No				

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Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	lines 🗹
ect	tion A. Governing Body and Management			
			Yes	No
	inter the number of voting members of the governing body at the end of the tax year 18			
b	f there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or imilar committee, explain in Schedule O.			
E	inter the number of voting members included in line 1a, above, who are independent  1b 18			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	ifficer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		No No
	f officers, directors or trustees, or key employees to a management company or other person? .			
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
	oid the organization have members or stockholders?	6		No
r	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more nembers of the governing body?	7a		No
	are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Dersons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by he following:			
Т	he governing body?	8a	Yes	
Ε	ach committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
	s there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
ect	t <b>ion B. Policies</b> (This Section B requests information about policies not required by the Internal Revenue	e Code	9.)	
			Yes	No
· [	oid the organization have local chapters, branches, or affiliates?	10a		No
	f "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ind branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	las the organization provided a complete copy of this Form 990 to all members of its governing body before filing the orm?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
ı [	oid the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Vere officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to onflicts?	12b	Yes	
	Old the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
[	old the organization have a written whistleblower policy?	13	Yes	
	old the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
Т	he organization's CEO, Executive Director, or top management official	15a	Yes	
C	Other officers or key employees of the organization	15b	Yes	
Ι	f "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	old the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a axable entity during the year?	16a		No
i	f "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt tatus with respect to such arrangements?	16b		
ect	tion C. Disclosure			
Ĺ	ist the states with which a copy of this Form 990 is required to be filed▶			
	IL Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☑ Another's website ☑ Upon request ☑ Other (explain in Schedule O)			
Ε	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			

20 State the name, address, and telephone number of the person who possesses the organization's books and records:

▶Jane Kimondo 3411 West Diversey Chicago, IL 60647 (773) 227-7676

Part VII

(17) Jon Quinn Director

## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part  $\mbox{\rm VII}\,$  . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (E) (F) Name and title Average Position (do not check more Reportable Reportable Estimated amount of other hours per than one box, unless compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the (W-2/1099-(W-2/1099for related organization and Individual to or director Highest Former employ organizations MISC) MISC) related Institutional below dotted organizations emplo line) è compensat trustee 99 Trustee 60 40.00 (1) Jane Kimondo 128,000 0 **Executive Director** 0.00 4.00 (2) Henry Cervantes Х Χ 0 Co-Chair 0.00 4.00 (3) Agnes Meneses ................ 0 Co-Chair 0.00 4.00 (4) Megan Murray Cusick Х Χ 0 Treasurer 0.00 2.00 (5) Makkah Ali ..... 0 Director 0.00 2.00 Χ 0 0.00 2.00 (7) Emmanuel Andre . . . . . . . 0 Director 0.00 2.00 (8) Cecile De Mello 0 Х 0.00 2.00 (9) Lee Dewey 0 Director 0.00 2.00 (10) Denise Ferguson 0 Director 0.00 2.00 (11) Roxanna Gonzalez Χ 0 Director 0.00 2.00 (12) Tracie Hall . . . . . . . . . . Director 0.00 2.00 (13) Brenda Hernandez 0 Х Director 0.00 2.00 (14) Kheira Issaoui-Mansouri ..... 0 Director 0.00 2.00 Χ 0 0.00 2.00 (16) Nora Kyger 0 Director 0.00 2.00

0.00

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	t VII Section A. Officers, Directors	Trustees V	ov Fm	nlov			d His	iher	t Compensated	Employees (co	ntin	ued)	rage <b>c</b>
Pal	(A) Name and title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ore son	compensation from the organization	(E) Reportable compensation from related organizations		(F) Estimated amount of oth compensatio from the	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		rganizat relat organiz	ed
	reri Rivas	2.00	x						0		0		C
Direct	or	0.00							-		1		
` '	Muhammad Sankari	2.00 0.00	x						0		0		C
	Sub-Total				•								
	Total (add lines 1b and 1c)	•							128,000				
2	Total number of individuals (including but of reportable compensation from the orga	not limited to t			abov	/e) v	who re	ceive	ed more than \$100	,000			
												Yes	No
3	Did the organization list any <b>former</b> officine 1a? If "Yes," complete Schedule J for								est compensated er	I .			
4	For any individual listed on line 1a, is the organization and related organizations gr	sum of reporta	ble com	- npens	atio	n ar	nd othe	er co	mpensation from t	<b>⊢</b>	3		No
	individual		,		•		•	•			4		No
5	Did any person listed on line 1a receive o services rendered to the organization?If '									I .	5		No
Se	ection B. Independent Contractors												
1	Complete this table for your five highest of from the organization. Report compensations										ensa	tion	

(B) Description of services

(C) Compensation

Form 990 (2020)

compensation from the organization  $\blacktriangleright$  0

(A) Name and business address

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part		Statement	of E	Pevenue						Page <b>9</b>
-ran	VIII				a resn	onse or note to anv	line in this Part VIII			🗆
						3 411	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512 - 514
5 £	<b>1</b> a	La Federated campaigns 1a					1	revenue		312 314
Gifts, Grants ilar Amounts	ь	Membership dues		. į	1b					
و ق	<b>c</b> Fundraising events			1c	15,657					
iifts, ar A		Related organization			1d					
s, G imil		Government grants (		ļ	1e					
Tion er S	f	All other contributions and similar amounts above	not ir	icluded	1f	5,727,772				
ibu She	g	Noncash contributions lines 1a - 1f:\$	s incl	uded in						
Contributions, Gift and Other Similar	h	Total. Add lines 1a	a-1f		1g	242,278				
<u>0</u> ,	''					Business Code	5,743,429	Т		
	2a									
He.										
e ve	Ь									
Ce H	l c									
čer X	_					+				+
E S	d									
Program Service Revenue	е									
₫	f	All other program	serv	ice revenu	e.					
		<b>Total.</b> Add lines 2				0				
		Investment income			dends,	interest, and other	95,877	95,877		
		Income from invest			·     · cempt b	ond proceeds				
	5	Royalties				<b>&gt;</b>	. 0			
				(i) R	eal	(ii) Personal	_			
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income	6-				1			
	d	or (loss)   Net rental income	<b>6c</b>	loss).		<u> </u>	<u> </u>   0			
				(i) Secu		(ii) Other				
	7a	Gross amount from sales of	7a		114,64	4				
		assets other than inventory			,.					
	ь	Less: cost or	7b		84,56	5	1			
		other basis and sales expenses								
	c	Gain or (loss)	7c		30,07	9				
		Net gain or (loss)				· · · •	30,079	30,079		
ne	8a	Gross income from fu (not including \$		15,657 o						
Ven		contributions reported See Part IV, line 18			8a	181,351				
Other Revenue	b	Less: direct expen	ses		8b	· ·	_			
her	c	Net income or (los	s) fr	om fundra	ising ev	/ents .	142,218			
	9a	Gross income from			s.					
		See Part IV, line 19			9a					
		Less: direct expen Net income or (los				liaa				
		Tivee meanie or (103	3) 11	om gamm	g activi	ties •	1			
	10a	Gross sales of inve returns and allowa	entor	y, less	10a					
	b	Less: cost of good	s sol	d	101		-			
		Net income or (los	s) fr	om sales c	of inven	T .	0			
	11	Miscellaneo				Business Code	1,329	1 320		
	• •	<b>a</b> Expense reimb. a	nd o	tner			1,329	1,329		
	b	Foregiveness of de	ebt				101,500	101,500		
		. 5. 59.7511633 01 01	- <del>-</del> - 6							
	6	Management fees					425,186	425,186		
		All other revenue								
		• Total. Add lines 1				•	528,015			
	12	Total revenue. S	ee ir	structions		• • • •	6,539,618	653,971		Form 000 (2020)

Form 990 (2020)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c		_		mn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			<u> U</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,393,744	3,393,744		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	128,000	70,400	19,200	38,400
<b>6</b> Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
<b>7</b> Other salaries and wages	395,088	31,104	164,968	199,016
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	15,449	2,998	5,439	7,012
9 Other employee benefits	38,636	7,497	13,603	17,536
<b>10</b> Payroll taxes	40,743	7,906	14,345	18,492
11 Fees for services (non-employees):				
a Management	0			
<b>b</b> Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0		_	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12 Advertising and promotion	1,735	927	353	455
13 Office expenses	0			
14 Information technology	0			_
15 Royalties	0			
<b>16</b> Occupancy	31,741	6,159	11,175	14,407
17 Travel	0	-,		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
<b>19</b> Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	980	190	345	445
23 Insurance	3,999	776	1,408	1,815
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	3,999	770	1,400	1,013
a Program expenses	227,013	227,013		
<b>b</b> Technology fees and software	31,403	6,094	11,056	14,253
c Dues, subscriptions, reference	26,537	5,150	12,044	9,343
d Bank and credit card fees	16,940	3,287	5,964	7,689
e All other expenses	41,496	8,052	14,609	18,835
25 Total functional expenses. Add lines 1 through 24e	4,393,504	3,771,297	274,509	347,698
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2020)

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Liabilities 22

Fund Balances

ō 29

Assets 30 Intangible assets .

Grants payable .

Deferred revenue . . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

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31

32

33

6,828,847

357,402

101,500

458.902

1,753,435

4,616,510

6,369,945

6,828,847

Page **11** 

3,739,313

1,054,050

0

0

0

0

10,335,139

751,866

751.866

2.593,470

6,989,803

9,583,273

10,335,139

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# Check if Schedule O contains a response or note to any line in this Part IX .

Investments—other securities. See Part IV, line 11 .

**Total assets.** Add lines 1 through 15 (must equal line 33) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \\ \text{and} \end{align\*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

	Beginning of year		End of year
Cash-non-interest-bearing	1,587,178	1	3,
Savings and temporary cash investments	801,569	2	1,0
Diadage and grants receivable, not	92 952	٠	

2 3 Pledges and grants receivable, net . 5.000 Accounts receivable, net Loans and other payables to any current or former officer, director, trustee,

60.500 0 key employee, creator or founder, substantial contributor, or 35% controlled 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6

0 7 0 Notes and loans receivable, net . . . Assets 0 8 Inventories for sale or use . . Prepaid expenses and deferred charges . 14,667 9 17,507

10a Land, buildings, and equipment: cost or other 10a 83,811 basis. Complete Part VI of Schedule D 10b 78,005 2.466 10c 5,806 b Less: accumulated depreciation 11 4,334,114 11 5,457,963 Investments—publicly traded securities .

3h

Form 990 (2020)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

#### **Additional Data**

**Software ID:** 20011551 Software Version: 2020v4.0

EIN: 36-3092907

Name: Crossroads Fund Inc.

Form 990 (2020)

justice, and many other issues concerning social and economic justice.

Form 990, Part III, Line 4a:

Grant Making - During the fiscal year dozens of grants were issued to organizations working for social change, health care access, youth organizing, workers' rights, criminal

Form 990, Part III, Line 4b:

Technical assistance and leadership development provided to grantees. Educational programs designed to connect donors to grassroots organizations and to deepen the

understanding of social justice issues.

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9349303301230							3493033012302						
SCI	HFD	ULE A	- Dublic 4	Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047					
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2020					
		f the Treasury	► Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection					
Nam	e of th	he organiza und Inc	tion				Employer identific	ation number					
C10551	oaus i c	und inc					36-3092907						
	rt I		for Public Charity State				See instructions.						
1 1	organiz		a private foundation because	•	•		(A)(:)						
		·	onvention of churches, or as										
2			scribed in section 170(b)(		`	, ,							
3		·	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>										
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170 (b)(1)(A)(iv).</b> (Complete Part II.)											
6			tate, or local government or	_									
7	✓		ation that normally receives ( <b>0(b)(1)(A)(vi).</b> (Complete		s support from a	governmental u	nit or from the gener	al public described in					
8		A communi	ty trust described in <b>sectior</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)							
9			ural research organization de rant college of agriculture. S					ege or university or a					
10		from activit investment	ation that normally receives: dies related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	ections—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross					
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).						
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in <b>section 5</b>	<b>09(a)(1)</b> or <b>se</b>	ction 509(a)(2	). See <b>section 509(</b> a						
a		<b>Type I.</b> A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or composite or elect a major	ontrolled by its s	upported organiz	zation(s), typically by						
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ervised or controlled i ation vested in the sar									
С		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its					
d		Type III n functionally	on-functionally integrate integrated. The organizations). You must complete Par	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar						
е		Check this	box if the organization receiver Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally					
f	Enter		• • • • • • • • • • • • • • • • • • • •		-		<u> </u>						
g	Provi	de the follow	ing information about the su	pported organization(	т'								
	(i) Name of supported organization			(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
			<u> </u>										
Tota			tion Act Notice, see the I		Cat. No. 11285		Schedule A (Form 9						

to or expended on its behalf.						0
The value of services or facilities furnished by a governmental unit to the organization without charge						0
Total. Add lines 1 through 3	<b>1</b> ,914,167	2,259,889	1,586,755	2,607,572	5,885,647	14,254,030
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,896,902
<b>Public support.</b> Subtract line 5 from line 4.						11,357,128
	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)   Public support. Subtract line 5	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5	The value of services or facilities furnished by a governmental unit to the organization without charge.  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5

Section B. Total Support Calendar year (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total (or fiscal year beginning in) ▶ 1,914,167 2,259,889 1,586,755 2,607,572 5,885,647 Amounts from line 4. . Gross income from interest,

dividends, payments received on 319,235 219,627 180,946 121,907 125,956 securities loans, rents, royalties and income from similar sources. . . Net income from unrelated business activities, whether or not the

14,254,030 business is regularly carried on. . or loss from the sale of capital

967,671 10 Other income. Do not include gain assets (Explain in Part VI.). . Total support. Add lines 7 through 15,221,701

12 717,905

11 

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check

Section C. Computation of Public Support Percentage Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) . . . . . . . . .

14 74.610 %

15 Public support percentage for 2019 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 76.220 %

16a 33 1/3% support test-2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 

h 33 1/3% support test-2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported h 10%-facts-and-circumstances test-2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2020

P	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	qualify under	the tests listed	oelow, please co	omplete Part II.	)	
Se	ection A. Public Support						
	Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and		` '	``		, ,	
1	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
h	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year.						
	Add lines 7a and 7b.						
8	<b>Public support.</b> (Subtract line 7c						
	from line 6.)						
36	ection B. Total Support		1	1	1	T	Τ
	Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	(or fiscal year beginning in) ► Amounts from line 6						
	Gross income from interest,						
L0a	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
_	Add lines 10a and 10b.						
с 11	Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.).						
14	First 5 years. If the Form 990 is for the	ne organization's	first, second, third	l, fourth, or fifth t	ax vear as a secti	on 501(c)(3) orga	nization.
	check this box and <b>stop here</b>	-			•	( ) ( )	· —
-				<u> </u>			· · · · • · · ·
	ection C. Computation of Public S Public support percentage for 2020 (lin			column (f))		1 4 = 1	
15						15	
16	Public support percentage from 2019 S					16	
Se	ection D. Computation of Invest						
17	Investment income percentage for 202	-		-		17	
18	Investment income percentage from 2	<b>019</b> Schedule A,	Part III, line 17 .			18	<u> </u>
	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and						
	33 1/3% support tests—2019. If the						
U	not more than 33 1/3%, check this box	-			·		
20	· · · · · ·	-	-				
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	.9a, or 19b, check	this box and see	instructions	. ▶ ⊔

Page 4

5a

5b 5c

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9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
	III section 309(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and			
	3c below.	3a	ı	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes?			

	m section ses (a)(1) or (2).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and		
	3c below.	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the		
	determination.	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.		

	the public support tests under section 509(a)(2)? If res, describe in Part VI when and now the organization made the			
	determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported			

С	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.					
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b					

organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pā	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
h	A family member of a person described in 11a above?	11a		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in <b>Part</b>	11c		
	VI.			
5	ection B. Type I Supporting Organizations		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	163	140
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supported organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.			
_	ection C. Type II Supporting Organizations			
	ection c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing	1		
_	documents in effect on the date of notification, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
2				
3	, , , , , , , , , , , , , , , , , , ,			
,	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.			
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 3 Add lines 1 through 3 4 5 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
		1		

5 Income tax imposed in prior year 5 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

_1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

<b>7 Total annual distributions.</b> Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions				
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount	10			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions if any for years prior to 2020				

	stributions to attentive supported organizations to wh tails in <b>Part VI</b> ). See instructions	ich the organization is respon	sive ( <i>provide</i>	8	
<b>9</b> Di	stributable amount for 2020 from Section C, line 6			9	
<b>10</b> Lin	e 8 amount divided by Line 9 amount			10	
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
<b>1</b> Dis	tributable amount for 2020 from Section C, line 6				
(re	derdistributions, if any, for years prior to 2020 asonable cause required <i>explain in <b>Part VI</b></i> ). e instructions.				
<b>3</b> Exc	ess distributions carryover, if any, to 2020:				
<b>a</b> Fr	om 2015				

10 Line 8 amount divided by Line 9 amount	10			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in <b>Part VI</b> ). See instructions.				
<b>3</b> Excess distributions carryover, if any, to 2020:				
a From 2015				
<b>b</b> From 2016				
c From 2017				
<b>d</b> From 2018				
e From 2019				
f Total of lines 3a through e				
<b>q</b> Applied to underdistributions of prior years				

Schedule A (Form 990 or 990-EZ) (2020)

h Applied to 2020 distributable amount i Carryover from 2015 not applied (see

4 Distributions for 2020 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2020 distributable amount

c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

instructions)

See instructions.

d Excess from 2019.

a Excess from 2016. . . . . **b** Excess from 2017. . . . . c Excess from 2018. . . . .

e Excess from 2020. . . . .

3j and 4c. 8 Breakdown of line 7:

\$

Schedule A (	Form 990 or 990-EZ) 2020 Page <b>8</b>						
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).						
Facts And Circumstances Test							

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

## Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493033012302

*2*020

pen to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Moreover below www.irs.gov/Form990 for instructions and the latest information.

SCHEDULE C (Form 990 or 990-

EZ)

5

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** Crossroads Fund Inc 36-3092907 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ...... 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... 3 ☐ Yes **✓** No Was a correction made? ☐ Yes **✓** No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b....... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2020

ress,	EIN,	

Page 2

4	Check ► ☐ if the filing organization belongs expenses, and share of excess lob			t in Part IV each a	ffiliated grou	up member's nam	e, ado	dress, EIN,
3	Check ▶ ☐ if the filing organization checked	box A and "l	imited control" p	rovisions apply.				
	Limits on Lobb (The term "expenditures" m	ying Exp	enditures	,		(a) Filing organization's totals	(b)	Affiliated group totals
La	Total lobbying expenditures to influence public	opinion (gras	ss roots lobbying	)			+	
	Total lobbying expenditures to influence a legis			•			+	
	Total lobbying expenditures (add lines 1a and 1						$\top$	
d	Other exempt purpose expenditures							
е	Total exempt purpose expenditures (add lines 1	Lc and 1d)						
f	Lobbying nontaxable amount. Enter the amoun columns.	t from the fo	llowing table in b	ooth				
	If the amount on line 1e, column (a) or (b	) is: The lo	bbying nontax	able amount is:				
	Not over \$500,000	20% of	the amount on line	1e.				
	Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the	excess over \$500,000	D.			
	Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the	excess over \$1,000,0	00.			
	Over \$1,500,000 but not over \$17,000,000	\$225,00	00 plus 5% of the ex	xcess over \$1,500,00	0.			
	Over \$17,000,000	\$1,000,	000.					
j		ar Averagi	ng Period Und	der Section 50	1(h)			Yes 🗌 No
	(Some organizations that mad columns below. S						e fiv	⁄e
	Lobbying	Expenditu	res During 4-	Year Averagin	g Period			
	Calendar year (or fiscal year beginning in)		<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	9 <b>(d)</b> 2020	)	(e) Total
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures						$\perp$	
d	Grassroots nontaxable amount						$\perp$	
e	Grassroots ceiling amount							

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file Form 5768 (election under section 501(h)).	ed				
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)		(b)	
activ		Yes   No		,	Amour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		l No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	┨		
С	Media advertisements?		No	┪		
d	Mailings to members, legislators, or the public?		No	t		
е	Publications, or published or broadcast statements?		No	t		
f	Grants to other organizations for lobbying purposes?	Yes		T		30,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	T		<u> </u>
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	t		
i	Other activities?		No	t		
j	Total. Add lines 1c through 1i				3	30,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	(5), o	r sect	ion	L w	<b>.</b>
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		T I	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)( and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I answered "Yes."	IIÍ-A			501(c	)(6)
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a				
a b	Current year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information		•			
	vide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); F cructions), and Part Il-B, line 1. Also, complete this part for any additional information.	Part II-	-A, lines	1 ar	ıd 2 (se	ee
	Return Reference Explanation					
	I-A, Line 1 - Direct and Indirect Crossroads granted \$30,000 to four 501(c)(4) tax-exempt organizations that a Campaign Activities Crossroads and promote social welfare through advocacy, community education				on of	

development.

DLN: 93493033012302

OMB No. 1545-0047

**SCHEDULE D** (Form 990)

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

-	nal Revenue Service	► Go to <u>www.irs.gov/Form</u> 9	90 for instruction	s a	nd the latest info	matic	on	Ins	pection
	ame of the organiossroads Fund Inc	ization				Emp	oloyer identi	fication i	number
ur	USSIDAUS FUNG INC					36-3	3092907		
P		zations Maintaining Donor Adviso				r Acc	ounts.		
	Complet	te if the organization answered "Yes' I	<u>on Form 990, Pa</u> (a) Donor a				(b) Funds an	d ather a	counts
1	Total number at a	end of year	(a) Donor a	auvi	sea runus 4		(b) Funds an	id other a	ccounts
2		of contributions to (during year)			50,240				
3		of grants from (during year)			54,201				
4	55 5	at end of year			14,200				
5	Did the organiza	ation inform all donors and donor advisors roperty, subject to the organization's excl					funds are the		Yes 🗌 No
6	charitable purpo	ation inform all grantees, donors, and don uses and not for the benefit of the donor o	r donor advisor, or	for	any other purpose o				Yes 🗌 No
Pa		vation Easements. te if the organization answered "Yes'	' on Form 990, Pa	art	IV, line 7.				
1		onservation easements held by the organiz							
	☐ Preservation	on of land for public use (e.g., recreation	or education) [		Preservation of an	histor	ically importa	nt land ar	ea
	☐ Protection	of natural habitat	[		Preservation of a d	ertifie	d historic stru	ıcture	
	☐ Preservatio	on of open space							
2		2a through 2d if the organization held a q	ualified conservation	n cc	entribution in the for	m of a	conservation	1	
_		e last day of the tax year.					Held at th		the Year
а	Total number of	conservation easements				2a			
b	Total acreage res	stricted by conservation easements				2b			
С		ervation easements on a certified historic		•	·	2c			
d		ervation easements included in (c) acquire n the National Register	ed after 7/25/06, ar	nd n	ot on a historic	2d			
3	Number of conset tax year ►	ervation easements modified, transferred	. released, extinguis	shed	d, or terminated by	the or	ganization dui	ring the	
4	Number of state	s where property subject to conservation	easement is located	d ►			_		
5		zation have a written policy regarding the t of the conservation easements it holds?				of viola	ations,	Yes	□ No
6	Staff and volunt	eer hours devoted to monitoring, inspecti	ng, handling of viol	atio	ns, and enforcing co	onserv	ation easeme	nts during	the year
7	Amount of expe	nses incurred in monitoring, inspecting, h	andling of violations	s, aı	nd enforcing conser	vation	easements di	uring the	year
8		ervation easement reported on line 2(d) a (h)(4)(B)(ii)?				70(h)(		Yes	□ No
9	balance sheet, a	cribe how the organization reports consel and include, if applicable, the text of the fo 's accounting for conservation easements	ootnote to the organ					es	
Pa		zations Maintaining Collections of te if the organization answered "Yes"				er Si	milar Asset	ts.	
1a	=0.1	on elected, as permitted under FASB ASC				nt and	balance sheet	t works of	art,
	historical treasur Part XIII, the te	res, or other similar assets held for public xt of the footnote to its financial statemer	exhibition, educations that describes the	on, iese	or research in furth e items.	erance	of public ser	vice, prov	ride, in
b	historical treasu	on elected, as permitted under FASB ASC res, or other similar assets held for public its relating to these items:							
		ed on Form 990, Part VIII, line 1							
(	(ii)Assets included	in Form 990, Part X					. 🕨 \$		
2		on received or held works of art, historica its required to be reported under FASB AS				ncial g	ain, provide t	he	
а	Revenue include	ed on Form 990, Part VIII, line 1					. <b>&gt;</b> \$		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2020

d Equipment .

Sche	dule D (Form 990) 2020								Page <b>2</b>
Par	Organizations Mai	intaining Collections o	of Art, Histo	rical Treas	sures, or C	ther Simila	r Assets (cont	inued)	
3	Using the organization's acqui items (check all that apply):	sition, accession, and other	r records, chec	k any of the	following tha	t are a significa	ant use of its col	lection	
а	Public exhibition		d	☐ Loa	an or exchang	ge programs			
b	Scholarly research		е	☐ Oth	ner				
С	Preservation for future of	generations							
4	Provide a description of the or Part XIII.	ganization's collections and	d explain how t	hey further t	the organizati	ion's exempt p	urpose in		
5	During the year, did the orgar assets to be sold to raise fund						☐ Yes	□ N	o
Par		dial Arrangements. anization answered "Yes	s" on Form 99	0, Part IV,	line 9, or r	eported an a	mount on Forn	n 990,	Part
1a	Is the organization an agent, included on Form 990, Part X?	•	,				· 🗌 Yes	□ N	0
b	If "Yes," explain the arrangem	pent in Part VIII and compl	ete the followin	a table:			Amount		_
c	Beginning balance			-	Η,	lc	Amount		_
d	Additions during the year				· –	ld			_
e	Distributions during the year .				· · · · ⊢	le			_
f	Ending balance				· · · —	Lf			_
	-								-
2a	Did the organization include a					•	_	∐ N	0
	If "Yes," explain the arrangem		e if the explana	ation has bee	en provided in	n Part XIII	Ц		
Pa	rt V Endowment Funds	<b>s.</b> anization answered "Yes	" on Form OC	10 Dort I\/	lino 10				
	Complete if the orga	(a) Curre		Prior year		s back (d) Thre	e years back (e)	Four year	rs back
1a	Beginning of year balance .		3,702,367	3,691,501	. 3,4	193,108	3,298,980	2,9	921,543
b	Contributions		45,612	81,632	:	186,958	105,694	:	180,494
С	Net investment earnings, gains	, and losses	1,011,495	87,548	3	165,536	222,639	3	329,135
d	Grants or scholarships		96,158	139,372	:	143,387	122,406	:	121,616
	Other expenditures for facilities and programs	;							
f	Administrative expenses			18,943	3	10,714	11,799		10,576
g	End of year balance		1,663,316	3,702,366	3,6	591,501	3,493,108	3,2	298,980
2	Provide the estimated percent	age of the current year end	d balance (line	1g, column (	(a)) held as:	•	•		
а	Board designated or quasi-end	dowment 🟲							
b	Permanent endowment >								
С	Term endowment ▶								
	The percentages on lines 2a, 2	 2b, and 2c should equal 10	0%.						
3a	Are there endowment funds no organization by:	ot in the possession of the	organization th	at are held a	and administe	ered for the		Yes	No
	(i) Unrelated organizations						3a(i)		No
	(ii) Related organizations .						3a(ii)		No
b	If "Yes" on 3a(ii), are the related	ted organizations listed as	required on Sch	nedule R? .			. 3b		No
4	Describe in Part XIII the inten	ded uses of the organizatio	n's endowmen	t funds.			-		
Par	t VI Land, Buildings, a							_	
	· · · · · · · · · · · · · · · · · · ·	anization answered "Yes  (a) Cost or other basis	S" on Form 99 (b) Cost or oth			ee Form 990 ulated depreciation		0. look value	
	Description of property	(investment)	(b) Cost of oth	ei nasis (orilei	, (c) Accum		(u) E		
<b>1</b> a	Land								
b	Buildings								
	Leasehold improvements				1				

83,811

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

5,806

5,806

78,005

Part VII	Complete if the organization answered "Yes" on Form 990,	Part IV	ine 11h	See Form 990 I	Part X line	12
	(a) Description of security or category (including name of security)	(b) Book value			d of valuatio	n:
	Il derivatives					
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(I)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,	Part IV, l	ine 110	. See Form 990,	Part X, line	13.
	(a) Description of investment	·		(b) Book value	(c) Meth	od of valuation: d-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colum Part IX	on (b) must equal Form 990, Part X, col.(B) line 13.)  Other Assets.		•		<u> </u>	
	Complete if the organization answered 'Yes' on Form 990,  (a) Description	Part IV, li	ne 11d	. See Form 990, Par		<b>b)</b> Book value
(1)	(-)				<del></del>	.,
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colu					<b>&gt;</b>	
	Complete if the organization answered 'Yes' on Form 990, (a) Description of liability		ne 11e	or 11f.See Form	990, Part >	(, line 25. (b) Book value
1. (1) Federal	income taxes					(B) Book value
(2)						1
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)	te to the o	rganizal	tion's financial state	ments that r	eports the
	or uncertain tax positions. In Part XIII, provide the text of the footnor's liability for uncertain tax positions under FIN 48 (ASC 740). Check		_	the footnote has be	en provided	

1

Schedule D (Form 990) 2020

1

Page 4

1,067,214

6,539,618

4,393,504

4,393,504

4.393.504

2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	2a	1,067,214				
b	Donated services and use of facilities	2b					
		_					

Other (Describe in Part XIII.) 2d d 2e е

Subtract line **2e** from line **1** . . . . . . . . . . 3 3 6,539,618 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b

Add lines **4a** and **4b** . . . . . . 4c C 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . . 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements . . . . . . 1 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . . . 2a 2b Prior year adjustments . . . . . 2c 2d

Total revenue, gains, and other support per audited financial statements . . .

Other (Describe in Part XIII.) . .

C d Add lines 2a through 2d .

Subtract line 2e from line 1 . . . . . . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

3 4

b Add lines **4a** and **4b** . . . . . . . . . . . .

5

Return Reference

See Additional Data Table

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information

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

4b

Explanation

4a

4c 5

3

2e

Schedule D (Form 990) 2020

Page <b>5</b>		chedule D (Form 990) 2020		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2020

#### **Additional Data**

**Software ID:** 20011551 **Software Version:** 2020v4.0

**EIN:** 36-3092907

Name: Crossroads Fund Inc.

#### **Supplemental Information**

Return Reference Explanation Part V, Line 4: Intended uses of Income from endowments is restricted to support Crossroads' general grant-making and program activities.

the endowment fund.

Return Reference	Explanation
Part X : FIN48 Footnote	Crossroads is exempt from federal taxes under Section $501(c)3$ of the Internal Revenue Code . It qualifies for charitable contributions under Section $170(b)(1)(A)(vi)$ , and has been c lassified as an organization that is not a private foundation under Section $509(a)(1)$ . Cro ssroads' management has determined that FASB ASC 740-10, which addresses accounting for un

certainty in income taxes, has no effect on its financial statements due to Crossroads' ta

x-exempt status.

Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493033012302 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization Crossroads Fund Inc 36-3092907 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☑ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? No Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2020

	dule G (Form 990 or 990-EZ) 2020  rt III Fundraising Events. Comple	ato if the organization	answered "Ves" on Fer	m 000 Part IV line 19	Page 2
- (-	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and			
	gross receipts greater than \$2	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		Seeds of Change (event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue					
Reve					
	1 Gross receipts	197,008			197,008
	2 Less: Contributions	15,657			15,657
	line 2)	181,351			181,351
	4 Cash prizes				
ses	5 Noncash prizes				
bens	7 Food and beverages				
Direct Expenses	8 Entertainment				
	9 Other direct expenses	39,133			39,133
	<b>10</b> Direct expense summary. Add lines 4 t	hrough 9 in column (d)			39,133
	11 Net income summary. Subtract line 10			<b>.</b>	142,218
Pai	<b>t III Gaming.</b> Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	IV, line 19, or reported	l more than \$15,000
Revenue		(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
<u>ж</u>	1 Gross revenue				
uses	2 Cash prizes				
Direct Expense	3 Noncash prizes				
ect	4 Rent/facility costs				
<u>ā</u> —	5 Other direct expenses				
		☐ Yes <u>%</u>	Yes %	☐ Yes %	
	<b>6</b> Volunteer labor	□ No	□ No	☐ No	
	<b>7</b> Direct expense summary. Add lines 2 t	hrough 5 in column (d)			
	8 Net gaming income summary. Subtract	t line 7 from line 1, colum	n (d)	•	
9 a b	Enter the state(s) in which the organizati Is the organization licensed to conduct ga If "No," explain:	aming activities in each of	these states?		Yes No
10a					1
b	If "Yes," explain:				

Sche	dule G (Form 990 or 990-EZ) 2020						F	Page <b>3</b>
11	Does the organization conduct ga	ming activities with nonmember	5?			☐ Yes	Пио	
12	Is the organization a grantor, ben formed to administer charitable g		member of a partnership or other	entity 		□Yes		
13	Indicate the percentage of gamin	g activity conducted in:		I	1	□ ies		
а	The organization's facility .				13a			%
b	An outside facility			[	13b			%
14	Enter the name and address of th	e person who prepares the orga	nization's gaming/special events bo	oks and red	cords:			
	Name •							
	Address							
15a	Does the organization have a con revenue?	tract with a third party from who ...............	om the organization receives gamin	-		□Yes	Пыс	
b	If "Yes," enter the amount of gam	ing revenue received by the org	anization 🕨 \$			□ res		
	amount of gaming revenue retain	ed by the third party 🕨 \$						
С	If "Yes," enter name and address	of the third party:						
	Name ►							
	Address •							
16	Gaming manager information:							
	Name ▶							
	Gaming manager compensation	• \$						
	Description of services provided	·						
	☐ Director/officer	☐ Employee	☐ Independent contra	ctor				
17	Mandatory distributions:							
а	Is the organization required unde retain the state gaming license?		stributions from the gaming procee	eds to		Пν		
b			ited to other exempt organizations	or spent		☐Yes	∟ No	
-	in the organization's own exempt	•		-1				
Pai			ions required by Part I, line 2b licable. Also provide any additi					 S.
	Return Reference		Explanation					

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

(Form 990)

Department of the

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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

OMB No. 1545-0047

DLN: 93493033012302

Open to Public Inspection

Treasury Internal Revenue Service		► Go to <u>ww</u>	<u>w.irs.gov/Form990</u> for	the latest information	on.		
Name of the organization						Employer id	entification number
Crossroads Fund Inc						36-3092907	,
		and Assistance					
Does the organization ma the selection criteria used						ce, and	☐ Yes ☑ N
2 Describe in Part IV the org	<u> </u>						
			i <b>nd Domestic Governm</b> o ditional space is needed.	ents. Complete if the o	rganization answered "Yes'	on Form 990, Part I\	/, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assistan	
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
	. , . ,	-					132
For Paperwork Reduction Act Noti				Cat. No. 50055			Schedule I (Form 990) 2020

Schedule I (Form 990) 2020

(7)

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

**Explanation** 

## **Additional Data**

360 Nation

925 E Marquette Rd Chicago, IL 60637 A Long Walk Home

1658 N Milwaikee Ave 104 Chicago, IL 60647

**Software ID:** 20011551 **Software Version:** 2020v4.0 **EIN:** 36-3092907 Name: Crossroads Fund Inc

36-3983087

30-0053613

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		if applicable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

501(c)(3)

501(c)(3)

(a) Name and address of	<b>(b)</b> EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		if applicable	grant	cash	(book, FMV, appraisal,

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.

10,000

10,000

(g) Description of

non-cash assistance

(h) Purpose of grant or assistance

General operations

General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government AAAN 36-4034958 501(c)(3) 35.000l IGeneral operations 3148 W 63rd St 2nd Floor

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

36-4067995

Chicago, IL 60629
About Face Theatre

5252 N Broaday 2nd Floor Chicago, IL 60640

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Action Now Institute	27-1253912	501(c)(3)	50,000	0		General o
1901 W Carroll Ave 201A						
Chicago, IL 60612						

38,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Affinity Community Services 2850 S Wabash 108

Chicago, IL 60616

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government operations

AFIRE 4300 N California Ave Chicago, IL 60618	26-3305351	501(c)(3)	10,000	0		General operations
Albany Park Defense Network	36-2310468	501(c)(3)	8,000	0		General operations

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3253 W Wilson Ave Chicago, IL 60625

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government operations

					,	
Alliance for Comm Services	36-3072514	501(c)(3)	7,000	0		General op
37 S Ashland						
Chicago II 60607					1	1

70.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Alliance of the Southeast

9204 S Commercial Ave. Chicago, IL 60617

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government altChicago 501(c)(3) 10.000 IGeneral operations 1 East Erie St

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60611
Assastas Daughters

PO Box 802156 Chicago, IL 60680

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Black Girls Break Bread 81-4951998 501(c)(3) 30.000 IGeneral operations 1322 S Prairie Ave

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60605

710 E 47th Street Chicago, IL 60653

Black Leaders Buildg Together

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 82-3487898 501(c)(3) 58.000l Black Lives Matter Chicago IGeneral operations 1325 S Wabash Chicago, IL 60605

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Black Researchers Collective

4925 S Champlain Ave Chicago, IL 60615

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 81-0975889 501(c)(3) 57.000l Black Youth Project 100 IGeneral operations PO Box 15254

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60615

5061 S Prairie Ave Chicago, IL 60615

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

				_		
Blue Tin Production	47-4847984	501(c)(3)	42,682	0		General o
640 W Irving Park Rd						
Chicago, IL 60613						

10.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Borderless Magazine NFP

2033 N Racine Ave Chicago, IL 60614

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Brave Space Alliance 51-0178807 501(c)(3) 41.000 IGeneral operations 1515 E 52nd Place 3rd Floor Chicago, IL 60615

25,000

Bronzeville Black Historical

3510 S Rhodes Ave Chicago, IL 60653 36-4523754

501(c)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Center RacialGender Equity 45-4461853 501(c)(4) 7.500l IGeneral operations 2243-2245 E 71st Street Chicago, IL 60649

40.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chao Alliance Against Racist

1325 S Wabash Ave Chicago, IL 60605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 83-0923481 501(c)(3) 13.000l Chicago 400 Alliance IGeneral operations 2840 N Francisco Ave 3B

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60618

5760 W Irving Park Rd Chicago, IL 60634

Chicago Coalition to SOMHC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Chicago Comm & Wrkrs Rights	36-3028729	501(c)(3)	12,000	0		General op
2801 S Hamlin						
Chicago, IL 60623						

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago Community Bond Fund

601 S California Chicago, IL 60612

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 36-3432023 501(c)(3) 12.500 IGeneral operations

41.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago Community	
Foundation	
225 N Michigan Ave 1220	
Chicago, IL 60601	

Chicago Desi Youth Rising

4753 N Broadway 502 Chicago, IL 60640

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Chicago Freedom School 20-4735643 501(c)(3) 50.000 IGeneral operations 719 S State St 4th Floor

9.0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60605
Chicago Housing Initiative

710 E 47th Street Chicago, IL 60655

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 82-5447737 501(c)(3) 6.000 Chicago IWOC Street Address Unknown

Chicago, IL 60618

Chicago Law & Education 27-4720623 501(c)(3) 11,000 0 General operations Found

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3120 S Kostner Ave Chicago, IL 60623

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Chicago Palestine Film Fest 04-3105608 501(c)(3) 8.000 IGeneral operations 637 S Dearborn St 3rd Floor

7.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60605
Chicago Park District

7059 S South Shore Dr Chicago, IL 60649

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Chicago Reader 83-2375349 501(c)(3) 14.445 IGeneral operations 2930 S Michigan Ave Chicago, IL 60616

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago Student Action

PO Box 15123 Chicago, IL 60615

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Chicago Torture Justice Cen 36-3959353 501(c)(3) 70.000l IGeneral operations 641 W 63rd Street

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60621

Chicago Torture Justice Mem

219 W Washington Blvd Oak Park, IL 60302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 37-1916156 501(c)(3) 30.000 Chicago United for Equity IGeneral operations 100 N LaSalle St 600 Chicago, IL 60602

5.829

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Christian Peacemaker Teams

PO Box 6508 Chicago, IL 60680

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Christianaire 81-1921942 501(c)(3) 25.000l IGeneral operations 2101 S Michigan Ave

5.496

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60616
Cicero Independiente

4844 W 23rd Place Cicero, IL 60804

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Circles and Cyphers 36-2677402 501(c)(3) 17.000l IGeneral operations

1545 W Morse Ave Berwyn, IL 60626

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

188 Industrial Dr 106 Elmhurst, IL 60126

Citizen Advocacy Center 36-3920270 501(c)(3) 13.000 General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Coalition Better Chinese Amer 2301 S Archer Ave Chicago, IL 60616	81-4209494	501(c)(3)	10,000	0		General op

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1044 SGunderson Oak Park, IL 60304

CommPeace Palestine & Israel 51-0181498 7.000 General operations 501(c)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Coops Not Cages ARC C/O CNC Chicago, IL 60608	46-4211078	501(c)(3)	7,000			General operations
Dissenters	36-4624060	501(c)(3)	28,000	0		General operations

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6621 N Lakewood Ave 1F Chicago, IL 60626

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

El Griot & Areito Project	501(c)(3)	25,000	0		General o
7656 S Euclid St					
Chicago II 60649					

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

End IL Prison Lockdown Coalit 3508 W Fullerton Ave.

Chicago, IL 60647

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Equity & Transformation	36-3850240	501(c)(3)	50,000	0		General op
10 W 35th Street			· ·			
Chicago, IL 60616						

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Evanston Present and Future

1504 Pitner Ave Evanston, IL 60201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Fathers Families and Health 45-4684839 501(c)(3) 10.000 IGeneral operations 1507 E 53rd St

15.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60615 Fight Now Chicago

644 E 79th St Chicago, IL 60619

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government First Defense Legal Aid 01-0729555 501(c)(3) 25.000l IGeneral operations 601 S California Ave Chicago, IL 60612

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Free Write Arts & Literacy

1932 S Halsted St Chicago, IL 60608

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Garfield Park Comm Council 45-4055306 501(c)(3) 30.000 IGeneral operations 300 N Central Park Ave

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c((3)

Chicago, IL 60624 Get To Work

501 N Central Ave Chicago, IL 60644

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Getting Grown Collective 82-3986964 501(c)(3) 10.000 IGeneral operations 6335 S Morgan

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60621

1235 A North Clybourn Chicago, IL 60610

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government GPLXC 47-3136024 501(c)(3) 15.000l IGeneral operations Gage Park

Chicago, IL 60632 501(c)(3) 22,500 General operations

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Grassroots Collaborative 36-4328006

637 S Dearborn St 3rd Floor Chicago, IL 60605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 27-1641931 501(c)(4) 7.500l Grassroots Illinois Action IGeneral operations 637 S Dearborn St

7.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

36-2746468

Chicago, IL 60605

4300 N California Ave Chicago, IL 60618

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Healing to Action 81-4546742 501(c)(3) 66.000l IGeneral operations 332 S Michigan Ave Chicago, IL 60604

9.100

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Honey Pot Performance

5014 N Springfield 1 Chicago, IL 60625

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government IGeneral operations

IL Caucus Adolescent Health	36-3223988	501(c)(3)	25,000	0	
719 S State St					
Chicago, IL 60605					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2425 W 22nd Street 209 Oak Brook, IL 60523

IL Muslim Civic Coalition 83-2647003 501(c)(3) 7.000 General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government eneral operations

Illinois Dream Fund 225 N Michigan Ave Chicago, IL 60601	36-2167000	501(c)(3)	11,000	0		Gen
Illinois Prison Project	45-5441381	501(c)(3)	7,000	0		Gen

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

53 W Jackson Chicago, IL 60604

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 86-1556091 501(c)(3) 12.000 Illinois Workers In Action IGeneral operations 1499 Georgia Ct

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Naperville, IL 60540

Immigrant Solidarity DuPage

213 S Wheaton Ave Wheaton, IL 60187

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 47-3592997 501(c)(3) 11.000 InterAction Initiative Inc General operations 1440 W Taylor St Chicago, IL 60609

5.448

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Korea Times Chicago

619 Milwaukee Ave Glenview, IL 60025

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Lawyers Com Better Housing 36-3134577 501(c)(3) 40.000 IGeneral operations 33 N LaSalle St

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60602 Lift the Ban Coalition

4242 S Cottage Grove Ave Chicago, IL 60653

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 100 100 1 . . . 22 0404240 E04( )(3) FF 000 1 ~ erations

c/o St Pauls UCC	32-0401348	501(c)(3)	55,000	U		General operations
Chicago, IL 60614						
Live Free Chicago	81-5487128	501(c)(3)	33,000	0		General operations

4445 S King Drive Chicago, IL 60653

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government operations

Lucy Parsons Labs 5810 S Kenneth Chicago, IL 60629	81-3046769	501(c)(3)	20,000	0		General o
Cilicago, IL 00029						

43.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Lugenia Burns Hope Center

710 E 47th Chicago, IL 60653

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Metropolitan Tenants Org 36-3351193 501(c)(3) 40.000 IGeneral operations 1727 S Indiana Ave

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

83-1201956

Chicago, IL 60616

Mezcla Media Collective

3636 S Iron St Chicago, IL 60609

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government perations

Moms United Against Incar 601 S California Ave Chicago, IL 60612	81-0968030	501(c)(3)	18,000	0		General operations
Monroe Foundation	36-3787503	501(c)(3)	30,000	0		General operations

1547 South Wolf Road Hillside, IL 60162

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government NA II 11 10 1 53-0196617 501(c)(3) 25.000l IGeneral operations

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Mothers Opposed to Violence					
3147 W Douglas Blvd					
Chicago, IL 60623					
Nehemiah Group DBA Chi Eco					

6439 S Peoria Street Chicago, IL 60621

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Neighborhood Network Alliance 83-2383918 501(c)(3) 40.000 IGeneral operations 1818 E 71st Street Chicago, IL 60649

7.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Northwest Side CDC

5233 W Diversey Chicago, IL 60639

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Organized Com Against Deport	61-1403712	501(c)(3)	63,000	0		General op
4811 N Central Park Ave						
Chicago, IL 60625						
•						

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Parents 4 Teachers

4511 N Greenview Chicago, IL 60640

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Parole Illinois 83-0923481 501(c)(3) 8.0001 IGeneral operations 601 S California Ave

61.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60612
People for Com Recovery

13330 S Corliss Ave Chicago, IL 60827

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government People Matter 84-3863878 501(c)(3) 55.000l IGeneral operations 9609 S Wallace St Chicago, IL 60628

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

45-2550750

Peoples Lobby

1659 W Hubbard St Chicago, IL 60622

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Perceptions Theatre 6923 S Crandon Ave Chicago, IL 60649	84-3272459	501(c)(3)	8,000	0		General op
				, and the second		

Chicago, IL 60608

Pilsen Alliance 36-4486055 501(c)(3) 64.000 General operations 1744 W 18th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Diamond Davanthand of IN 0 I/V 25 0074276 E01/-1/21 10.000 General operations

35.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Planned Parenthood of IN & KY PO Box 397 Indianapolis, IN 46206	33-08/42/6	301(c)(3)	
Precious Blood Min Reconc	37-1447869	501(c)(3)	

PO Box 09379 Chicago, IL 60609

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government + Neiahborhood ject

2040 N Milwaukee Ave Chicago, IL 60647	034689 501(c)(3) 8,000 0	Prision - Arts Pro
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7.000

501(c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Race Concious Dialogues

633 Belleforte Avenue Oak Park, IL 60302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Raise Hands for IL Public Ed 45-4377181 501(c)(3) 85.000l IGeneral operations 1444 W Elmdale Ave Chicago, IL 60660 Rebellious Magazine for 501(c)(3) 8.558 General operations

Women 8 E Randolph St Chicago, IL 60601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Sister Survivor 84-1829978 501(c)(3) 13.000l IGeneral operations 4954 W Kamerling Chicago, IL 60651

48.490

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

SoapBox Prod & Organizing

40 E 9th St Apt 409 Chicago, IL 60605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government operations

Solidaridad Inquilina ARC C/O Solidaridad Inquilina Chicago, IL 60608	81-4004928	501(c)(3)	7,000	0		General operations
Solidarity Studios	20-2281095	501(c)(3)	11,000	0		General operations

3323 N Pulaski Chicago, IL 60641

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Southside Help Center 36-3532259 501(c)(3) 25.000l IGeneral operations 10420 S Halsted St Chicago, IL 60628

67.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Southside Together

602 E 61st Street Chicago, IL 60637

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Southsiders Organized SOUL 36-4174590 501(c)(3) 70.000l IGeneral operations 11211 S St Lawrence Chicago, IL 60628

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St Kateri Center of Chicago

3938 N Leavitt St Chicago, IL 60618

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Stick Talk 23-7022085 501(c)(3) 9.0001 IGeneral operations c/o BUILD INC

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60644

101 Royce Rd Ste 8 Bolingbrook, IL 60440

SW Sub Immigration Project

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

St Petersburg, FL 33617 Tenant Education Newtwork	84-4869932	501(c)(3)	13,000			General operations
SWOP-Chicago 2815 Edwards Ave S	26-2264638	501(c)(3)	8,000	U		General operations

4742 N St Louis Ave Chicago, IL 60625

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TGi Movement 83-0809594 501(c)(3) 29.000 IGeneral operations 6430 S Campbell Chicago, IL 60629

9.0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

The Center Intnl Performance

5555 N Sheridan Rd Chicago, IL 60640

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 83-1185132 501(c)(3) 10.000 The Co-op Ed Center IGeneral operations 2505 S Harding

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2505 S Harding Chicago, IL 60623

2505 S Harding Chicago, IL 60623

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government perations

The Every Voice Coalition	46-1323531	501(c)(3)	6,000	0		General ope
27 Lothrop Street						
Brighton, MA 02135						

7704 W 62nd Place Summit, IL 60501

The Warehouse Proj & Gallery 46-1705640 501(c)(3) 14.000 General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Transformative Justice Law Pr 81-2923111 501(c)(3) 31.704 IGeneral operations

203 LaSalle Suite 2100 Chicago, IL 60601

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1200 W Harrison St. Chicago, IL 60607

UIC Dissenters 36-4624060 501(c)(3) 7.000 General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government operations

Ujimaa Medics	501(c)(3)	25,000	0		General o
7914 S Honore					
Chicago, IL 60620					

280 Exmoor Ave Glen Ellyn, IL 60137

Unitarian Univ Prison Minist 82-1781424 501(c)(3) 6.000 General operations

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government United African Organization 01-0897461 501(c)(3) 20.000 IGeneral operations 4910 S King Drive

4910 S King Drive
Chicago, IL 60615

United Taxidrivers Comm 32-0235294 501(c)(3) 8,000 0

General operations
Counc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2040 N Milwaukee Ave 2nd Fl

Chicago, IL 60647

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government United Working Families 47-1539202 501(c)(3) 60.000 IGeneral operations 2229 S Halsted St Chicago, IL 60608

32,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

80-0390294

WAPB Inc

PO Box 5323 Chicago, IL 60680

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government

Women for Economic Justice	45-2218648	501(c)(3)	16,000	0		General operations
5205 S Harding Ave						
Chicago, IL 60623						

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Workers Cntr Racial Justice

2243 E 71st St Chicago, IL 60649

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government operations

Working Family Solidarity 1857 W 19th St Chicago, IL 60608	82-0652673	501(c)(3)	43,000	0		General operations
YEPP	36-2826825	501(c)(3)	23,000	0		General operations

835 W Addison St Chicago, IL 60613

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government

Yogi Care	47-3464400	501(c)(3)	11,000	0		General operations
1808 W Chicago Ave 2R						
Chicago, IL 60622						

12.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

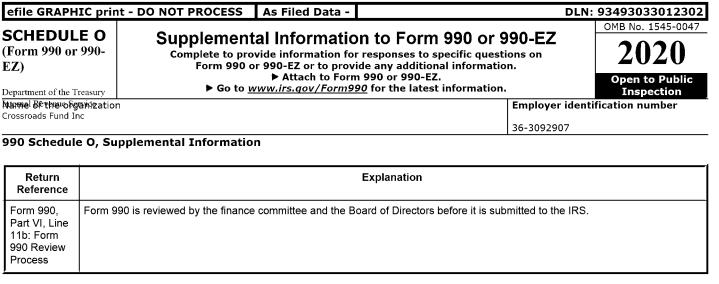
36-4223806

Youth Outlook

1828 Old Naperville Road Naperville, IL 60563

DLN: 93493033012302 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Crossroads Fund Inc 36-3092907 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 4,675 FMV 1 Art-Works of art . . Χ 22 Art-Historical treasures Art—Fractional interests Χ 1,160 FMV 4 Books and publications Clothing and household 3,581 FMV Χ goods . . . . . Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 226,621 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles . . . . 19 Food inventory . . 20 Drugs and medical supplies 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . 25 Other ▶ ( Gift certif. ) Χ 35 3,824 FMV Other ▶ ( Event tickets ) 26 Χ 2 756 FMV Х 1,661 FMV 27 Other ► (Experiences) 28 Other ▶ ( \_\_\_\_\_ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2020) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Page 2 Schedule M (Form 990) (2020) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation Schedule M (Form 990) (2020)



D - 4....

of Conflicts

Reference	Explanation
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement	The conflict of interest policy applies to Crossroads' board members, staff, committee mem bers and managers. All such individuals are required to acknowledge, not less than annuall y, that he or she has read and is in compliance with this policy.

Evalenation

Return Reference	Explanation
Form 990, Part VI, Line 15a: Compensation Review & Approval Process - CEO, Top Management	The Executive Director's salary is set by the Board of Directors.

Return Reference	Explanation
Form 990, Part VI, Line 18: Explanation of Other Means Forms Available For Public Inspection	A complete copy of form 990 and the audit report is posted on the web-site of the Illinois Attorney General, which open to the general public.

Return

Reference	
Form 990, Part VI, Line 19: Other Organization Documents Publicly	Disclosure of policies and the annual audit report is made available to the general public on the Organization's web-site.
Available	

Explanation

# 990 Schedule O, Supplemental Information Return Explanation

Process

Reference	
Form 990,	The audit report and form 990 is reviewed by the finance committee and the Board. After th
Part XII, Line	e review the Board votes to approve form 990. Upon the Board's approval form 990 is submit
2: Change of	ted.
Oversight or	
Selection	