Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

A F	or the	lpha 2012 calendar year, or tax year beginning $$ JUN $$ $$ 1 $$ $$ $$ 2 $$ $$ 1 $$ $$ and end	ling M	AY 31, 2013	
B	Check if applicable	C Name of organization		D Employer identific	cation number
	Addre	THE JUNIOR LEAGUE OF CHICAGO, INC.			
	Name change			36-2	195474
	Initial return		m/suite	E Telephone number	
	Termir ated	1417 N. ADION DI.		(312	
L	Ameno	Uity, town, or post office, state, and ZIP code		G Gross receipts \$	1,234,257.
L	Applic tion pendir	e CHICAGO, IL 60610		H(a) Is this a group re	
	,	F Name and address of principal officer: MICHELLE MILLER BORN	5	for affiliates?	Yes X No
		SAME AS C ABOVE	7,507	H(b) Are all affiliates inc	
		empt status: X 501(c)(3) 501(c)() ((insert no.) 4947(a)(1) or ce: ► WWW.JLCHICAGO.ORG	527	H(c) Group exemptio	list. (see instructions)
-		organization: X Corporation	I Voor		1 State of legal domicile: IL
	int I	Summary	L 1001	0/ 10/11/acion 10	· Otato or logar dorillono. ===
		Briefly describe the organization's mission or most significant activities: COMMUN	ITY	IMPROVEMENT	
ည	'	briefly describe the organization a mission of most significant dotterios.			
Activities & Governance	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed	of more	than 25% of its net as	ssets.
o Ve	L	Number of voting members of the governing body (Part VI, line 1a)			14
Ğ	i .	Number of independent voting members of the governing body (Part VI, line 1b)		į :	14
sa Sa	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	9
Ϋ́	6	Total number of volunteers (estimate if necessary)		6	1200
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		245,267.	558,719.
Revenue	9	Program service revenue (Part VIII, line 2g)		321,159.	340,808.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		33,085.	23,569.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<u><72,179.</u>	
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		527,332.	911,074.
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	I	0. 0.	0.
	l	Benefits paid to or for members (Part IX, column (A), line 4)	- 1	270,596.	260,438.
Ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)	1	270,390.	200,430.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Εχ		Total fundraising expenses (Part IX, column (D), line 25) 93,318		344,738.	468,070.
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		615,334.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		<88,002.	
es	19	Revenue less expenses. Subtract line 18 from line 12	Re	ginning of Current Year	End of Year
ets (anci	20	Total assets (Part X, line 16)	50	2,032,866.	2,049,818.
Ass. Bal		Total assets (Part X, line 16) Total liabilities (Part X, line 26)		435,028.	239,431.
Net Assets or Fund Balances		Net assets or fund balances. Subtract line 21 from line 20		1,597,838.	1,810,387.
		Signature Block			<u> </u>
		ties of perjury, I declare that I have examined this return, including accompanying schedules an	nd statem	ents, and to the best of m	y knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which			
Sigr	1	Signature of officer		Date	
Her	e	MICHELLE MILLER BURNS, PRESIDENT			
		Type or print name and title	Τ.	D.1. F	TI DIN
	T	Print/Type preparer's name Preparer's signature		Date Check L	PTIN
Paid	1	ROSE DOHERTY ROSE DOHERTY		13/14 self-employ	
	ŀ	Firm's name LEGACY PROFESSIONALS LLP		Firm's EIN	32-0043599
Use	Only	Firm's address 311 S. WACKER DRIVE, STE. 4000		ļ., a	12 260 0500
		CHICAGO, IL 60606		Phone no. 3	12-368-0500 X Yes No
May	tha IE	19 discuss this return with the preparer shown above? (see instructions)			X Yes No

Form **8868**

(Rev. January 2013) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			\mathbf{X}
 If you a 	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form).		
Do not co	mplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.	
	c filing (e-file) . You can electronically file Form 8868 if y					
required t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	868 to request an	extension
	file any of the forms listed in Part I or Part II with the ex	•	-			
Personal	Benefit Contracts, which must be sent to the IRS in pap	oer format	(see instructions). For more details	on the elec	ctronic filing of this	s form,
CONTRACTOR CONTRACTOR	irs.gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	e، Only s	submit original (no copies nee	eded).		
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I only	***************************************					▶
	orporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	it an exter	sion of time	
to file inco	me tax returns.	····				·-··
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification nur	nber (EIN) or
print						
File by the	THE JUNIOR LEAGUE OF CHICAG	GO, II	NC.		36-21954	74
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SS	SN)
filing your return. See	1447 N. ASTOR ST.					
nstructions.	City, town or post office, state, and ZIP code. For a fo	oreign add	lress, see instructions.			
	CHICAGO, IL 60610					
Enter the I	Return code for the return that this application is for (file	a separa	te application for each return)			0 1
Application			Application			Return
s For			Is For			Code
orm 990	or Form 990-EZ	01	Form 990-T (corporation)		-	07
orm 990-	BL	02	Form 1041-A			08
orm 4720	(individual)	03	Form 4720			09
orm 990-		04	Form 5227	······································	······································	10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
	MARY ANN LILLI	 	1 0.111 0010			<u> </u>
The bo	oks are in the care of 1447 N ASTOR S T		ICAGO, IL - 60610			,
	one No. ► (312) 664-4462		FAX No. ▶		· · · · · · · · · · · · · · · · · · ·	
	ganization does not have an office or place of business	s in the Lin				—
	for a Group Return, enter the organization's four digit					check this
oox 🕨 🗀	. If it is for part of the group, check this box					
	uest an automatic 3-month (6 months for a corporation				ers the extension	15 101.
	JANUARY 15, 2014 , to file the exempt	t organiza:	tion return for the organization name	ad ahova	The extension	
is for	the organization's return for:	t Organiza	don rotant for the organization riams	ou abovo.	THO CALORISION	
▶	calendar year or					
	tax year beginning JUN 1, 2012	an	d ending MAY 31, 2013			
-	tax your boginning	, an	defiding 1212 027 2020		•	
2 If the	tax year entered in line 1 is for less than 12 months, cl	haale raaa	on: Initial return	Final retur	n	
2. 11 1110	Change in accounting period	Heck reas	on muarretum	rınaı retur	[]	
	Change in accounting period					
3a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6060	ntor the tentative tay less any	1		
	s application is for Form 990-BL, 990-PF, 990-1, 4720, 6 efundable credits. See instructions.	אסטט וע, el	nter the teritative tax, less any	ا م	.	0.
			vafi vadabla avadite	3a	\$	· ·
	s application is for Form 990-PF, 990-T, 4720, or 6069,	-		ا ۾ ا	_	Λ
estimated tax payments made. Include any prior year overp				3b	\$	0.
	nce due. Subtract line 3b from line 3a. Include your pa		-			Λ
	sing EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
aution. If	you are going to make an electronic fund withdrawal w	vith this Fo	orm 8868, see Form 8453-EO and Fo	orm 8879-	<u>LO for payment in</u>	structions.

223841 01-21-13

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2013)

232002 12-10-12

Form **990** (2012)

including grants of \$

337.956.

Total program service expenses

) (Revenue \$

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	٦		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	х	
	Schedule D, Parts XI and XII	12a	Λ	
D	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			37
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		***	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		_	$\alpha \alpha \alpha$	

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
270	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 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) 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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		Х
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Λ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	04		Х
250	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSa		21
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25h		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	01		
55	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form **990** (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Section Sect		Check if Schedule O contains a response to any question in this Part V							
b Enter the number of Forms W2G included in line 1s. Enter o'. If not applicable 10 10 10 10 10 10 10 1						Yes	No		
b Enter the number of Forms W2G included in line 1a. Enter o I/I not applicable OI bit the organization comply with backup withholding rules for reportable payment to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 3b If at least one is reported on line 2a, did the organization fall enquired federal employment tax returns? 3c Did the organization have unrelated business gross income of \$1,000 or more during the year? 3c Did the organization have unrelated business gross income of \$1,000 or more during the year? 3c Did the organization have unrelated business gross income of \$1,000 or more during the year? 3c Did the organization have unrelated business gross income of \$1,000 or more during the year? 3d Did any transmitted a form \$900 for the year? If Yeo, Provide an explanation in Schedule 0 3d Did any transmitted or provided the organization that was an interest it, or a signature or other authority over, a financial account or fourth financial account. 3d Did any transmitted places are also account, or define financial account? 4d Did any transmitted places are accounted by the financial accounts. 5d Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5d Did any transmitted places are accounted by a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax and promise account or other financial accounts. 5d Was the organization appropriation file Form 8888.71 5d Did any transmitted form accounter flore was of a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to a prohibited tax was or is a party to ac	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0					
describingly winnings to prize winners? a 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 by I at least one is reported on line 2a, did the organization line all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-fife (see instructions) by II "Yes," sail is tilled a Form 990 To for this year? II "Yes," provide an explanation in Schedule O by II "Yes," and it lifed a Form 990 To fro this year? II "Yes," provide an explanation in Schedule O by II "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account? see instructions for filing requirements for Form 15 09 221, Report of Foreign Bank and Financial Accounts. by II "Yes," and the search 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? by II "Yes," and the report of the re	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
2a Enter the number of employees reported on Form W.S. Transmittal of Wage and Tax Statements, fled for the caendary year ending with or within the year covered by this return 1 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3 b. If the canadral year ending with or within the year overed by this return 3 b. If the seminarization have unrelated business gross income of \$1,000 or more during the year? 3 a. X. X. The seminarization have unrelated business gross income of \$1,000 or more during the year? 4 a. At any time during the calendary 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, sortine interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sortine interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sortine interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sortine interest). 5 a. Was the organization and a party to a prohibited tax shelter transaction. 5 b. If Yes, it is line 5 and 55, did the organization file Form 8898-17 6 b. Old any taxable party notify the organization file Form 8898-17 6 c. If Yes, it is line 5 and 55, did the organization file Form 8898-17 6 b. If Yes, it is did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 b. If Yes, it is did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 c. X. X. If Yes, it is the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible. 8 b. If Yes, it is the accompanization include with every solicitation and express transmit and solicitation in express tr	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming					
field for the calendar year ending with or within the year covered by this return State S		(gambling) winnings to prize winners?			1c				
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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b if Yes, *has it filed a Form 900-Tro this year? If *No*, *provide an explanation in Schedule O 3b A At any time during the calandar 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 accountly? 4a A Early time the manned the foreign country \(\binom{\times}{\times}\) 5b If Yes, *inter the name of the foreign country \(\binom{\times}{\times}\) 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization in a party to a prohibited tax shelter transaction at any time during the tax year? 5c Wes, *to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Was promised to the organization and it was or is a party to a prohibited tax shelter transaction? 5c Was promised to the organization and it was or is a party to a prohibited tax shelter transaction? 5c Was the organization solicit any contributions? 6d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that many receive deductible contributions under section 170(c). 8d Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9d Did the organization receive a payment in excess of \$75 made party as a contribution of 170(c). 9d If Yes, *include on finalization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9d Organization receive any funds,	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		_					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return	2a	9					
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make any taxable distributions under section 4966? 9 a Did the organization make any taxable distributions under section 4966? 9 a Did the organization make any taxable distributions under section 4966? 9 a Did the organization make any taxable distributions under section 4966? 9 a Did the organization make any taxable distributions under section 4966? 9 a Did the organization senter. 10 a Did the organization senter. 11 a Did	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			13c				v		
						\vdash			
	b	if thes, that it filed a Form 720 to report these payments? If two, provide an explanation in Schedule	₹U			990	(2012)		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a				
•	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	х	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	and Dir one of the cost of the member about persons of the member and costs,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	The state of the s	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.5		
·	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	,		•
17	List the states with which a copy of this Form 990 is required to be filed ▶IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le	
-	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d finar	ncial	
	statements available to the public during the tax year.		•	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•	
	MARY ANN LILLIE - (312) 664-4462			

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ASTOR ST.

CHICAGO,

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	(do not c box, unle officer an		neck i	ition more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MERCEDES VEGA ADVISORY COUNCIL LIAISON	1.00	x						0.	0.	0.
(2) MAGEN HANRAHAN DOUGHTIE	1.00	Δ						0.	0.	
CURRENT ISSUES DIRECTOR	1.00	х						0.	0.	0.
(3) SUSAN SANTORO	1.00									
CURRENT ISSUES DIRECTOR		х						0.	0.	0.
(4) KIM BELTON	1.00									
CURRENT ISSUES DIRECTOR		Х						0.	0.	0.
(5) ADRIENNE CHAN	1.00									
CURRENT ISSUES DIRECTOR		Х						0.	0.	0.
(6) APRIL BROOKS	1.00									
DIVERSIFICATION DIRECTOR	1 00	Х						0.	0.	0.
(7) CATHERINE PESEK BIRD	1.00								0	0
EXTERNAL ADVOCACY DIRECTOR	1 00	Х						0.	0.	0.
(8) ELIZABETH J. VASTINE	1.00	x						0.	0.	0
FUNDRAISING DIRECTOR (9) JILL M. HUTCHINSON	1.00	Δ					_	0.	0.	0.
(9) JILL M. HUTCHINSON STRATEGIC PLANNING DIRECTOR	1.00	x						0.	0.	0.
(10) LAURA BETH WOLFE	1.00	^						0.	0.	
PARLIAMENTARIAN	1.00	Х						0.	0.	0.
(11) JESSICA EBERSBERGER	1.00	23							<u> </u>	
MEMBER-AT-LARGE		х						0.	0.	0.
(12) MARY ANN LILLIE	40.00							-		
OPERATIONS DIRECTOR				Х				7,212.	0.	1,322.
(13) KATHLEEN LANGDON	40.00									
EXECUTIVE DIRECTOR - PAST				Х				33,077.	0.	0.
(14) RUTH GALLAGHER NELSON	40.00									
INTERIM EXECUTIVE DIRECTOR - PAST				X				42,574.	0.	0.
(15) MICHELLE MILLER BURNS	12.00							_	_	_
PRESIDENT	45.00			Х				0.	0.	0.
(16) JENNIFER KING	15.00								_	_
EXECUTIVE VICE PRESIDENT	2 00			Х				0.	0.	0.
(17) JULIA LISSNER	2.00			.					_	0
RECORDING SECRETARY				X				0.	0.	0.

232007 12-10-12

Form **990** (2012)

Part VII Section A. Officers, Directors, Tru (A)	(B)	Picy		, and		9110	J. C	(D)	(E)			(F)	
Name and title	Average			Pos	ition	1		Reportable	(E) Reportable		₌	ור) timate	hd
Name and title	hours per		not c	heck	more	than is bot		compensation	compensation			nount	
	week					or/trus		from	from related			other	01
	(list any	ctor						the	organization			pensa	tion
	hours for	or director				pa		organization	(W-2/1099-MIS			om the	
	related	tee o	ustee			ensat		(W-2/1099-MISC)			org	anizati	ion
	organizations	al trus	nal tr		oyee	omp					and	d relate	ed
	below	Individual trustee	Institutional trustee	Officer	employee	Highest compensated employee	Former				orga	anizatio	ons
(10) PUMY DISPENSIVE	line)	pul	ınsı	0#!	Key	Hig en	Fo						
(18) RUTH FIORENTINO	2.00	ł		Х				0.		0.			0.
TREASURER				Δ				0.		0.			0.
		ł											
							┢						
		ł											
		1											
		1											
						Ļ		02 062		_		1 2	2.2
1b Sub-total								82,863.		0.		1,3	
c Total from continuation sheets to Part V								0.		0.	1,322.		
d Total (add lines 1b and 1c)								82,863.		_		Ι, Σ	44.
2 Total number of individuals (including but	not limited to tr	ose	liste	ed al	bove	e) wr	no r	eceived more than \$100	0,000 of reportab	le			(
compensation from the organization												Yes	No
3 Did the organization list any former officer	director or tru	ıcto	o ko	or	mala		٥٢	highest compensated o	mplovos on			100	140
line 1a? If "Yes," complete Schedule J for											3		Х
4 For any individual listed on line 1a, is the s								her compensation from					
and related organizations greater than \$15									the organization		4		Х
5 Did any person listed on line 1a receive or									idual for services				
rendered to the organization? If "Yes," cor	•				•			•			5		Х
Section B. Independent Contractors	,												
1 Complete this table for your five highest co	ompensated in	depe	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of con	npens	ation f	rom	
the organization. Report compensation for	the calendar y	ear (endi	ng v	vith	or w	ithir	n the organization's tax	year.				
(A)								(B)			(0		
Name and business	s address	NC	INC	3				Description of s	ervices	C	compe	nsatio	n
							_						
							\dashv						
							\dashv						
							\dashv						
2 Total number of independent contractors	(including but n	ot li	mite	d to	tho	جو اند	l	d ahove) who received n	ore than				
\$100,000 of compensation from the organ	. •	iot III		u 10		5e 113)	الحال	a above, who received h	iore triair				
ψ100,000 of compensation from the organ											Form	000	2040

Pa	IL VII			to any guartien i	n this Dort VIII			
		Check if Schedule O con	tains a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, gransimilar amounts not included about Noncash contributions included in lines Total. Add lines 1a-1f MEMBERSHIP DUES EDUCATION AND	tions) ti	Business Code 900099 900099	558,719. 322,491. 18,317.	322,491. 18,317.		
	g	Total. Add lines 2a-2f			340,808.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties	oroceeds	14,340.			14,340.	
	b c	Gross rents Less: rental expenses Rental income or (loss)		(ii) Personal				
		Net rental income or (loss) .						
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	9,229.		0.000			2 222
	d	Net gain or (loss)		····· •	9,229.			9,229.
Other Revenue		Gross income from fundraisir including \$ 450,3 contributions reported on line Part IV, line 18 Less: direct expenses	398 • of e 1c). See	166,032. 192,546.				
J		Net income or (loss) from fund	•	>	<26,514.	>		<26,514.
	b	Gross income from gaming and Part IV, line 19 Less: direct expenses	a					
	10 a	Net income or (loss) from gan Gross sales of inventory, less and allowances Less: cost of goods sold	returns a	1 000				
		Net income or (loss) from sale			4,437.	4,437.		
	11 a b	Miscellaneous Revenu MISCELLANEOUS		Business Code 900099	10,055.			10,055.
	c d	All other revenue						
		Total. Add lines 11a-11d			10,055.	245 245	^	7 110
	12	Total revenue. See instructions.			911.074.	345,245.	0.	/ , <u>T</u> T U •

Part IX | Statement of Functional Expenses

Pa	Part IX Statement of Functional Expenses									
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A).						
	Check if Schedule O contains a respon									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the United States. See Part IV, line 21									
2	Grants and other assistance to individuals in the United States. See Part IV, line 22									
3	Grants and other assistance to governments,									
3	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
3	trustees, and key employees	83,883.	13,995.	55,523.	14,365.					
6	Compensation not included above, to disqualified	00,0001	20,000	33,3231						
Ū	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	139,891.	23,337.	92,596.	23,958.					
8	Pension plan accruals and contributions (include			2 = , 3 3 3 4						
3	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	21,823.	3,641.	14,445.	3,737.					
10	Payroll taxes	14,841.	2,476.	9,823.	3,737. 2,542.					
11	Fees for services (non-employees):		= 7 = 7 = 7	2,020						
	Management									
	Legal	11,493.		8,620.	2.873.					
	Accounting	30,054.		22,540.	2,873. 7,514.					
	Lobbying	00,000			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
۰ م	Professional fundraising services. See Part IV, line 17									
f	Investment management fees	4,067.	2,552.	758.	757.					
g g	(If I'm - 4.4 m - m - m - 1 - 4.00/ f I'm - 0.5	= 7 0 0 1 1								
9	column (A) amount, list line 11g expenses on Sch O.)									
12	Advertising and promotion									
13	Office expenses	15,878.	4,770.	7,726.	3,382.					
14	Information technology	15,266.	10,611.	1,696.	2,959.					
15	Royalties	,	,	,	·					
16	Occupancy	49,734.	20,378.	15,819.	13,537.					
17	Travel	-			·					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	11,952.	8,816.	1,953.	1,183.					
20	Interest									
21	Payments to affiliates	74,097.	37,049.	37,048.						
22	Depreciation, depletion, and amortization	12,067.	4,827.	5,430.	1,810.					
23	Insurance	28,500.	11,400.	12,825.	4,275.					
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 0.)									
а	COMMUNITY PROGRAMS	157,089.	157,089.							
b	MISCELLANEOUS	42,934.	26,937.	8,008.	7,989.					
C	TOPICS NEWSLETTER	13,033.	8,172.	2,424.	2,437.					
d	EDUCATION AND TRAINING	1,906.	1,906.	_,	_,					
	All other expenses	= , , , , ,	_,,,,,,							
25	Total functional expenses. Add lines 1 through 24e	728,508.	337,956.	297,234.	93,318.					
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)									
02001	n 12-10-12				Form 990 (2012)					

Part X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	843,775.		820,994
2	Savings and temporary cash investments	400,909.		400,909
3	Pledges and grants receivable, net	120.		
4	Accounts receivable, net		4	792
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined und			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribut	ing		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets 8 8	Notes and loans receivable, net		7	
8 8	Inventories for sale or use	56,393.		50,573
9	Prepaid expenses and deferred charges	1 22 971	9	21,004
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 526, 23	6.		
b	Less: accumulated depreciation 10b 370,15			156,078
11	Investments - publicly traded securities	549,345.	11	599,468
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		16	2,049,818
17	Accounts payable and accrued expenses	22 211	17	20,963
18	Grants payable		18	
19	Deferred revenue		19	218,468
20	Tax-exempt bond liabilities		20	
ဖ္က 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
≝ 22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities 22	key employees, highest compensated employees, and disqualified persons.			
=	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	435,028.	26	239,431
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X an	d		
S S	complete lines 27 through 29, and lines 33 and 34.			
Ž 27	Unrestricted net assets	1,577,838.	27	1,790,387
<u>ස</u> 28	Temporarily restricted net assets		28	
<u>2</u> 9	Permanently restricted net assets	20,000.	29	20,000
호	Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances 27 28 29 30 31 32 32 32 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	and complete lines 30 through 34.			
ह्य 30	Capital stock or trust principal, or current funds		30	
Š 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ਚ ਹ	Retained earnings, endowment, accumulated income, or other funds		32	
ž 33	Total net assets or fund balances	1,597,838.	33	1,810,387
34	Total liabilities and net assets/fund balances		34	2,049,818

Form **990** (2012)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			74.
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,5	
3	Revenue less expenses. Subtract line 2 from line 1	3			66.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,59		
5	Net unrealized gains (losses) on investments	5	2	9,9	83.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,81	0,3	87.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Lash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2012)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF CHICAGO, INC.

Employer identification number 36-2195474

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	:.) See inst	tructions.				
The orgar	nization is not a	a private foundation	because it is: (For lines 1	1 through ⁻	11, check	only one b	ox.)					
1 🖳	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
з 🔲	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nan	ne.
. —	city, and stat		,						•			,
5	•		benefit of a college or ur	niversity ov	wned or or	nerated by	a governi	mental uni	t describ	ned in		
5	-	(b)(1)(A)(iv). (Comple	-	iivoroity o	whod or of	ociated by	a governi	mornar am	t deserie	JCG 111		
<u>،</u> ا			,	k alamanda a		470(1-)(4	IVAV. A					
6	•	,	ent or governmental unit									
7 📖	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
	-	b)(1)(A)(vi). (Comple	•									
8 🖳			ection 170(b)(1)(A)(vi).									
9 X	An organizati	ion that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	and gross re	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	in excepti	ons, and (2) no more	than 33 1	1/3% of its	support	t from gross	invest	tment
	income and ι	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 3	30, 197	⁷ 5.
	See section	509(a)(2). (Complete	e Part III.)									
10	An organizati	ion organized and or	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	1).				
11 🔲			perated exclusively for th						v out the	e purposes o	of one	or
	Ü		ations described in section		· •		· · · · · · · · ·		,			
			organization and comple				.,. 555 551		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	a Type I			ype III - Fu	-		,	д 🔲 тур	e III - No	n-functional	lv inte	arated
е 🔲	,,	•	t the organization is not		-	-					•	_
e												uı
		•	han one or more publicly		•				9(a)(1) or	section 508	$\eta(a)(2)$.	
f			ten determination from t	the IRS tha	atitisa Ty	pe I, Type	II, or Type	e III				
		rganization, check th										
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontributior	n from any	of the foll	owing pers	sons?			
	(i) A person	n who directly or ind	irectly controls, either al-	one or tog	ether with	persons of	lescribed	in (ii) and (iii) below	/,	Yes	No
	the gove	erning body of the su	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		
h			about the supported or									•
		3	,		()							
. ,	e of supported anization	(ii) EIN	(described on lines 1-9	(iv) Is the o in col. (i) lis governing	sted in your	organizat	ion in col.	(vi) Is organizatio (i) organiz U.S	ed in the	(vii) Amoun sup	t of moi port	netary
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
				 		.55	- 110		'''			
Total												

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-1

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

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

Sed	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	, ,	, ,	, ,			,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	,	, , ,	, ,			, , , , , , , , , , , , , , , , , , ,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instruct	ions)	•	•	12	
	First five years. If the Form 990 is for					on 501(c)(3)	
	organization, check this box and stop	-			•		
Sec	ction C. Computation of Publ						·
14	Public support percentage for 2012 (I	ine 6, column (f) c	livided by line 11,	column (f))		14	%
15	Public support percentage from 2011	Schedule A, Part	: II, line 14			15	%
16a	33 1/3% support test - 2012. If the o	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	more, check this b	oox and
	stop here. The organization qualifies	as a publicly supp	oorted organizatio	n			▶□
b	33 1/3% support test - 2011. If the o						
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ts-and-circumstar	nces" test, check t	his box and stop	here. Explain in Pa	rt IV how the orga	anization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	ed organization		
b	10% -facts-and-circumstances tes	t - 2011. If the org	ganization did not	check a box on lin	ne 13, 16a, 16b, or	17a, and line 15 i	s 10% or
	more, and if the organization meets the	ne "facts-and-circu	umstances" test, c	heck this box and	l stop here. Explair	n in Part IV how th	ne
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publ	licly supported org	anization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box	and see instructio	ns ▶□
	·	-					00 ou 000 EZ) 0040

Schedule A (Form 990 or 990-EZ) 2012

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	ciow, picace corri	noto i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	, ,	, ,	ì	, ,	, ,	
	membership fees received. (Do not						
	include any "unusual grants.")	468,073.	676,974.	607,370.	597,777.	881,209.	3231403.
2	Gross receipts from admissions,	-	-	-	-	-	
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	379,442.	234,033.	256,599.	268,119.	193,075.	1331268.
3	Gross receipts from activities that		,	,	,	, ,	
·	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
7	ization'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	847,515.	911,007.	863,969.	865,896.	1074284.	4562671.
	Total. Add lines 1 through 5	047,313.	911,007.	003,303.	005,050.	10/4204.	4502071.
7a	Amounts included on lines 1, 2, and						0
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						0
	amount on line 13 for the year						0.
	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)						4562671.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010 863, 969.	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	847,515.	911,007.	863,969.	865,896.	1074284.	4562671.
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	16 220	40 554	10 000	05 004	14 240	0.4.400
	and income from similar sources	16,330.	18,751.	19,062.	25,924.	14,340.	94,407.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	16,330.	18,751.	19,062.	25,924.	14,340.	94,407.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on	2,065.	3,060.	764.			5,889.
12	Other income. Do not include gain						_
	or loss from the sale of capital assets (Explain in Part IV.)	43,154.	19,578.	22,327.	9,685.	10,055.	104,799.
13	Total support. (Add lines 9, 10c, 11, and 12.)	909,064.	952,396.	906,122.	901,505.	1098679.	4767766.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2012 (I	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	95.70 %
	Public support percentage from 2011					16	94.90 %
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	12 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	<u>1.98 %</u>
18	Investment income percentage from 2	2011 Schedule A,	Part III, line 17			18	2.66 %
19a	33 1/3% support tests - 2012. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box as	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	►X
b	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	▶□
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	>

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Name of the organization

Employer identification number

36-2195474 THE JUNIOR LEAGUE OF CHICAGO, INC. Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE JUNIOR LEAGUE OF CHICAGO, INC.

36-2195474

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1	CAROL HASTINGS 1242 N. LAKE SHORE DR. UNIT 19 CHICAGO, IL 60610	\$ 25,000. Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2	RIVER CITY FOUNDATION 3860 RECOTR, N.E. ROCKFORD , MI 49341	\$ 13,000. Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3	NORTHERN TRUST BANK 50 S. LASALLE ST., B-2 CHICAGO, IL 60603	\$ 20,000. Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4	CAROLINE HUEBNER 2127 N. HUDSON AVENUE CHICAGO, IL 60614	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	ANN GRUBE 208 E. SIXTH STREET HINSDALE, IL 60521	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6	EXELON CORP 10 SOUTH DEARBORN ST. CHICAGO, IL 60603	\$ 15,000. Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE JUNIOR LEAGUE OF CHICAGO, INC.

36-2195474

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
7	JP MORGAN CHASE AND CO. 10 SOUTH DEARBORN 16TH FLOOR CHICAGO, IL 60603	\$25,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
8	CIMAGLIA PRODUCTIONS, INC. P.O. BOX 272362 BOCA RATON, FL 33427	\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)					

Name of organization **Employer identification number**

THE JUNIOR LEAGUE OF CHICAGO, INC.

36-2195474

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	GALA VIDEO	_	
			07/16/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
223453 12-2	1-12		90, 990-EZ, or 990-PF) (2012)

Name of organization Employer identification number THE JUNIOR LEAGUE OF CHICAGO INC. 36-2195474 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF CHICAGO, INC.

Employer identification number 36-2195474

Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	3.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	iting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or o		
Pai			
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or edu	ucation) Preservation of an his	torically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	-		0
С	Number of conservation easements on a certified historic struc	ture included in (a)	2c
d	Number of conservation easements included in (c) acquired aff	ter 8/17/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ment is located >	
5	Does the organization have a written policy regarding the perio	dic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it h	olds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ar	nd enforcing conservation easements d	uring the year
7	Amount of expenses incurred in monitoring, inspecting, and en	forcing conservation easements during	the year > \$
8	Does each conservation easement reported on line $2(d)$ above	-	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	the organization's accounting for
Da	conservation easements.	Aut Historical Transcruss au O	they Cimiley Accets
Pai	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" to Form 99		
та	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib	,	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		
D	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		•
	(i) Revenues included in Form 990, Part VIII, line 1		
^	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		ıı gaın, provide
_	the following amounts required to be reported under SFAS 116	-	• •
a	Revenues included in Form 990, Part VIII, line 1		
D	Assets included in Form 990, Part X		• • •

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

Schedule D (Form 990) 2012

		IOR LEAGUE								Page 2
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a sig	gnificant us	se of its	collection	items
	(check all that apply):									
а	Public exhibition	d		Loan or excl						
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how t	hey further th	ne organizat	ion's exen	npt purpos	e in Par	XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er similar	assets		_	
	to be sold to raise funds rather than to be ma								Yes	<u> </u>
Paı	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" to F	orm 990, I	Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other as	ssets not i	ncluded	_	_	
	on Form 990, Part X?							L	Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII									
									Amount	
С	Beginning balance						1c			
	Additions during the year									
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					L	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanati	on has been	provided in	Part XIII				
Paı	t V Endowment Funds. Complete i	f the organization ar	swered	l "Yes" to Fo	rm 990, Part	IV, line 10).			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (d) Three yea	ars back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	1g, column (a	i)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c shou									
3а	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	nd administe	ered for th	e organiza	tion	_	
	by:								<u>\</u>	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	ient. See Form 990), Part X	(, line 10.						
	Description of property	(a) Cost or o		(b) Cost			cumulated		(d) Book	value
		basis (investr	nent)	basis	,	dep	reciation			
1a	Land				0,000.		000=			,000.
	Buildings			32	6,957.	2	02,35	4.	124	,603.
	Leasehold improvements						<u> </u>			
d	Equipment			17	9,279.	1	67,80	4 •	11	,475.
_										

156,078. Schedule D (Form 990) 2012

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

	VII Investments - Other Securities. See				
(a) De	scription of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market value	,
(1) Fina	ancial derivatives				
	sely-held equity interests				
(3) Oth	ner				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(I)	15 000 B 1 V 1 (B) V 10 N				
Iotal. (C	Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part	VIII Investments - Program Related. Se (a) Description of investment type	ee Form 990, Part X, line (b) Book value		aluation. Cost or and of year market value	
	(a) Description of investment type	(b) Book value	(c) Method of Va	aluation: Cost or end-of-year market value	<u>;</u>
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8) (9)					
(10)					
	Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part		15			
1 0.11		Description		(b) Book value	
(1)	· · ·				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		>	
Part	, ,	ine 25.			
1	(a) Description of liability		(b) Book value		
(1)	Federal income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII .

Schedule D (Form 990) 2012

(11)

4b

<196,834.> 4c 911,074. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 925,342. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990. Part IX. line 25: a Donated services and use of facilities Prior year adjustments 2b c Other losses 2c 196,834. 2d Other (Describe in Part XIII.) 196,834. Add lines 2a through 2d 2e 728,508. Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) 4c Total expenses, Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.)

Part XIII Supplemental Information

Other (Describe in Part XIII.)

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

Complete this part to 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.

PART X, LINE 2: THE LEAGUE IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED

IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND IS EXEMPT FROM FEDERAL INCOME TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE CODE. IN ADDITION, THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE LEAGUE IS NOT A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) OF THE CODE. ADVERTISING INCOME EARNED MAY SUBJECT THE LEAGUE TO UNRELATED BUSINESS INCOME TAX. FOR THE YEARS ENDED MAY 31, 2013 AND 2012, NO TAX LIABILITY WAS ACCRUED AS THE RESULT OF THIS INCOME.

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)	
THE LEAGUE FILES FORM 990, RETURN OF ORGANIZATION EXEMPT FROM	INCOME TAX,
THE LEAGUE'S RETURN IS SUBJECT TO EXAMINATION BY THE INTERNAL	REVENUE
SERVICE UNTIL THE APPLICABLE STATUTE OF LIMITATIONS EXPIRES.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
SPECIAL EVENTS EXPENSE	-192,546.
COOKBOOK EXPENSE	-4,288.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-196,834.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS EXPENSE	192,546.
COOKBOOK EXPENSE	4,288.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	196,834.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open To Public Inspection

Name of the organization	TOD I EXCIIE OF CUTC	77.00	_	NC		Employer ide 36-2195	ntification number 4ワ4
Francisco Astiritica	IOR LEAGUE OF CHIC - Complete if the organization answer				ine 1		
Part I required to complete this par	t.	cica ic	.5 10	r omi 330, i art iv, i		7. 1 OIIII 330 LZ	mers are not
 Indicate whether the organization rais Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, P If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicitar f Solicitar g Special or oral agreement with any individual cart VII) or entity in connection with prividuals or entities (fundraisers) purs	tion of n tion of g I fundrais I (includi professio	on-g over sing ng o onal f	overnment grants nment grants events fficers, directors, true fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) D fundrai have cus or contri contributi	stody ol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
otal			•				
List all states in which the organization or licensing.			itions	s or has been notified	d it is	exempt from re	egistration
_HA Paperwork Reduction Act Notice,	see the Instructions for Form 990	or 990-	EZ.			Schedule G (Forr	n 990 or 990-EZ) 201:

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		or furidialsing event contributions and gr				residential 40,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			CENTENNIAL	SUMMER		(add col. (a) through
			GALA	SOIREE	5	col. (c))
മ			(event type)	(event type)	(total number)	001. (0)
'n						
Revenue	1	Gross receipts	395,547.	62,315.	158,568.	616,430.
ш						
	2	Less: Contributions	334,512.	36,875.	79,011.	450,398.
	3	Gross income (line 1 minus line 2)	61,035.	25,440.	79,557.	166,032.
		· · · · · · · · · · · · · · · · · · ·				
	4	Cash prizes				
	5	Noncash prizes				
ses						
ens	6	Rent/facility costs	34,664.	12,159.	20,221.	67,044.
Direct Expenses						
支	7	Food and beverages	34,665.	16,043.	29,047.	79,755.
Dire						
	8	Entertainment				
	9	Other direct expenses	04 450	3,863.	17,414.	45,747.
	10	Direct expense summary. Add lines 4 through			•	(192,546)
	11	Net income summary. Combine line 3, colum	n (d), and line 10		>	<26,514.
Pa	rt I	III Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.				
			(a) Dingo	(b) Pull tabs/instant	(a) Other gaming	(d) Total gaming (add
'n			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
Œ	1	Gross revenue				
Ś	2	Cash prizes				
Direct Expenses						
(pe	3	Noncash prizes				
Ĥ						
irec	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	(
	8	Net gaming income summary. Combine line	, column d, and line 7		>	
9	En	ter the state(s) in which the organization opera	tes gaming activities: I	L		
а	ls t	the organization licensed to operate gaming ac	tivities in each of these	states?		X Yes No
b	If "	No," explain:				
	_					
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	erminated during the tax y	/ear?	Yes X No
b	If "	Yes," explain:				
	_					
	_					

232082 01-07-13

Schedule G (Form 990 or 990-EZ) 2012

Sch		195	4/4	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			X No
	to administer charitable gaming?	ı	Yes I	L ∆ No
	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		<u>%</u>
	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🗆	Yes	X No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained 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 contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	X No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	•		
	organization's own exempt activities during the tax year ▶ \$			
Pa	rt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)	and (v), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	າ (see i	nstruc	tions).
				_

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF CHICAGO, INC. Employer identification number 36-2195474

Pai	rt I Types of Property									
		(a)	(b)	(c)			(d)			
		Check if	Number of	Noncash contr			Nethod of d			
		applicable	contributions or	amounts repor Form 990, Part V		nonc	ash contrib	ution a	mount	S
4	Art Morles of out		nterns contributed	FOIII 990, Part VI	iii, iiiie ig					
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
••	* * * * * * * * * * * * * * * * * * * *									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21										
	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts	37	7.6	F 0	222	DATE	773 T TTT	<u> </u>	DOM	3 M T
25	Other (RAFFLE ITEMS) X 76 59,232. FAIR VALUE									
26	Other \blacktriangleright (ITEMS FOR FUN) X 375 38,450. FAIR VALUE					OF.	DON	A.I.T		
27	Other ()									
28	Other ()									
29	Number of Forms 8283 received by the organize	zation durin	g the tax year for c	ontributions						
	for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29									
									Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for									
	at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for									
	•			•			303 101	30a		Х
L	the entire holding period?							30a		
	b If "Yes," describe the arrangement in Part II.									
31									X	
32a	a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash									7.7
	contributions?									_X_
b	If "Yes," describe in Part II.									
33	If the organization did not report an amount in	column (c) 1	for a type of prope	rty for which colun	nn (a) is ch	necked,				
	describe in Part II.									
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		5	chedule M	(Form	990) (2012)

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Schedule M	(Form 990) (2012)	THE	JUNIOR	LEAGUE	OF	CHICAGO,	INC.	36-2195474	Page 2
Part II	Supplemental	Infor	mation. Cor	mnlete this nar	t to pr	ovide the informat	ion required	by Part L lines 30h 32h and 33 and	whether
	the organization is	reporti	ng in Part I, co	olumn (b), the n	umbe	r of contributions,	the number	of items received, or a combination of	f both.
	Also complete this	part to	r any addition	ai information.					
-									
-									

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

THE JUNIOR LEAGUE OF CHICAGO, INC.

Employer identification number 36-2195474

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OF ALL RACES, RELIGIONS, AND NATIONAL ORIGINS WHO DEMONSTRATE AN

INTEREST IN AND A COMMITMENT TO VOLUNTEERISM.

FORM 990, PART VI, SECTION A, LINE 6: ASSOCIATE MEMBERS - THE ASSOCIATE

COURSE OFFERS WIDE EXPOSURE TO VARIOUS ASPECTS OF THE LEAGUE. THE ASSOCIATE

PERIOD IS INTENDED TO PROVIDE AN INTRODUCTION TO THE LEAGUE AND FACILITATE

THE ON-BOARDING OF NEW MEMBERS. ASSOCIATE COUNSELORS SERVE AS GUIDES AND

MENTORS THROUGHOUT THE COURSE.

ACTIVE MEMBERS - SAME AS ASSOCIATE MEMBERS, BUT ADDITIONAL PRIVILEGES
INCLUDE HOLDING LEADERSHIP POSITIONS AND VOTING RIGHTS.

SUSTAINER MEMBER - AFTER 8 ACTIVE YEARS IN THE LEAGUE, OR REACHING THE AGE
OF 40 AFTER 3 ACTIVE YEARS, MEMBERS HAVE THE OPTION TO CHANGE THEIR STATUS
TO @USTAINER@ SUSTAINERS PAY ANNUAL DUES TO MAINTAIN THEIR LEAGUE
MEMBERSHIP. THEY HAVE NO OTHER REQUIRED RESPONSIBILITIES AND NO VOTING
PRIVILEGES. SUSTAINERS CAN AND ARE ENCOURAGED TO PARTICIPATE IN ANY AND ALL
ASPECTS OF THE LEAGUE.

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERSHIP VOTES FOR THE GOVERNING BOARD AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBER APPROVAL. THEY INCLUDE, BUT MAY NOT BE LIMITED TO BYLAW CHANGES, STRATEGIC PLAN, ANNUAL BUDGET, AND SIGNIFICANT PROGRAM CHANGES.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM WAS REVIEWED BY THE BOARD

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

THE JUNIOR LEAGUE OF CHICAGO, INC.	36-2195474
PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: WE DO NOT CURRENT	TLY HAVE A
MANDATORY CONFLICT OF INTEREST DISCLOSURE. IN PRACTICE	F BOD MEMBERS ARE
AWARE OF CONFLICTS AND RAISE SUCH CONFLICTS TO THE PRESI	DENT, THESE
CONFLICTS ARE PRESENTED TO THE BOD AND, AS NECESSARY, VO	TED ON FOR
APPROVAL.	
FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD OF DIRE	ECTORS APPROVES THE
SALARY OF THE EXECUTIVE (OPERATIONS) DIRECTOR WHEN HIRED	AND ALSO APPROVES
ANY SALARY ADJUSTMENTS.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION N	MAKES ITS BYLAWS,
CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAI	LABLE UPON
REQUEST.	