# TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM AG990-IL

### FOR THE YEAR ENDING

September 30, 2022

# **Prepared For:**

Illinois Arts Alliance 200 W Madison St 3rd Floor Chicago, IL 60606

# Prepared By:

Wipfli LLP 100 Tri-State International Ste 300 Lincolnshire, IL 60069

### Amount of Tax:

Balance due of \$115

# Make Check Payable To:

Illinois Charity Bureau Fund

### Mail Tax Return To:

Office of the Attorney General Charitable Trust Bureau 100 West Randolph St., 11th Floor Chicago, IL 60601-3175

### Return Must Be Mailed On Or Before:

Please mail as soon as possible.

### **Special Instructions:**

The report should be signed and dated by an authorized individual(s).

We recommend that you use certified mail with postmarked receipts for proof of timely filing.

For Of	fice Use Only	ILLINOIS CHARITABLE ORGANIZATION ANNUAL	REPORT			Form AG990-IL
PMT	· · · · · · · · · · · · · · · · · · ·	Attorney General KWAME RAOUL State of II Charitable Trust Bureau, 100 West Rando		СО	# 01	Revised 1/19 . <b>0 1 2 0 5 5</b>
	-	11th Floor, Chicago, Illinois 60601				all items attached:
AMT	Ī	Report for the Fiscal Period:		X		f IRS Return
		·	Make Checks	X		I Financial Statements
INIT		Beginning <u>10/01/2021</u>	Payable to the Illinois		Copy of	f Form IFC Annual Report Filing Fee
		& Ending 09/30/2022	Charity Bureau Fund	X		D Late Report Filing Fee
Feder	ral ID # 36-3177592	MO DAY YR	Duroud rand			MO DAY YR
	ontributions to the organization	tax deductible? X Yes No Date 0	rganization was (	create	-	01/01/1982
	LEGAL		Year-end			· ·
	NAME ILLINOIS A	ARTS ALLIANCE	amounts			
	MAIL		A) ASSETS		A) \$	1,420,208.
Al	DDRESS 200 W MADI	ISON ST, 3RD FLOOR	B) LIABILITIES	S	B) \$	176,318.
CITY	, STATE CHICAGO, I	IL	C) NET ASSET	S	C) \$	1,243,890.
Z	IP CODE 60606					
I.	SUMMARY OF ALL F	REVENUE ITEMS DURING THE YEAR:	PERCENTA	GE		AMOUNT
	D) PUBLIC SUPPORT, CONTI	RIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	70.532		D) \$	1,000,522.
	E) GOVERNMENT GRANTS 8	MEMBERSHIP DUES	25.510		E) \$	361,876.
	F) OTHER REVENUES		3.959	9 %	F) \$	-56,158.
		E AND CONTRIBUTIONS RECEIVED (ADD D, E, & F) EXPENDITURES DURING THE YEAR:	10	0 %	G) \$	1,306,240.
II.			E2 /E'	7 0/	ш, ф	625 610
	H) OPERATING CHARITABLE	PROGRAM EXPENSE	53.45	1 %	H) \$	625,619.
	I) EDUCATION PROGRAM S	ERVICE EXPENSE		%	1) \$	
	J) TOTAL CHARITABLE PRO	GRAM SERVICE EXPENSE (ADD H & I)	53.45	7 %	J) \$	625,619.
	J1) JOINT COSTS ALLOCATED	O TO PROGRAM SERVICES (INCLUDED IN J):	T			
	K) GRANTS TO OTHER CHAR	RITABLE ORGANIZATIONS	14.633	3 %	K) \$	171,250.
	L) TOTAL CHARITABLE PRO	GRAM SERVICE EXPENDITURE (ADD J & K)	68.090	0 %	L) \$	796,869.
	M) MANAGEMENT AND GENE	ERAL EXPENSE	17.864	4 %	M) \$	209,063.
	N) FUNDRAISING EXPENSE		14.046	5 %	N) \$	164,387.
	0) TOTAL EXPENDITURES TI	HIS PERIOD (ADD L, M, & N)	10	0 %	0) \$	1,170,319.
III.		AID FUNDRAISER AND CONSULTANT ACTIVITIES: rt of Individual Fundraising Campaign- Form IFC. One for each PFR.) s:				
		BY PAID PROFESSIONAL FUNDRAISERS	10	0 %	P) \$	0.
	•					
	Q) TOTAL FUNDRAISERS FEE	ES AND EXPENSES		%	Q) \$	
	R) NET RECEIVED BY THE CI	HARITY (P MINUS Q=R)		%	R) \$	
	PROFESSIONAL FUNDRAISIN S) TOTAL AMOUNT PAID TO	G CONSULTANTS: PROFESSIONAL FUNDRAISING CONSULTANTS			S) \$	0.

IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:

V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED)

U) NAME, TITLE: JONATHAN VANDERBRUG, POLICY & RESEARCH DIRECTOR

V) NAME, TITLE: LIBIA BIANIBI, SENIOR DIR.-FINANCE & OPERATIONS

T) NAME, TITLE: CLAIRE RICE, EXECUTIVE DIRECTOR

W) DESCRIPTION: ARTS AND/OR LITERATURE

198091 04-01-21

X) DESCRIPTION:

Y) DESCRIPTION:

T) \$

U) \$

V) \$

W)#

X) # Y) # 127,081.

List on back side of instructions CODE

031

86,950.

74,677.

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO	
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		X	$\frac{1}{2}$
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY				4
	COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X	4
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS,				
	DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS,				
	DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE				1
	ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X	1
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE				1
	THAN 10% OF THE OUTSTANDING SHARES?	4.		X	
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON				1
	OR ORGANIZATION?	5.		X	
					1
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		X	1
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS				1
	BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7.		X	
7b.	IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$; (ii) THE AMOUNT				1
	ALLOCATED TO PROGRAM SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND				1
	GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$				
					-
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		X	
	THE THE SPEANITATION SHED DESIRED DESIRED DESIRED ATION OF HAD ITS DESIRED ATION OF TAX SYSTEMSTICAL SHOPENED OF				
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR	_	High Control	X	1
	REVOKED BY ANY GOVERNMENTAL AGENCY?	9.		Λ	1
10	WAS THERE OR DO VOLUME AND INDICATION FROM THE OF ANY MICHARD AND THEFT RESERVED AND ANY THEFT RESERVED AND AND ANY THEFT RESERVED AND ANY THEFT RESERVED AND ANY THEFT RESERVED AND ANY THE ADDRESS AND AND ANY THE ADDRESS AND AND ANY THE ADDRESS AND AND AND ADDRESS AND AND ADDRESS AND AND ADDRESS AND AND ADDRESS AND				١
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION,	40	T	X	1
	COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		Λ	1
11	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS				
11.					
	THREE LARGEST ACCOUNTS:				
	FIFTH THIRD BANK, CINCINNATI, OH 45263				
	A TATALON DAMINI CANCALITATA ON 10400				1
					1
	• * * * * * * * * * * * * * * * * * * *				1
	ADADI DI GONGNI DING TEG. OCC. OCC.				-
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: AFABLE CONSULTING LLC - 877-394-5550				1
Λ1 Ι	ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS				j
ALL	ATTACHMENTO MOST ACCOMITANT THIS REPORT - SEE INSTRUCTIONS				

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS, AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

### BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

MT	CHEPP	E T	•	ROC	ME

PRESIDENT or TRUSTEE (PRINT NAME)

SIGNATURE

DATE

VICTORIA LAKES BATTLE

TREASURER or TRUSTEE (PRINT NAME)

STEVEN P. KESSLER

SIGNATURE

SIGNATURE

DATE

198101 04-01-21

PREPARER (PRINT NAME)

DATE

# **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

B Group Age   C   Name of organization   C   Same of organization   Same of Sam	<u>A F</u>	or the	e 2021 calendar year, or tax year beginning $OCT \perp$ , $2021$ and elements and elements $2021$ and elements $2021$	naing 5	EP 30, 2022	
Desire business as ARTS ALLIANCE ILLINOIS   36-3177592	<b>B</b> c	Check if policable	C Name of organization		D Employer identific	cation number
Doing business as ARTS REDITANCE   TELLINOS   30-517/392						
Number and street (of VI) to it final is not delivered to street adoress)   RRD FL   12-855-3015   312-855-30		chang	Doing business as ARTS ALLIANCE ILLINOIS		36-31775	92
City or town, state or province, country, and ZIP or foreign postal code  CHICAGO, IL 60606  CHICAGO, IL 60606  CHICAGO, IL 60606  Take septimal states in the province, country, and ZIP or foreign postal code  CHICAGO, IL 60606  Take septimal states in the province of		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telephone numbe	r
CHICAGO, TL 60606   Fames and address of principal officer. MICHELLE T. BOONE   Fames and address of principal officer. MICH		∟return		RD FL	312-855-	3105
CHICLEGY, IL 00000 MICHELLE T. BOONE SAME AS C ABOVE (No. 1		termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,367,339.
Second   Fame and address of principal officer. MICHELLE T. BOONE   Holp rest supporting second   Ves   X   No   No   No   No   No   No   No			ded CHICAGO, IL 60606		H(a) Is this a group re	eturn
SAME AS C ABOVE		tion	F Name and address of principal officer: MICHELLE I. BOONE		for subordinates	? Yes X No
Tax-exempt status:		pendi				
Form of irraganization:   X  Corporation   Trust   Association   Other   L Year of formation: 1982   M State of legal domicile: TL	1 1	Гах-ех	empt status: $\mathbf{X}$ 501(c)(3) $\mathbf{\Box}$ 501(c) ( ) $\mathbf{\triangleleft}$ (insert no.) $\mathbf{\Box}$ 4947(a)(1) or	527	1	
Part   Summary	J١	Nebsi	te: ► WWW.ARTSALLIANCE.ORG		H(c) Group exemptio	n number 🕨
Briefly describe the organization's mission or most significant activities:   ARTS ALLIANCE ILLINOIS FIGHTS   FOR ARTS RESOURCES   AND POLICIES THAT   BENEFIT ILLINOIS.	KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1982	<b>∕</b> State of legal domicile: <b>IL</b>
FOR ARTS RESOURCES AND POLICIES THAT BENEFIT ILLINOIS.   2 Check this box	Pa	art I	Summary			
FOR ARTS RESOURCES AND POLICIES THAT BENEFIT ILLINOIS.   2 Check this box		1	Briefly describe the organization's mission or most significant activities: ARTS	ALLIA	NCE ILLINOIS	S FIGHTS
8   South Unrelated business taxable income from Form 990-T, Part I, line 11   Tib   Unrelated Prior Year   Current Year   Current Year   Prior Year   Current Year   Quarter Year   Qu	nce					
8   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tib   U.	na	2	Check this box  if the organization discontinued its operations or dispose	d of more	than 25% of its net ass	sets.
8   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tib   U.	Ş.	3	Number of voting members of the governing body (Part VI, line 1a)		3	16
8   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tib   U.	Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	
8   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tib   U.	8	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	
8   South Unrelated business taxable income from Form 990-T, Part I, line 11   Tib   Unrelated Prior Year   Current Year   Current Year   Prior Year   Current Year   Quarter Year   Qu	Ίţ	6	Total number of volunteers (estimate if necessary)		6	
8   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tib   U.	Ċţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 0	_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
9 Program service revenue (Part VIII, iline 2g)  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
12 Total revenue (Part VIII, column (A), lines 5, 62, 62, 62, 63, 162, 64)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Professional fundraising fees (Part IX, column (A), line 4)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses (Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total assets or fund balances. Subtract line 21 from line 20  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total assets or fund balances. Subtract line 21 from line 20  20 Total assets or fund balances. Subtract line 21 from line 20  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total liabilities (Part X, line 26)  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  26 Total assets or fund balances. Subtract line 21 from line 20  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total liabilities (Part X, line 26)  20 Total assets or fund balances. Subtract line 21 from line 20  20 Total assets or fund balances. Subtract line 21 from line 20  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  20 Total liabilities (Part X, line 26)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total liabilities (Part X, line 26)  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  26 Total liabilities (Part X, line 26)  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total	ø	8	Contributions and grants (Part VIII, line 1h)		225,642.	1,362,398.
12 Total revenue (Part VIII, collumn (A), lines 5, 62, 62, 63, 163, 163, 173, 173, 173, 173, 173, 173, 173, 17	Š	9	Program service revenue (Part VIII, line 2g)			0.
12 Total revenue (Part VIII, column (A), lines 5, 62, 62, 62, 63, 162, 64)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Professional fundraising fees (Part IX, column (A), line 4)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses (Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total assets or fund balances. Subtract line 21 from line 20  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total assets or fund balances. Subtract line 21 from line 20  20 Total assets or fund balances. Subtract line 21 from line 20  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total liabilities (Part X, line 26)  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  26 Total assets or fund balances. Subtract line 21 from line 20  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total liabilities (Part X, line 26)  20 Total assets or fund balances. Subtract line 21 from line 20  20 Total assets or fund balances. Subtract line 21 from line 20  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  20 Total liabilities (Part X, line 26)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total liabilities (Part X, line 26)  24 Total liabilities (Part X, line 26)  25 Total liabilities (Part X, line 26)  26 Total liabilities (Part X, line 26)  27 Total liabilities (Part X, line 26)  28 Total liabilities (Part X, line 26)  29 Total	eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			
13   Grants and similar amounts paid (Part IX, column (A), lines 1.3)   36,000.   171,250.     4   Benefits paid to or for members (Part IX, column (A), line 4)   0.   0.     5   Salaries, other compensation, employee benefits (Part IX, column (A), lines 5:10)   123,354.   656,200.     6   Brofessional fundraising fees (Part IX, column (A), line 11e)   0.   0.     7   Other expenses (Part IX, column (D), line 25)   164,387.     8   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   315,065.   1,170,319.     9   Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     1   Salaries, other compensation, employee benefits (Part IX, column (A), line 25)   164,387.     1   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   315,065.   1,170,319.     1   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   315,065.   1,170,319.     1   Total expenses. Subtract line 18 from line 12   -77,561.   135,921.     2   Total assets (Part X, line 16)   1,142,760.   1,420,208.     2   Total assets (Part X, line 26)   34,791.   176,318.     2   Total liabilities (Part X, line 26)   1,107,969.   1,243,890.     2   Part II   Signature Block   1,107,969.   1,243,890.     3   Total expenses. Subtract line 21 from line 20   1,107,969.   1,243,890.     3   Total expenses. Subtract line 21 from line 20   1,107,969.   1,243,890.     3   Total assets or fund balances. Subtract line 21 from line 20   1,107,969.   1,243,890.     4   Part II   Signature Block   1,107,969.   1,243,890.     5   Part II   Signature of officer   Date   Da	Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
14   Benefits paid to or for members (Part IX, column (A), line 4)   15   Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   123,354. 656,200.     15   Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   123,354. 656,200.     16   Professional fundraising fees (Part IX, column (A), line 11e)   0. 0. 0.     17   Other expenses (Part IX, column (A), line 11e)   155,711. 342,869.     18   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   315,065. 1,170,319.     19   Revenue less expenses. Subtract line 18 from line 12   -77,561. 135,921.     19   Revenue less expenses. Subtract line 18 from line 12   -77,561. 135,921.     10   Total assets (Part X, line 16)   1,420,208.     20   Total liabilities (Part X, line 26)   34,791. 176,318.     21   Total liabilities (Part X, line 26)   34,791. 176,318.     22   Net assets or fund balances. Subtract line 21 from line 20   1,107,969. 1,243,890.     Part II   Signature Block   Signature Block   MICHELLE T. BOONE, CHAIR   Type or print name and title   Preparer's signature   Primt/Type preparer's name   Preparer's signature   Primtys address   100 TRI - STATE INTERNATIONAL STE 300   Phone no. 847.941.0100   Phone no.		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   123,354.   656,200.     16a Professional fundraising fees (Part IX, column (A), line 11e)   0.   0.     17 Other expenses (Part IX, column (A), lines 25)   164,387.     18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   155,711.   342,869.     18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   -77,561.   135,921.     19 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     19 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     19 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     19 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     19 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     10 Revenue less expenses. Subtract line 18 from line 12   -77,561.   135,921.     10 Revenue less expenses. Subtract line 18 from line 20   -77,561.   135,921.     10 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     10 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     10 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     10 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     10 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     11 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     11 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     11 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     11 Revenue less expenses. Subtract line 21 from line 20   -77,561.   135,921.     12 Revenue less expenses. Subtract line 21 from line 20   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77,561.   -77		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			171,250.
16a Professional fundraising fees (Part IX, column (A), line 11e)   0		14	Benefits paid to or for members (Part IX, column (A), line 4)			
18 Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Signature of officer	Ş	15				
18 Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total liabilities (Part X, line 26)  24 Part II Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Signature of officer	nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
18 Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Total signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Signature of officer	x	b	Total fundraising expenses (Part IX, column (D), line 25)   164,38	<u>7.                                     </u>		
19 Revenue less expenses. Subtract line 18 from line 12	Ш	''				
Beginning of Current Year   End of Year   1,142,760		18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign  WICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Firm's name  WIPFLI LLP  Firm's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100			Revenue less expenses. Subtract line 18 from line 12		-77,561.	135,921.
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign  WICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Firm's name  WIPFLI LLP  Firm's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100	s or			Be		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign  WICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Firm's name  WIPFLI LLP  Firm's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100	set	20				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign  WICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Firm's name  WIPFLI LLP  Firm's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100	A	21	Total liabilities (Part X, line 26)			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  MICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Preparer's signature  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Pirm's name  WIPFLI LLP  Firm's elin  39-0758449  Phone no. 847.941.0100					1,107,969.	1,243,890.
true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  MICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name Preparer's signature STEVEN P. KESSLER STEVEN P. KESSLER STEVEN P. KESSLER Prim's name WIPFLI LLP Firm's elln > 39-0758449  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100						
Sign Here  MICHELLE T. BOONE, CHAIR Type or print name and title  Print/Type preparer's name  Preparer's signature  STEVEN P. KESSLER  Preparer Firm's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Date  08/14/23  Check  PTIN  Firm's EIN  39-0758449  Phone no. 847.941.0100						knowledge and belief, it is
Here  MICHELLE T. BOONE, CHAIR  Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  Preparer's signature  STEVEN P. KESSLER  STEVEN P. KESSLER  Prim's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100	true,	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of whic T .	n preparer	nas any knowledge.	
Here  MICHELLE T. BOONE, CHAIR  Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  Preparer's signature  STEVEN P. KESSLER  STEVEN P. KESSLER  Prim's name  WIPFLI LLP  Firm's address  100 TRI-STATE INTERNATIONAL STE 300  LINCOLNSHIRE, IL 60069  Phone no. 847.941.0100			Signature of officer		 Date	
Type or print name and title  Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Date    O8/14/23     O8/14/23   O8/14/23     O8/14/23     O8/14/23     O8/14/23     O8/14/23     O8/14/23   O8/14/23     O8/14/23   O8/14/23     O8/14/23   O8/14/23     O8/14/23			I'		Date	
Print/Type preparer's name  Print/Type preparer's name  STEVEN P. KESSLER  STEVEN P. KESSLER  STEVEN P. KESSLER  Preparer's signature  08/14/23   Self-employed   P00081989    Firm's name   WIPFLI LLP   Firm's EIN   39-0758449    Use Only   Firm's address   100 TRI-STATE INTERNATIONAL STE 300    LINCOLNSHIRE, IL 60069   Phone no. 847.941.0100	Her	е				
Paid         STEVEN P. KESSLER         STEVEN P. KESSLER         08/14/23   fraction   properties				11	Date Check C	PTIN
Preparer Use Only Firm's address ► 100 TRI-STATE INTERNATIONAL STE 300 LINCOLNSHIRE, IL 60069 Phone no. 847.941.0100	Paid	ı			if	
Use Only Firm's address 100 TRI-STATE INTERNATIONAL STE 300 LINCOLNSHIRE, IL 60069 Phone no.847.941.0100				10		
LINCOLNSHIRE, IL 60069 Phone no. 847.941.0100				300	FIIII S EIN	<u> </u>
	200	Jy			Phone no 84	7.941.0100
	Mav	/ the II	· · · · · · · · · · · · · · · · · · ·		11 Holle Ho. 0 1	

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	BUILDING THE VITALITY OF COMMUNITIES STATEWIDE THROUGH SERVICE AND
	ADVOCACY, THEREBY GENERATING RESOURCES FOR THE CULTURAL SECTOR AND
	CREATIVE INDUSTRIES. THROUGH STATEWIDE CIVIC ENGAGEMENT, POSITIONING
	ARTS AND CULTURE AS A SOURCE OF CREATIVE INDUSTRIES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 245,977 • including grants of \$ 0 •) (Revenue \$ )
	CIVIC ENGAGEMENT: THE ALLIANCE KEEPS ITS STAKEHOLDERS UP TO DATE ON
	NEWS AND POLICY THAT AFFECT THE CREATIVE SECTOR THROUGH PUBLIC FORUMS,
	ACTION ALERTS, ADVOCACY TRAININGS, WORKSHOPS, VOTER EDUCATION, MEETINGS
	WITH ELECTED OFFICIALS, WEBINARS, AND OTHER ENGAGEMENT EVENTS. BY
	EMPOWERING OUR STAKEHOLDERS TO BE ACTIVE PARTICIPANTS IN THE
	POLICY-MAKING PROCESS, WE EQUIP THE SECTOR WITH THE TOOLS TO GROW OUR
	IMPACT ACROSS ILLINOIS.
4b	(Code:) (Expenses \$ 214 , 876 • including grants of \$ 0 •) (Revenue \$ 0
UF	ARTS FOR ILLINOIS RELIEF FUND: ARTS FOR ILLINOIS IS A COLLABORATION
	BETWEEN THE STATE OF ILLINOIS, THE CITY OF CHICAGO, AND THE BROADER
	PHILANTHROPIC COMMUNITY, CO-CHAIRED BY ILLINOIS FIRST LADY MK PRITZKER
	AND CHICAGO FIRST LADY AMY ESHLEMAN.
	AND CHICAGO FIRDI HADI ANI EDHLEMAN:
	THE NEW ONLINE PLATFORM FEATURES TALENTED ARTISTS PERFORMERS, SINGERS,
	POETS, PAINTERS, WRITERS, AND MANY MORE FROM ACROSS ILLINOIS WHO HAVE
	MADE THEIR WORKS AVAILABLE FOR THE PUBLIC'S ENJOYMENT WHILE AT HOME
	DURING THESE CHALLENGING TIMES. THIS PLATFORM IS A PLACE TO CONNECT, EXPRESS, AND INSPIRE. A PLACE FOR COMFORT, LAUGHTER, AND HEALING AMONG
	ALL RESIDENTS.
	VIDINIDIA VEDITORIA •
	120 060 121 250 0
4C	(Code:) (Expenses \$129,869. including grants of \$121,250. ) (Revenue \$0. )  FISCAL SPONSORSHIP: ASSISTING STARTUP INITIATIVES LOOKING TO STRENGTHEN
	THE CREATIVE SECTOR OF ILLINOIS AS THEY ESTABLISH THEIR OWN TAX
	EXEMPTION.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 206,147. including grants of \$ 50,000.) (Revenue \$ 0.)
4e	Total program service expenses ► 796,869.

10330814 147695 238641

# Form 990 (2021) ILLINOIS ARTS ALLIANCE 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? See instructions	2	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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 Rev. Proc. 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		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۰		<del></del>
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b> '-		1
8	, ,			x
•	Schedule D, Part III	8		
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?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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	X	
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		X
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		X
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	I Lu		
D	, .	12b		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Did the appropriation projection of the control of the United Otelson			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>  ^</del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4 41:		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	l		<b>.</b>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			37
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> X</u>
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	X	<u> </u>
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		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Form 990 (2021) ILLINOIS ARTS ALLIANCE
Part IV Checklist of Required Schedules (continued)

	· · · ·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"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? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	L
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
_		_	990	(0004)

132004 12-09-21

021) ILLINOIS ARTS ALLIANCE
Statements Regarding Other IRS Filings and Tax Compliance (continued) 36-3177592 Page **5** Form 990 (2021) Part V

					Yes	No
<b>2</b> 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	2a	12		77	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.					37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a			4-		x
<b>h</b>	financial account in a foreign country (such as a bank account, securities account, or other financial a If "Yes," enter the name of the foreign country	ccouri	.)?	4a		1
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	count	e (ERAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit					
	any contributions that were not tax deductible as charitable contributions?	-		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	ovided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s requ	ired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	, , , , , , , , , , , , , , , , , , , ,			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	•			
0				8		
9 a	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:			0.0		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l I		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
<b>L</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
•	Enter the amount of reserves on hand	13c				
14a				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedul</i>			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
-	excess parachute payment(s) during the year?			15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	any				
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

ILLINOIS ARTS ALLIANCE 36-3177592 Page 6 Form 990 (2021) 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 16 **1a** Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. 16 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes

10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on 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	
b		15b		X
	If "Yes" to line 15a or 15b, describe the process on 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	▶I	L
	List the states with which a copy of this rollings is required to be filed	_	_

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

X Upon request Own website Another's website Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20	State the name, address, and telephone number of the person who possesses the organization's books and records
	AFABLE CONSULTING LLC - 877-394-5550

CHICAGO

Form **990** (2021)

1925

60707

N HARLEM AVE.

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- 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.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Posi heck i		l than d	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week					174140	,	from	from related	other
	(list any hours for	direct				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	,	and related
	below	vidual	itution	ser	Key employee	nest c	ner			organizations
	line)	lndi	Inst	Officer	Key	High	Former			
(1) CLAIRE RICE	40.00									
EXECUTIVE DIRECTOR				Х				127,081.	0.	25,359
(2) MICHELLE T. BOONE	2.00									
BOARD CHAIR		Х		Х				0.	0.	0 .
(3) MICHAEL HERNANDEZ	2.00									
BOARD VICE CHAIR	1 00	Х		Х				0.	0.	0
(4) MIMI DE CASTRO	1.00								•	•
SECRETARY/TREASURER	2 00	Х		X				0.	0.	0
(5) E. BROOKE FLANAGAN	2.00	37		37					0	0
IMMEDIATE PAST CHAIR	2.00	Х		Х				0.	0.	0 .
(6) PHILLIP BAHAR DIRECTOR	2.00	Х						0.	0.	0 .
(7) RENA HENDERSON MASON	2.00	Λ						0.	0.	0 .
DIRECTOR	2.00	Х						0.	0.	0 .
(8) O. VICTORIA LAKES-BATTLE	1.00							0.	0.	0 (
DIRECTOR	1.00	Х						0.	0.	0 .
(9) KATHRYN M. LIPUMA	1.00							•	•	
DIRECTOR	1100	х						0.	0.	0.
(10) JASON PALMQUIST	1.00								•	
DIRECTOR		Х						0.	0.	0 .
(11) STACY PETERSON	1.00									
DIRECTOR		Х						0.	0.	0 .
(12) ELIGIO PIMENTEL	1.00									
DIRECTOR		Х						0.	0.	0.
(13) MARK RODRIGUEZ	1.00									
DIRECTOR		Х						0.	0.	0
(14) ROCHE SCHULFER	1.00									
DIRECTOR		Х						0.	0.	0 .
(15) SCOTT SILBERSTEIN	1.00									
DIRECTOR		Х						0.	0.	0 .
(16) VIVIAN LEE STANDIFIRD	1.00									
DIRECTOR		Х						0.	0.	0.
(17) ANDREAS WALDBURG-WOLFEGG	1.00								_	_
DIRECTOR		Х						0.	0.	0 Form <b>990</b> (202

Par	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hi	ghes	st C	compensated Employee	s (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		ገ than	one	Reportable	Reportable		Es	stimate	ed
		hours per	box	, unle	ss pe	rson	is both	h an	compensation	compensation	- 1	ar	nount	of
		week		Cer al	iu a u	0010	Jirarus	100)	from	from related	- 1	l .= .	other	.a.:
		(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MIS			pensa om th	
		related	eord	tee			sated		(W-2/1099-MISC/	1099-NEC)	ا /		anizat	
		organizations	truste	Institutional trustee		ee/	Highest compensated employee		1099-NEC)	1000 (120)			d relat	
		below	idual	ution	 	Key employee	est co	er	1			org	anizati	ons
		line)	Indiv	Instit	Officer	Key e	High	Former						
						-					$\dashv$			
				_		-	-	-			$\dashv$			
						-		<u> </u>			$\dashv$			
						1					$\dashv$			
											$\dashv$			
											$\neg$			
1b	Subtotal							<b></b>	127,081.		0.	2	5,3	59.
	Total from continuation sheets to Part VI							ightharpoons	0.		0.			0.
d	Total (add lines 1b and 1c)							<u> </u>	127,081.		0.	2	5,3	<u>59.</u>
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100,	000 of reportable				_
	compensation from the organization													1
_										_	ſ		Yes	No
3	Did the organization list any <b>former</b> officer	•	,	,	•	,	•	·		•				v
	line 1a? If "Yes," complete Schedule J for s										···· }	3		X
4	For any individual listed on line 1a, is the su	•							•	•	- 1	4	X	
_	and related organizations greater than \$150											4	Λ	
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com	•				•			•		ı	5		Х
Sec	tion B. Independent Contractors	ipiete Scriedule	9 J T	or st	icn į	pers	son							21
1	Complete this table for your five highest co	mpensated inc	lene	nder	nt co	ontr	acto	rs th	nat received more than \$	100.000 of comp	ensat	ion fr	om	
•	the organization. Report compensation for										000.			
	(A)	-			<u> </u>				(B)			(0	D)	
	Name and business	address	N	ONE	3				Description of s	ervices	С		nsatio	n
								_						
								$\dashv$						
	Total number of independent particular.	noludina but -	o+ 15:	ni+ -	4+~	th a	20 1:-	*to =1	abovo) who received	are then				
2	Total number of independent contractors (i		JL III	ilitec	ו נס		se iis )	red	above) who received mo	DIE HIAH				
	\$100,000 of compensation from the organi	2au011										Form	<b>990</b> (	2021)
												· OIIII	(	-021)

Form 990 (2021) ILLINOI
Part VIII Statement of Revenue

			Check if Schedule O contains a respons	e or note to any lir	ne in this Part VIII			
			Officer if Ochedule O Contains a respons	e of flote to arry in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenuè excluded
					Total Tovollad	function revenue	business revenue	from tax under
								sections 512 - 514
र र	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b	45,786.				
ලි සි			Fundraising events 1c	264,975.				
Ŧ\$,				201/3/30	_			
ig ig			Related organizations 1d	216 000				
JS,			Government grants (contributions) 1e	316,090.				
r S		f	All other contributions, gifts, grants, and					
g#			similar amounts not included above <b>1f</b>	735,547.				
들으		g	Noncash contributions included in lines 1a-1f 1g \$					
Sign		h	Total. Add lines 1a-1f	<b>•</b>	1,362,398.			
				Business Code	, ,			
	_							
<u>:</u>	2			-				
e ≟		b		-				
am Ser		С		_				
an		d						
Program Service Revenue		е						
P		f	All other program service revenue					
			Total. Add lines 2a-2f					
	3	3	Investment income (including dividends, inte					
	3							
	_		other similar amounts)					
	4		Income from investment of tax-exempt bond	· ·				
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		С	Rental income or (loss) 6c					
			Not rental income or (loss)	<u> </u>				
			Gross amount from sales of (i) Securities	s (ii) Other				
	′	а	()	(ii) Garioi	_			
			assets other than inventory 7a					
-		b	Less: cost or other basis					
en			and sales expenses					
Revenue		С	Gain or (loss)7c					
Re		d	Net gain or (loss)	<b>)</b>				
her	8	а	Gross income from fundraising events (not					
₽			including \$ 264,975. of					
			contributions reported on line 1c). See					
			•	3a 0.				
				$\frac{1}{10000000000000000000000000000000000$	_			
					61 000			61 000
			Net income or (loss) from fundraising events	<u></u>	-61,099.			-61,099.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19	Эа				
		b	Less: direct expenses	9b				
		С	Net income or (loss) from gaming activities					
			Gross sales of inventory, less returns					
		_	• • • • • • • • • • • • • • • • • • • •	0a				
		<b>L</b>	1					
				0b				
		С	Net income or (loss) from sales of inventory	<u></u>				
Ø				Business Code				
on e	11	а		_				
ane and		b						
elk		С						
Miscellaneous Revenue		d	All other revenue	900099	4,941.			4,941.
Σ			Total. Add lines 11a-11d		4,941.			, = = = -
	12		Total revenue. See instructions		1,306,240.	0.	0.	-56,158.
	14		TOTAL TEVELINE. OFF INSTRUCTIONS		F / J J J J J J J J J J J J J J J J J J		<u> </u>	30,130.

132009 12-09-21

# Form 990 (2021) ILLINOIS ARTS ALLIANCE Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All othe	r organizations must com	nplete column (A).	
	Check if Schedule O contains a respons				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	171,250.	171,250.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	135,190.	84,300.	24,708.	26,182.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	400 044	252 125		
7	Other salaries and wages	430,211.	268,406.	78,203.	83,602.
8	Pension plan accruals and contributions (include	2 1 1 2		4	4
	section 401(k) and 403(b) employer contributions)	8,163.	5,072.	1,550.	1,541. 7,991.
9	Other employee benefits	42,304.	26,280.	8,033.	7,991.
10	Payroll taxes	40,332.	25,055.	7,659.	7,618.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	12,180.		12,180.	
d	Lobbying	36,614.	36,614.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	179,868.	158,738.	6,436.	14,694.
12	Advertising and promotion				
13	Office expenses	16,647.	612.	4,387.	11,648.
14	Information technology				
15	Royalties				
16	Occupancy	30,011.	13,055.	9,453.	7,503.
17	Travel	12,817.	6,258.	3,768.	2,791.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4,369.		4,369.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A).				
	amount, list line 24e expenses on Schedule 0.)				
а	BAD DEBT EXPENSE	19,500.		19,500.	
b	LICENSE & FEES	15,247.	908.	14,292.	47.
С	DUES & SUBSCRIPTIONS	3,498.	271.	2,978.	249.
d	EQUIPMENT & LEASES	2,338.		1,982.	356.
е	All other expenses	9,780.	50.	9,565.	165.
25	Total functional expenses. Add lines 1 through 24e	1,170,319.	796,869.	209,063.	164,387.
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)				
					000

Form 990 (2021)
Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any	/ line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			882,514.	1	893,777.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			249,991.	3	503,915.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ıbstantial c	ontributor, or 35%			
ស		controlled entity or family member of any of t	hese perso	ons		5	
	6	Loans and other receivables from other disqu	ualified per	sons (as defined			
		under section 4958(f)(1)), and persons descri	bed in sect	ion 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		8			
ğ	9	Donat and a superior and all of a superior all all a superior			8,955.	9	21,216.
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	58,022.			
	b	Less: accumulated depreciation	10b	58,022.	0.	10c	0.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets			14	1 200	
	15	Other assets. See Part IV, line 11			1,300.	15	1,300.
	16	Total assets. Add lines 1 through 15 (must e			1,142,760.	16	1,420,208.
	17	Accounts payable and accrued expenses			34,791.	17	176,318.
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or fo					
ij		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t				22	
	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			34,791.	25 26	176,318.
	20	Organizations that follow FASB ASC 958, or	chack hard	X	31,731	20	17073100
es		and complete lines 27, 28, 32, and 33.	SHOOK HOLK				
ů	27				380,769.	27	704,198.
3ala	28	***************************************			727,200.	28	539,692.
둳		Organizations that do not follow FASB ASG			•		•
Ξ		and complete lines 29 through 33.	·,				
ō	29	Capital stock or trust principal, or current fun	ıds			29	
sets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32				1,107,969.	32	1,243,890.
~	33	Total liabilities and net assets/fund balances			1,142,760.	33	1,420,208.
				•		Form <b>990</b> (2021	

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,30		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,17		
3	Revenue less expenses. Subtract line 2 from line 1	3		<b>5,9</b>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,10	7,9	69.
5	Net unrealized gains (losses) on investments	5			
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,24	3,8	90.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
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 reviewed	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 separate	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	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 on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

ILLINOIS ARTS ALLIANCE 36-3177592 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

·-···-, ···, ···, ···	. , , , , , , , , , , , , , , , , , , ,	many miregrates eapperin	.9 0.94			
<b>f</b> Enter the number of supported of	organizations					
g Provide the following information	about the supporte	ed organization(s).				
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
Total						

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

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

Sec	ction A. Public Support	, ,		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(-,	(-, : -	(-, : -	(-,	(=, = = =	(-)
•	membership fees received. (Do not						
	include any "unusual grants.")	704,039.	2327128.	1908169.	225,642.	1383828.	6548806.
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	704,039.	2327128.	1908169.	225,642.	1383828.	6548806.
	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,						
	calumn (f)						245,120.
6	Public support. Subtract line 5 from line 4.						6303686.
	etion B. Total Support						0303000.
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	704,039.	2327128.	1908169.	225,642.	1383828.	6548806.
	Gross income from interest,	104,033.	2327120.	1000100.	223,042.	1303020.	0340000.
0	·						
	dividends, payments received on						
	securities loans, rents, royalties,						
_	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						6548806.
	Total support. Add lines 7 through 10		`				57,326.
12	Gross receipts from related activities,	•	,			12	37,340.
13	First 5 years. If the Form 990 is for th			•			<b>.</b> —
800	organization, check this box and stop ction C. Computation of Public						<b>P</b>
	•			-1 (6)		44	96.26 %
	Public support percentage for 2021 (li					14	00 15
15						15	
16a	33 1/3% support test - 2021. If the c						
	stop here. The organization qualifies						
Ю	33 1/3% support test - 2020. If the c						
4-	and <b>stop here.</b> The organization quali						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the facts		•	-	•	VI now the organiz	ation
	meets the facts-and-circumstances te	-	•	* **	-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets th				-		. —
	organization meets the facts-and-circu		-		•		
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	slow, please comp	Diete Fait II.)								
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")										
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose										
3	Gross receipts from activities that are not an unrelated trade or business under section 513										
4	Tax revenues levied for the organ- 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										
6	Total. Add lines 1 through 5					1					
78	Amounts included on lines 1, 2, and 3 received from disqualified persons										
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year										
(	Add lines 7a and 7b										
8	Public support. (Subtract line 7c from line 6.)										
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
	Amounts from line 6	(4) 2317	(2) 2313	(0) 2010	(4) 2020	(0) 2321	(i) rotar				
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources										
k	Unrelated business taxable income (less section 511 taxes) from businesses										
	acquired after June 30, 1975										
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on										
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)										
	Total support. (Add lines 9, 10c, 11, and 12.)										
14	First 5 years. If the Form 990 is for th	· ·		•	•		. —				
<u> </u>	check this box and stop here	a Cumpart Da	· · · · · · · · · · · · · · · · · · ·				<b>&gt;</b>				
	ction C. Computation of Public					T T					
	Public support percentage for 2021 (li		- ·	column (f))		15	<u>%</u>				
	Public support percentage from 2020 ction D. Computation of Inves					16	%				
	•			ino 10 l (^\)		17					
		r <b>2021</b> (line 10c, column (f), divided by line 13, column (f))									
		age from 2020 Schedule A, Part III, line 17									
198							<b>▶</b> □				
k	more than 33 1/3%, check this box an 33 1/3% support tests - 2020. If the	=	-	•							
	line 18 is not more than 33 1/3%, ched	ck this box and <b>st</b>	t <b>op here.</b> The orga	anization qualifies a	as a publicly supp	orted organization					
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 10h check th	nis hay and see in	structions					

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# Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

_		Yes	No
L	1		
L	2		
L	3a		
	3b		
	3c		
	4a		
	4b		
	4-		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
L	7		
	8		
	9a		
	9b		
	0.		
	9с		
	10-		
	10a		
	10h		
	10b		<del></del>

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

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete S	Sections A through E.	
Sect	tion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
_1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		

Schedule A (Form 990) 2021

\_\_\_ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Par	t V   Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	3	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
ее	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
i_	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
_8_	Breakdown of line 7:				
a	Excess from 2017				
<u>b</u>	Excess from 2018				
с	Excess from 2019				
<u>d</u>	Excess from 2020				
е	Excess from 2021				

# SCHEDULE C (Form 990)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	ILLINOI	S ARTS ALLIANCE			36-3177592
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		<b></b> ►\$	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	<b>▶</b> \$	
	Enter the amount of any excise tax				
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.			=6.//	1/01
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),		
	Enter the amount directly expended	, ,	·	***************************************	
2	Enter the amount of the filing organ				
	exempt function activities				
3	Total exempt function expenditures				
4	line 17b  Did the filing organization file <b>Form</b>				
5	Enter the names, addresses and en				
J	made payments. For each organiza				
	contributions received that were pro	•			•
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Sche			TS ALLIANCE			177592 Page 2	
Pa	rt II-A Complete if the org	janization is exer	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under	
	section 501(h)).						
A C	heck 🕨 🔲 if the filing organiza	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	, address, EIN,	
	expenses, and sha	re of excess lobbying	expenditures).				
<b>B</b> C	heck 🕨 🗌 if the filing organiza	ation checked box A a	nd "limited control" pro	visions apply.			
		its on Lobbying Expe ditures" means amou	nditures ınts paid or incurred.)		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a	Total lobbying expenditures to infl	uence public opinion (	grassroots lobbying)		36,614.		
	Total lobbying expenditures to infl				-		
С	Total lobbying expenditures (add li		• • • • • • • • • • • • • • • • • • • •		36,614.		
d					1,133,705.		
е	Total exempt purpose expenditure				1,170,319.		
	Lobbying nontaxable amount. Ent				192,032.		
	If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:			
	Not over \$500,000	20% of	the amount on line 1e.				
	Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.			
	Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.			
	Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
	Over \$17,000,000	\$1,000,	000.				
g	Grassroots nontaxable amount (er	nter 25% of line 1f)			48,008.		
h	Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.		
i	Subtract line 1f from line 1c. If zero	o or less, enter -0			0.		
j	If there is an amount other than ze	ero on either line 1h or	line 1i, did the organiza	tion file Form 4720			
	reporting section 4911 tax for this	year?				Yes No	
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)						
		Lobbying Expe	nditures During 4-Yea	r Averaging Period			
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) Total	

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	( <b>d)</b> 2021	(e) Total				
2a Lobbying nontaxable amount	237,158.	235,512.	62,908.	192,032.	727,610.				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,091,415.				
<b>c</b> Total lobbying expenditures	36,000.	36,614.	9,000.	36,614.	118,228.				
d Grassroots nontaxable amount	59,290.	58,878.	15,727.	48,008.	181,903.				
e Grassroots ceiling amount (150% of line 2d, column (e))					272,855.				
f Grassroots lobbying expenditures		36,614.	9,000.	36,614.	82,228.				

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

For ea	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b	)
	lobbying activity.	Yes	No	Amo	ount
	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				
	Mailings to members, legislators, or the public?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- 504/-\/	-\	. 4	
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(	o), or sec	etion	
				Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		1		
1			····		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year	<b>2</b>	4:	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section	e prior year 1 501(c)(5	2 3 5), or sec		0 :-
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year 1 501(c)(5	2 3 5), or sec		3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(t	2 3 5), or sec (b) Part		3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year n 501(c)(5 'No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	e prior year n 501(c)(5 'No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year's 1 501(c)(§ No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year	e prior year'n 1 501(c)(t No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior year'n 501(c)(t No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	e prior year'n 501(c)(t No" OR	2 3 5), or sec (b) Part		3, is
2 3 Part 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior year n 501(c)(§ No" OR	2 3 5), or sec (b) Part		3, is
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2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nond	e prior year'n 501(c)(s No" OR	2 3 3 5), or see (b) Part 1 2a 2b 2c 3		3, is
1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political campaign activity expenditures from the section 162(e) dues  Total	e prior year'n 501(c)(s No" OR	2 3 3 5), or see (b) Part 1 2a 2b 2c 3		3, is
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1 2 a b c 3 4 5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceededs the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  Supplemental Information	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
Part  1 2 a b c 3 4  5 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political expenditures and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
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2 3 Part  1 2 a b c 3 4  5 Part  Provice  PAR	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.  T II-A, LINE 2	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
2 3 Part  1 2 a b c 3 4  5 Part  Provice  PAR	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  Et W Supplemental Information  De the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
Part  a b c 3 4  5  Part  Provice nstruce PAR  201	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the still-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.  T II-A, LINE 2  8: 07/01/2019 - 06/30/2020	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
Part  a b c 3 4  5  Part  Provice nstruce PAR  201	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyper expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.  T II-A, LINE 2	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
2 3 Part  1 2 a b c 3 4  5 Part  Provice PAR  201	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable amount or lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.  T II-A, LINE 2  8: 07/01/2019 - 06/30/2020  9: 07/01/2020 - 06/30/2021	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is
2 3 Part  1 2 a b c 3 4  5 Part  Provice PAR  201	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the still-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group citions); and Part II-B, line 1. Also, complete this part for any additional information.  T II-A, LINE 2  8: 07/01/2019 - 06/30/2020	e prior year'n 501(c)(t) No" OR  al	2 3 5), or sec (b) Part  2 2 2 3 3 4 5	III-A, line	3, is

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

**Employer identification number** 

Name of the organization

ILLINOIS ARTS ALLIANCE 36-3177592

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		ed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose of	conferring
	impermissible private benefit?		Yes
Pai	T II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed 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			
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register	•	
3	Number of conservation easements modified, transferred, rele		
	year▶	, , ,	
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ing of violations, and enforcing conservat	tion easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these item	S.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB AS		-
а	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
			<b>.</b> .
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2021

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Pai	t III	Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other	Simila	Assets	(contir	nued)	
3	Using	the organization's acquisition, accession	on, and other record	s, check	any of the f	following that	make sig	nificant ι	use of its			
	collec	ction items (check all that apply):										
а		Public exhibition	d		Loan or exc	hange progra	am					
b		Scholarly research	е		Other							
С		Preservation for future generations										
4	Provi	de a description of the organization's co	llections and explair	n how th	ey further th	ne organizatio	n's exem	pt purpos	se in Part	XIII.		
5		g the year, did the organization solicit o	•		-	-						
		sold to raise funds rather than to be ma				•				Yes		No
Par	t IV	Escrow and Custodial Arrang								line 9, or		
		reported an amount on Form 990, Par								,		
1a	Is the	organization an agent, trustee, custodia	an or other intermed	iary for o	contributions	s or other ass	ets not ir	cluded				
		orm 990, Part X?								Yes		No
b		s," explain the arrangement in Part XIII a										
			·	· ·						Amoun	t	
С	Begin	nning balance						1c				
d	-	ions during the year										
е		butions during the year										
f		ng balance						1f				
		ne organization include an amount on Fo								Yes		No
		s," explain the arrangement in Part XIII.										ĺ
	τV	Endowment Funds. Complete it										
		·	(a) Current year		rior year	(c) Two year			ears back	(e) Four	years	back
1a	Begin	nning of year balance	•									
b		ibutions										
c		nvestment earnings, gains, and losses										
d		s or scholarships										
e		expenditures for facilities										
Ū		programs										
f		nistrative expenses										
		of year balance										
2		de the estimated percentage of the curr	ent vear end halance	e (line 1c	L column (a)	)) held as:				ı		
a		d designated or quasi-endowment		% %	,, ooiaiiii (a)	n noid do.						
b		anent endowment		_′°								
c			/0 %									
·		percentages on lines 2a, 2b, and 2c shou	, -									
3a	•	nere endowment funds not in the posses	•	tion tha	t are held ar	nd administer	ed for the	organiza	ation			
ou	by:	iore chaewment failed flot in the people	solon of the organize	ttiori tria	are ricia ar	ia darriiriiotor	00 101 1110	organiza	20011	[	Yes	No
		Inrelated organizations								3a(i)		
		elated organizations								3a(ii)		
h		s" on line 3a(ii), are the related organiza								3b		
4		ribe in Part XIII the intended uses of the								OD		
	t VI	Land, Buildings, and Equipm		WITICITE	urius.							
		Complete if the organization answered		). Part IV	. line 11a. S	See Form 990	. Part X. li	ine 10.				
		Description of property	(a) Cost or o	•		or other		cumulate	<sup>2</sup> d	(d) Boo	k value	
		Description of property	basis (investn		. ,	(other)	٠,	reciation	,u	( <b>u)</b> 600	n value	7
10	1 004		<del>-   ` ` '</del>		24010	()	аср					
_		inge										
b		ings ehold improvements										
_			<b>I</b>		5	8,022.		58,02	22.			0.
d		oment				0,022.		50,02				•
		lines 1a through 1e (Column (d) must o		V l: :	m /D) !: 1	0-1						0.

Schedule D (Form 990) 2021 ILLINOIS AR'I	'S ALLIANCE	36	-3177592 Page
Part VII Investments - Other Securities.	on Form 000 Dort IV line	11h Coo Form 000 Port V line 10	
Complete if the organization answered "Yes" of		T	d afa
(a) Description of Security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests		+	
(3) Other		+	
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			
	n Form 000 Dort IV !:	11a Can Form 000 Part V line 10	
Complete if the organization answered "Yes" of	(b) Book value		d of year market yelus
(a) Description of investment	(b) BOOK value	(c) Method of valuation: Cost or end	u-or-year market value
(1)			
(2)		-	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	- F 000 D+ IV I'	44 d. Oce Ferrer 000 Best V. Bres 45	
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	(b) Dealership
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>15.)</u>	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column (b) must a gual Form 000 Port V and (D) line	2F \	_	1

Schedule D (Form 990) 2021

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

# SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the	organization
-------------	--------------

Employer identification number

ILLINOI	S ARTS ALLIANCE				36-3177	592		
Part I Fundraising Activities. required to complete this part	Complete if the organization answet.	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not		
<ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the</li> </ul>	eed funds through any of the followin  e Solicitat  f Solicitat  g Special  or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	Yes			
(i) Name and address of individual or entity (fundraiser)	l ACTIVITY I have custody I I I I I I I I I I I I I I I I I I I							
		Yes	No					
otal			<b>•</b>					
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is exempt from req	gistration		

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

Part II Fundraising Events. Complete if the organization answered "Yes" on 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

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines 1 and 6b. List e	events with gross receipt	s greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
			40TH		NONE	(add col. (a) through
			ANNIVERSARY			col. (c)
4			(event type)	(event type)	(total number)	001. <b>(C)</b> )
nue						
Revenue	1	Gross receipts	264,975.			264,975.
Œ						
	2	Less: Contributions	264,975.			264,975.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	_					
S	5	Noncash prizes				
Jse	_	Pont/facility costs	1,000.			1,000.
(per	6	Rent/facility costs	1,000.			1,000.
Direct Expenses	7	Food and beverages	16,080.			16,080.
irec	′	rood and beverages	10,000.			10,000.
	8	Entertainment	1.500.			1.500.
	9	Other direct expenses	1,500. 42,519.			1,500. 42,519.
	_		•		<b>•</b>	61,099.
		•			_	-61,099.
Pa	rt I	Gaming. Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4, 595	bingo/progressive bingo	(0) 0 11101 gaining	col. (a) through col. (c))
3eV						
_	1	Gross revenue				
es	2	Cash prizes				
ens	_	Nanagah prizas				
Direct Expenses	3	Noncash prizes				
ect	4	Rent/facility costs				
Ę	7	Tions tability costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No	No	
				<u>, ——</u>		
	7	Direct expense summary. Add lines 2 through	5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>)</b>	
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming ac				Yes No
b	If "	No," explain:				
	_					
40		and the constant of the consta	contrast access to the state			
		ere any of the organization's gaming licenses re	· · · · · · · · · · · · · · · · · · ·			Yes No
O	П "	Yes," explain:				
	_					

Schedule G (Form 990) 2021

132082 10-21-21

Schedule G	(Form 990)	ILLINOIS ARTS	ALLIANCE	36-3177592	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)			
		·			
_					

### SCHEDULE I (Form 990)

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

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

Attach to Form 990.

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

2021
Open to Public

Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

ILLINOIS ARTS ALLIANCE

Employer identification number
36-3177592

Part I	General Information on Grants a	nd Assistance					•				
<b>1</b> Doe	es the organization maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	on			
crite	criteria used to award the grants or assistance?										
2 Des	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.										
Part II	Grants and Other Assistance to I	Domestic Organi	zations and Domestic	Governments. C	omplete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any			
	recipient that received more than	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.						
Name and address of organization or government		<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	noncash Valuation (book,		(h) Purpose of grant or assistance			
	IA LLC, 2112 INC										
	, IL 60641	83-2720461	501(C)(3)	111,250.	0.			CCE SPONSORSHIP EXPENSES			
420 SOU	IELD AREA ARTS COUNCIL V TH SIXTH STREET IELD, IL 62701	37-1003507	501(C)(3)	50,000.	0.			SPRINGFIELD OS			
ALBANY PARK THEATER PROJECT PO BOX 25072 CHICAGO, IL 60625		36-4125560	501(C)(3)	10,000.	0.			2022 CREATIVE YOUTH DEVELOPMENT AWARD			
	er total number of section 501(c)(3) are er total number of other organizations	-	-								

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

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
IN THE CASE OF CCE, THIS IS A FISC	AL SPONSO	RSHIP AGRE	EMENT, THA	T IS	
GOVERNED BY A SIGNED FISCAL SPONSO	RSHIP CON	TRACT. WE	HAVE MONTH	LY CHECKINS	
WITH CCE TO ENSURE COMPLIANCE AND I	MISSION A	LIGNMENT W	ITH THEIR	GRANT	
ACTIVITIES. IN THE CASE OF APTP,	THEY WERE	A RECIPIE	INT OF A GE	NERAL	
OPERATING SUPPORT AWARD THAT WAS A	PASS THR	OUGH FROM	ALLSTATE F	OUNDATION,	
BASED ON THEIR YOUTH DEVELOPMENT P	ROGRAM. T	HIS WAS DE	TERMINED T	HROUGH A	
NOMINATION PROCESS WITH AN EXPERT					
REPORTING OR SPECIFIC OTHER REQUIR	•				

Part	10 3	uppie	mentai ir	iomati	UII								
AREA	A ART	'S C	OUNCIL	, THI	S WAS	Α	ONE-TIME	GRANT	BASED	ON	THE	SERVICES	PROVIDED
FOR	THE	ONE	STATE	CONF	ERENC	Ε.							

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number ILLINOIS ARTS ALLIANCE 36-3177592 Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CLAIRE RICE	(i)	109,081.	18,000.	0.	3,553.	21,806.	152,440.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							1 1/5 000) 0004

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

#### **SCHEDULE 0** (Form 990)

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 Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

ILLINOIS ARTS ALLIANCE

**Employer identification number** 36-3177592

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
THIS STATEWIDE INITIATIVE COMES AT A TIME OF UNPRECEDENTED STRAIN ON
THE ARTS AND CULTURAL COMMUNITY AS A RESULT OF COVID-19. ARTS FOR
ILLINOIS ALSO LAUNCHED THE ARTS FOR ILLINOIS RELIEF FUND, WHICH WILL
PROVIDE IMMEDIATE RELIEF DIRECTLY TO INDIVIDUAL ARTISTS AND ARTISANS,
INCLUDING STAGE AND PRODUCTION CREW MEMBERS AND PART-TIME CULTURAL
WORKERS, AS WELL AS ARTS ORGANIZATIONS, THROUGH GRANTS TO HELP THOSE
UNABLE TO WORK DURING THIS TEMPORARY SHUT-DOWN.
THE CREATIVE ENERGIES, TALENTS, AND PASSIONS OF ILLINOIS' ARTS
COMMUNITY REMAIN STRONG. ARTS FOR ILLINOIS PUTS ART BACK INTO OUR
COMMUNITIES AT A TIME WHEN CONNECTION IS CRITICAL.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ARTS EDUCATION & CULTURAL EQUITY
EXPENSES \$ 128,243. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
ONE STATE CONFERENCE, A PLACE TO SHARE RESOURCES, BUILD AND STRENGTHEN
OUR NETWORK OF MUTUAL AID WITHIN THE ARTS AND CULTURE SECTOR IN
ILLINOIS, AND SUPPORT EMERGING ARTISTS AND ARTS LEADERS.
EXPENSES \$ 77,904. INCLUDING GRANTS OF \$ 50,000. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11B:
THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE THE
ORGANIZATION'S FORM 990. MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND
PROVIDES A FULL COPY TO ALL VOTING MEMBERS OF THE GOVERNING BODY PRIOR TO
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer identification number** ILLINOIS ARTS ALLIANCE 36-3177592 FILING. THE GOVERNING BODY IS PROVIDED A REASONABLE AMOUNT OF TIME TO REVIEW THE RETURN AND ASK QUESTIONS DIRECTLY TO ORGANIZATION MANAGEMENT OR THE CONTACT AT THE INDEPENDENT CPA FIRM PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: ARTS ALLIANCE ILLINOIS DISTRIBUTES YEARLY TO STAFF AND BOARD OF DIRECTORS OUR CONFLICT OF INTEREST POLICY. A SIGNED STATEMENT IS ATTACHED AND IS TO BE RETURNED TO ARTS ALLIANCE ILLINOIS DIRECTORY OF OPERATIONS WHO KEEPS A COPY ON FILE AND PROVIDES SAME TO AUDITORS. FORM 990, PART VI, SECTION B, LINE 15A: ANNUAL EVALUATION CONDUCTED BY THE BOARD CHAIR. EVALUATION AND GOALS ARE REVISITED WITH THE BOARD CHAIR. BOARD CHAIR THEN CONVENES AN EXECUTIVE SESSION OF THE ARTS ALLIANCE EXECUTIVE COMMITTEE, WHERE JOB PERFORMANCE IS REVIEWED AND THEN SALARY INCREASES ARE DISCUSSED AND IMPLEMENTED. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANTS:

PROGRAM SERVICE EXPENSES 11,000. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 11,000.

PROFESSIONAL DEVELOPMENT:

Schedule O (Form 990) 2021 Page **2** 

Name of the organization  ILLINOIS ARTS ALLIANCE	Employer identification number 36-3177592
PROGRAM SERVICE EXPENSES	2,600.
MANAGEMENT AND GENERAL EXPENSES	1,729.
FUNDRAISING EXPENSES	2,590.
TOTAL EXPENSES	6,919.
CONTRACTORS:	
PROGRAM SERVICE EXPENSES	145,138.
MANAGEMENT AND GENERAL EXPENSES	4,707.
FUNDRAISING EXPENSES	12,104.
TOTAL EXPENSES	161,949.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	179,868.

**Financial Statements** 

Year Ended September 30, 2022

# Arts Alliance<sup>11</sup>





## **Independent Auditor's Report**

Board of Directors Arts Alliance Illinois Chicago, Illinois

#### **Opinion**

We have audited the accompanying financial statements of Arts Alliance Illinois (the "Organization"), a nonprofit organization, which comprise the statement of financial position as of September 30, 2022, and the related statements of activities and change in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of Arts Alliance Illinois as of September 30, 2022, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America ("GAAP").

#### **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Arts Alliance Illinois and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Arts Alliance Illinois's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

#### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or
  error, and design and perform audit procedures responsive to those risks. Such procedures include
  examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Arts Alliance Illinois's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Arts Alliance Illinois's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control–related matters that we identified during the audit.

Wipfli LLP

Lincolnshire, Illinois August 11, 2023

Wippei LLP

# **Statement of Financial Position**

June 30,		2022
Julie 30,		2022
Assets		
Current assets:		
Cash	\$	893,777
Membership and contributions receivable - current		383,915
Prepaid expenses		21,216
Total current assets		1,298,908
Property and equipment:		
Furniture and office equipment		58,022
Less accumulated depreciation		(58,022)
		,
Net property and equipment		
Other assets:		
Security deposit		1,300
Contribution receivable - long term		120,000
Total assets	\$	1,420,208
	<u> </u>	<u> </u>
Liabilities and Net Assets		
Current liabilities:	<b>.</b>	105 700
Accounts payable	\$	165,766
Accrued vacation and other accrued expenses		10,552
Total current liabilities		176,318
Net assets:		
Without donor restrictions:		
Undesignated		504,198
Board designated		200,000
Total without donor restrictions		704,198
With donor restrictions		539,692
Total net assets		1,243,890
Total liabilities and net assets	\$	1,420,208

# Arts Alliance Illinois Statement of Activities and Change in Net Assets

	2022							
		hout Donor	With Donor					
Year Ended September 30,	Re	strictions	Restrictions	Total				
Revenue:								
Member contributions	\$	45,786	\$ - \$	45,786				
Individual contributions	•	242,682	-	242,682				
Foundation contributions		25,865	467,000	492,865				
Government contributions		135,245	180,845	316,090				
Special events revenue, net of expenses of								
\$61,099 in 2022		203,876	-	203,876				
Miscellaneous income		4,941	-	4,941				
Net assets released from restrictions		835,353	(835,353)	-				
Total revenue		1,493,748	(187,508)	1,306,240				
TotalTevenue		1,433,740	(187,308)	1,300,240				
Expenses:								
Program services:								
One State conference		77,904	-	77,904				
Arts education		59,920	-	59,920				
Civic engagement		245,977	-	245,977				
Cultural equity		68,323	-	68,323				
Fiscal Sponsorship		119,869	-	119,869				
AIRF		214,876	-	214,876				
Total program services		786,869	_	786,869				
Total program services		700,003		700,003				
Support services:								
Management and general		209,063	-	209,063				
Fundraising		174,387	-	174,387				
Total support services		383,450	-	383,450				
Total expenses		1,170,319	-	1,170,319				
Change in net assets		323,429	(187,508)	135,921				
Net assets at beginning of year		380,769	727,200	1,107,969				
Net assets at end of year	\$	704,198	\$ 539,692 \$	1,243,890				

# Arts Alliance Illinois Statement of Functional Expenses

						Dr	ogram Se	vices								Support S	Son	vices		
	_	One State		Arts		Civic	Cultur			iscal			То	tal Program	М	anagement	oei v	rices		
Year Ended September 30, 2022		Conference	E	ducation	Er	ngagement	Equity	,	Spo	nsorship		AIRF		Services	a	nd General	Fι	undraising		Total
Salaries and wages	\$	22,819	\$	45,708	\$	104,718	\$ 56,	154	\$	6,991 \$	<b>,</b>	106,072	\$	342,462	\$	99,780	\$	106,669	\$	548,911
Fringe benefits and payroll taxes	-	4,335		8,683		19,894	10,	668		1,328		20,151		65,059		18,956		20,265		104,280
Total salaries and related expenses		27,154		54,391		124,612	66,	822		8,319		126,223		407,521		118,736		126,934		653,191
Bad debt		_		-		-		_		-		-		-		19,500		-		19,500
Dues and subscriptions		-		-		271		-		-		-		271		2,978		249		3,498
Equipment, small purchases and																				
leases		-		-		-		-		-		-		-		1,982		356		2,338
Grants made		50,000		-		-		-		111,250		-		161,250		- - 700		10,000		171,250
Insurance		-		-		-		-		-		-		-		5,786		105		5,786
Miscellaneous		750		750		50	4	-		200		0.252		50		9,565		165		9,780
Occupancy		750		750		1,501	1,	501		300		8,253		13,055		9,453		7,503		30,011
Postage and delivery		-		-		-		-		-		-		-		186		4,999		5,185
Printing and copying Professional and contractual fees		-		400		77		-		-		- 00 400		77		153		6,175		6,405
		-		400		114,552		-		-		80,400		195,352		18,616		14,694		228,662
Special events expenses		-		4 2 4 1		1 017		-		-		-		- 0.750		2.700		61,099		61,099
Staff travel and training		-		4,341		1,917		-		-		-		6,258		3,768		2,791		12,817
Supplies Licenses and fees		-		38		497		-		-		-		535 2,500		4,048		474 47		5,057
Licenses and fees						2,500		-		-				2,500		14,292		47		16,839
Total		77,904		59,920		245,977	68,	323		119,869		214,876		786,869		209,063		235,486	1	1,231,418
Less: Expenses included with		,		,-		-,-	,			,		,		,		,		,		, - , -
revenues on the statement of																				
activities and changes in net assets																				
Special events expenses		-		-		-		-		-		-		_		-		61,099		61,099
Totals	Ś	77,904	\$	59,920	Ś	245,977	\$ 68.	323	\$	119,869 \$	<u>.</u>	214,876	Ś	786,869	Ś	209,063	\$	174.387	<b>\$</b> 1	1,170,319

# **Arts Alliance Illinois Statement of Cash Flows**

Year Ended September 30,	2022
Cash flows from operating activities:	
Change in net assets	\$ 135,921
Adjustments to reconcile change in net assets to net cash provided by operating activities:	
Bad debt	19,500
(Increase) decrease in:	
Membership and contributions receivable	(273,424)
Prepaid expenses	(12,261)
Increase (decrease) in:	
Accounts payable	147,251
Accrued vacation and other accrued expenses	(5,725)
Net cash provided by operating activities	11,262
Net change in cash	11,262
Cash, beginning of year	882,515
	, , , , , , , , , , , , , , , , , , ,
Cash, end of year	\$ 893,777

# Arts Alliance Illinois Notes to Financial Statements

### **Note 1: Summary of Significant Accounting Policies**

#### Organization

Illinois Arts Alliance d/b/a Arts Alliance Illinois was formed and incorporated as an Illinois not-for-profit corporation in 1982 by a small group of artists and arts administrators. Today Arts Alliance Illinois (the "Organization") builds the vitality of communities statewide through service and advocacy, thereby generating resources for the cultural sector and creative industries. Through statewide civic engagement, the Organization positions arts and culture as a source of creative solutions to a broad range of challenges; through arts education, the Organization promotes arts-centered learning and the development of a creative and adaptive workforce; and through cultural equity, the Organization fosters equitable access to and participation in arts and culture, and advances historically neglected or marginalized forms of expression.

The programs shown on the statement of functional expenses at September 30, 2022, include the following programs:

One State Conference includes the biennial One State Together in the Arts, the only statewide conference focused on creative professionals representing a broad range of disciplines.

Arts Education includes activities related to the expansion of student access to daily arts instruction throughout Illinois.

Civic Engagement includes legislative advocacy, action alerts and voter education to empower our stakeholders to be active participants in the policy-making process.

Cultural Equity includes activities to build the capacity of creative workers of color and raising awareness of historically neglected forms of artistic expression.

Fiscal sponsorship includes assisting startup initiatives looking to strengthen the creative sector of Illinois as they establish their own tax exemption.

AIRF (Arts for Illinois Relief Fund) includes relief initiative to support artists and arts organizations severely affected by the COVID-19 pandemic, as well as recovery efforts impacting the arts & culture sector.

#### **Basis of Accounting**

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

# Arts Alliance Illinois Notes to Financial Statements

### Note 1: Summary of Significant Accounting Policies (Continued)

#### **Financial Statement Presentation**

The Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. These classifications are described as follows:

Net Assets Without Donor Restrictions - Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions. Net assets without donor restrictions may otherwise be designated for specific purposes by action of the Board of Directors or may otherwise be limited to contractual agreements with outside parties. Net assets totaling \$200,000 at September 30, 2022, have been set aside by the board of directors to sustain financial operations through an internal source of funds in the unanticipated event of significant unbudgeted increase in operating expenses and/or loss in operating revenues. Since the board-designated fund is not donor-restricted, it is classified in net assets without donor restrictions, and the board has authority to use the funds at its discretion. These funds are being governed according to a board-adopted policy that is reviewed annually.

<u>Net Assets With Donor Restrictions</u> - Net assets subject to donor-imposed stipulations that may or will be met either by the occurrence of an event (purpose) and/or passage of time. When a donor restriction expires, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the statements of activities as net assets released from restriction. At September 30, 2022, the Organization had net assets with donor restrictions of \$539,692. The Organization had no net assets subject to donor-imposed stipulations that the principal be retained and invested in perpetuity at September 30, 2022.

#### **Use of Estimates**

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### **Membership and Contributions Receivable**

The Organization's contributions receivable are comprised primarily of membership dues and grants and allocations committed from various funding agencies for use in the Organization's activities. All contributions receivable at September 30, 2022 is expected to be collected within one year. The Organization has not recorded a provision for doubtful accounts since it is the opinion of management that those receivables are collectible in full.

# **Notes to Financial Statements**

# Note 1: Summary of Significant Accounting Policies (Continued)

#### **Property and Equipment**

Property and equipment are carried at cost if purchased and fair value if donated. Assets are depreciated over five years estimated economic useful live, using straight line method. Gains and losses from the sale or disposition of property are included in income. Maintenance and repairs are charged to expense when incurred. Property and equipment purchased at the cost in excess of \$500 is capitalized. The fair value of donated fixed assets used by the Organization is similarly capitalized.

#### **Impairment of Long-Lived Assets**

Property and equipment are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. If the sum of the expected undiscounted cash flows is less than the carrying value of the related asset or group of assets, a loss is recognized for the difference between the fair value and carrying value of the asset or group of assets. Such evaluations necessarily involve judgment. The Organization evaluated the ongoing value of its long-lived assets at September 30, 2022. There were no impairments of long-lived assets identified.

#### **Contributed Services**

Certain donated services are recognized as in-kind donations in the statement of activities and change in net assets. The value of these services is determined based on estimated fair value. There were no donated services recognize as in-kind donations during the year ended September 30, 2022.

Other volunteer services are not reflected in the financial statements because the services do not meet the requirements for recognition in the financial statements under GAAP.

#### **Functional Expenses**

The costs of providing programs and supporting services have been reported on a functional basis in the statement of activities and change in net assets. Accordingly, costs have been allocated among the programs and supporting services benefited, based on either a direct functional method, when applicable, or on a reasonable basis that is consistently applied. Salaries and wages, and fringe benefits and payroll taxes are allocated based on time and effort. Occupancy expenses are allocated based on square footage.

#### **Revenue Recognition**

#### Contributions

Contributions are recognized as revenue when they are received or unconditionally promised. Contributions are recorded as without donor restrictions or with donor restrictions, depending on the existence and nature of any donor restrictions. Contributions with donor restrictions where restrictions are met in the same year as received are reported as without donor restrictions.

# **Notes to Financial Statements**

### Note 1: Summary of Significant Accounting Policies (Continued)

#### Revenue Recognition (Continued)

Conditional contributions are recognized as revenue when the barriers to entitlement are overcome and either a right of return of assets transferred or a right of release of a promisor's obligation to transfer assets is removed. Assets received for which the condition has not been satisfied are recorded as a refundable advance liability.

#### <u>Grants</u>

Grants are either recorded as contributions or exchange transactions based on criteria contained in the grant award.

**Grant Awards That Are Contributions** - Grant awards that are contributions are evaluated for conditions and recognized as revenue when conditions in the award are satisfied. Unconditional awards are recognized as revenue when the award is received. Amounts received in which conditions have not been met are reported as a refundable advance liability.

**Grant Awards That Are Exchange Transactions** - Exchange transactions are those in which the resource provider or grantor receives a commensurate value in exchange for goods or services transferred. Revenue is recognized when control of the promised goods or services is transferred to the customer (grantor) in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. Amounts received in excess of recognized revenue are reflected as a contract liability.

#### Special Event Revenues

The Organization records benefit revenues equal to the fair value of direct benefits provided to donors for the exchange portion, and contribution income for the excess received. The Organization typically receives payment for events in advance. Benefit revenues received in advance are recorded as deferred revenue and recognized at the point in time when the event occurs.

#### **Income Taxes**

The Organization is a not-for-profit that is exempt from income taxes under Section 501(c) (3) of the Internal Revenue Code. Consequently, no provision for income taxes appears in these financial statements.

The Organization files U.S. federal and Illinois state informational tax returns. The federal and state informational tax returns of the Organization can be subject to examinations by tax authorities, generally for three years after they were filed.

# **Notes to Financial Statements**

# Note 1: Summary of Significant Accounting Policies (Continued)

### **Recently Issued Accounting Standards**

In February 2016, the FASB issued ASU No. 2016-02, *Leases* (Topic 842). The amendments in this ASU revise the accounting related to lessee accounting. Under the new guidance, lessees will be required to recognize a lease liability and a right-of-use asset for substantially all leases with lease terms in excess of 12 months. The new lease guidance also simplifies the accounting for sale and leaseback transactions primarily because lessees must recognize lease assets and lease liabilities. The amendments in this ASU are effective for fiscal years beginning after December 15, 2021, and are to be applied through a modified retrospective transition approach for leases existing at, or entered into after, the beginning of the earliest comparative period presented in the financial statements. Early adoption is permitted. The Organization continues to evaluate the effect that the implementation of this ASU will have on its financial statements and related disclosures.

#### **Subsequent Events**

Management has evaluated subsequent events through August 11, 2023, the date the financial statements were available to be issued.

### Note 2: Liquidity and Availability of Financial Resources

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following:

Year Ended September 30,	2022
Cash Membership and contributions receivable	\$ 893,777 383,915
Total	1,277,692
Less: Donor restricted net assets for programs	318,025
Total financial assets available for general expenditures within one year	\$ 959,667

The Organization has a goal to maintain financial assets to meet 90 days of normal operating expenses. The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. In addition, as part of its liquidity management, the Organization plans to invest cash in excess of daily requirements in various short-term investments. In the event of unanticipated liquidity need, the Organization can draw up to \$50,000 on its available line of credit. Total financial assets available for general expenditures include \$200,000 of Board designated reserve.

# **Notes to Financial Statements**

#### **Note 3: Line of Credit**

The Organization has a \$50,000 line of credit with Illinois Facilities Fund (IFF) that expires on November 1, 2024. The line of credit is collateralized by substantially all the Organizations assets and bears 6% interest rate. As of September 30, 2022, there is no outstanding balance on the line of credit and there were no borrowings during the year ended September 30, 2022.

#### **Note 4: Net Assets with Donor Restrictions**

Net assets with donor restrictions are available for the following purposes:

September 30,	2022
Time restrictions	\$ 101,667
Purpose restrictions:	
Cultural Equity	194,775
Civic Engagement	6,250
Arts and Vaccination	210,000
Illinois Creative Workforce Activation	20,000
Informing and Enabling Illinois' Arts Ecosystem	5,000
Professional development	2,000
Total purpose restrictions	438,025
Total net assets with donor restrictions	\$ 539,692

### **Note 5: Operating Leases**

The Organization leases office space under a lease agreement classified as an operating lease that expires on December 31, 2026. In addition to base rent, the Organization pays its proportionate share of common area maintenance expenses and real estate taxes.

Rent expense under the lease was \$20,729 for the year ended September 30, 2022. The proportionate share of common area maintenance expenses and real estate taxes was \$9,282 for the year ended September 30, 2022.

# **Notes to Financial Statements**

# Note 5: Operating Leases (Continued)

The future minimum rental payments under the operating lease are as follows:

Year Ended September 30,	Am	ount
2023	\$	16,871
2024		17,377
2025		17,899
2026		18,436
2027		4,643
Total	\$	75,226

#### **Note 6: Retirement Plan**

The Organization has a 403(b) defined contribution retirement plan covering substantially all employees. The plan allows employee and employer contributions and the Organization will match employee contributions up to three percent of compensation. Employer contributions were \$11,724 for the year ended September 30, 2022.

#### Note 7: Concentration of Credit Risk

The Organization maintains cash balances at a financial institution where the accounts are insured by the Federal Deposit Insurance Corporation (FDIC) for up to \$250,000. At certain times during the year, cash balances may be in excess of FDIC insured limits. The Organization has not experienced any losses in such accounts, and management believes it is not exposed to any significant credit risk related to these accounts throughout the year.

# **Note 8: Fiscal Sponsorship Agreement**

The Organization acted as a fiscal sponsor for Andalusia LLC, management company for 2112, ("Program") during 2022. The Organization retains a fiscal sponsorship fee of 10% of funds received on behalf of Andalusia LLC.

The grant expense to recipient organization under the sponsorship agreements included \$111,250 for the year ended September 30, 2022.