

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
Illinois Action for Children

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
4753 North Broadway 1200

City or town, state or province, country, and ZIP or foreign postal code
Chicago, IL 60640

F Name and address of principal officer
Maria Whelan
4753 North Broadway 1200
Chicago, IL 60640

D Employer identification number
36-2712912

E Telephone number
(312) 823-1100

G Gross receipts \$ 49,053,853

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

- I** Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527
- J** Website: ▶ www.actforchildren.org
- K** Form of organization Corporation Trust Association Other ▶

L Year of formation 1971 **M** State of legal domicile IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
Illinois Action for Children's outreach and work with low-income, hard-to-reach families has led us to research and implement highly effective and innovative programs and advocacy to ensure that early care and education, and other opportunities, are accessible to the children most in need

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	16
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	622
6 Total number of volunteers (estimate if necessary)	6	16
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	8,196,867	7,987,163
9 Program service revenue (Part VIII, line 2g)	39,026,471	40,794,606
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	146,268	185,364
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-37,054	-23,059
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	47,332,552	48,944,074
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,977,330	5,942,848
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	30,783,715	31,559,783
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 109,771		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,546,782	11,526,941
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	47,307,827	49,029,572
19 Revenue less expenses Subtract line 18 from line 12	24,725	-85,498
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	11,659,680	11,056,991
21 Total liabilities (Part X, line 26)	7,100,926	6,638,910
22 Net assets or fund balances Subtract line 21 from line 20	4,558,754	4,418,081

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.

Sign Here

Signature of officer: _____ Date: 2020-06-12
Jacqueline Zanders Chief Financial Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00756195
Firm's name ▶ CROWE LLP	Firm's EIN ▶ 35-0921680		Phone no (312) 899-7000	
Firm's address ▶ 225 West Wacker Drive Suite 2600 Chicago, IL 606061224				

Part III 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

Illinois Action for Children is a catalyst for organizing, developing and supporting strong families and powerful communities where children matter most (continued in Schedule O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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 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 \$ 19,335,595 including grants of \$ 5,942,848) (Revenue \$ 19,673,682)

See Additional Data

4b (Code) (Expenses \$ 17,533,936 including grants of \$ 0) (Revenue \$ 19,431,398)

See Additional Data

4c (Code) (Expenses \$ 7,583,637 including grants of \$ 0) (Revenue \$ 1,505,474)

See Additional Data

(Code) (Expenses \$ 630,832 including grants of \$ 0) (Revenue \$ 222,471)

THE PUBLIC POLICY AND ADVOCACY PROGRAM - ILLINOIS ACTION FOR CHILDREN'S PUBLIC POLICY & ADVOCACY PROGRAM ORGANIZES MORE THAN 4,600 ADVOCATES STATEWIDE TO CONNECT WITH THEIR ELECTED OFFICIALS AND URGE THEM TO MAKE THE NEEDS OF CHILDREN AND FAMILIES, INCLUDING EXPANDED ACCESS TO CHILD CARE AND EARLY EDUCATION, A PRIORITY IN ILLINOIS. ADDITIONALLY, ILLINOIS ACTION FOR CHILDREN'S EARLY LEARNING PROGRAMS MAKE EARLY EDUCATION AVAILABLE TO YOUNG CHILDREN WHILE IN CHILD CARE SO THEY WILL BE READY TO SUCCEED WHEN THEY START SCHOOL. THIS WORK HAS INCLUDED CREATING A NATIONAL MODEL FOR PROVIDING PRESCHOOL TO CHILDREN IN HOME-BASED CHILD CARE, AS WELL AS BRINGING CERTIFIED TEACHERS, CHILD DEVELOPMENT EXPERTS, NUTRITION, AND LITERACY TRAINING AND BOOKS INTO THESE CHILD CARE HOMES

4d Other program services (Describe in Schedule O)
(Expenses \$ 630,832 including grants of \$) (Revenue \$ 222,471)

4e Total program service expenses ► 45,084,000

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		24a No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		24c
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		25a No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		25b No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		26 No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		27 No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		28a No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		28b No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		28c No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		29 No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		30 No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		31 No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		32 No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		33 No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		34 No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a No
b	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		35b
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		36 No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		37 No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 Yes	

Part 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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 93	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	

<p>2a 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</p>	2a	622		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	No
<p>b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O</p>			3b	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>			4a	No
<p>b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>				
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a	No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b	No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c	
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>			6a	No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>			7a	Yes
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b	Yes
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c	Yes
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d			
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e	No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f	No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g	
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h	
8 Sponsoring organizations maintaining donor advised funds.				
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8	
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a	
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b	
10 Section 501(c)(7) organizations. Enter				
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a			
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b			
11 Section 501(c)(12) organizations. Enter				
<p>a Gross income from members or shareholders</p>	11a			
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>			13a	
<p>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</p>	13b			
<p>c Enter the amount of reserves on hand</p>	13c			
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a	No
<p>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</p>			14b	
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>			15	No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>			16	No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply; 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

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 instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Monica Moss Chair of the Board	1 0	X		X				0	0	0
(2) Celena Roldan Vice Chair of the Board	1 0	X		X				0	0	0
(3) Joel Carp Treasurer of the Board	1 0	X		X				0	0	0
(4) Larry Mages Secretary of the Board	1 0	X		X				0	0	0
(5) Richard Sewell Past Chair of the Board	1 0	X		X				0	0	0
(6) Jennifer Farrington Director	1 0	X						0	0	0
(7) Judith Walker Kendrick Director	1 0	X						0	0	0
(8) Micki Chulick Director	1 0	X						0	0	0
(9) Laurie Walker Director	1 0	X						0	0	0
(10) Michelle Saddler Director	1 0	X						0	0	0
(11) Beth Brooks Director	1 0	X						0	0	0
(12) Marvin Cohen Director	1 0	X						0	0	0
(13) LaChar Crayton Director	1 0	X						0	0	0
(14) Radiance Walker Director	1 0	X						0	0	0
(15) Tobeka Green Director	1 0	X						0	0	0
(16) Andrew Rosenband Director	1 0	X						0	0	0
(17) Jacqueline Zanders Chief Financial Officer	40 0			X				150,736	0	34,909

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Maria Whelan President/CEO	40 0			X				301,181	0	30,768
(19) Julia Gray Chief Operating Officer	40 0			X				221,309	0	23,177
(20) April Janney Senior Vice President, Programs	40 0				X			184,196	0	19,320
(21) James Alexander Senior Vice President, Strategic Planning and Execution	40 0					X		196,762	0	30,597
(22) Sandra Matthews VP Organizational Advancement/External Relations	40 0					X		166,104	0	28,253
(23) Bryan Stokes VP of Early Learning Head Start	40 0					X		119,694	0	13,594
(24) Jeffrey Gawel Chief Information Officer	40 0					X		130,610	0	15,851
(25) Theresa Hawley Senior VP of Policy and Innovation	40 0					X		190,746	0	9,851
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)								1,661,338	0	206,320

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 11

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
GOOD SHEPHERD CENTER 17314 S KEDZIE HAZEL CREST, IL 60429	CHILD CARE RESOURCE	339,961
CENTERS FOR NEW HORIZONS 4150 S KING DRIVE CHICAGO, IL 60653	CHILD CARE RESOURCE	206,517
CHILDREN'S HOME AND AID 125 S WACKER DRIVE FL 14 CHICAGO, IL 60606	CHILD CARE RESOURCE	179,741
CAROLE ROBERTSON CENTER 2020 W ROOSEVELT ROAD CHICAGO, IL 60608	CHILD CARE RESOURCE	173,622

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 4

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 101,167			
	b Membership dues	1b			
	c Fundraising events	1c 233,021			
	d Related organizations	1d			
	e Government grants (contributions)	1e 6,681,053			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 971,922			
	g Noncash contributions included in lines 1a - 1f \$ _____				
	h Total. Add lines 1a-1f		7,987,163		

Program Service Revenue			Business Code				
	2a GOVERNMENT CONTRACTS		900099	40,610,554	40,610,554		
b CORPORATE CONTRACTS		900099	137,050	137,050			
c CONFERENCES & FORUMS		900099	41,814	41,814			
d SERVICE FEES		900099	5,188	5,188			
e _____							
f All other program service revenue			0	0	0	0	0
g Total. Add lines 2a-2f			40,794,606				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			185,364			185,364
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)	0	0				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses						
	c Gain or (loss)	0	0				
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ 233,021 of contributions reported on line 1c) See Part IV, line 18	a	48,301				
	b Less direct expenses	b	109,779				
	c Net income or (loss) from fundraising events			-61,478			-61,478
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a MISCELLANEOUS INCOME	900099	38,419	38,419				
b _____							
c _____							
d All other revenue		0	0	0	0	0	
e Total. Add lines 11a-11d			38,419				
12 Total revenue. See Instructions			48,944,074	40,833,025	0	123,886	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,296,065	1,296,065		
2 Grants and other assistance to domestic individuals See Part IV, line 22	4,646,783	4,646,783		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	965,596	218,504	747,092	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	22,908,843	21,903,386	969,226	36,231
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	464,523	413,977	49,756	790
9 Other employee benefits	5,241,695	4,993,998	241,146	6,551
10 Payroll taxes	1,979,126	1,872,589	103,560	2,977
11 Fees for services (non-employees)				
a Management				
b Legal	40,237		40,237	
c Accounting	80,067		80,067	
d Lobbying				
e 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 Schedule O)	3,195,099	2,574,787	604,562	15,750
12 Advertising and promotion	65,147	58,987	6,160	0
13 Office expenses	1,780,744	1,624,699	148,571	7,474
14 Information technology				
15 Royalties				
16 Occupancy	3,951,894	3,823,962	124,716	3,216
17 Travel	258,469	235,286	22,317	866
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	576,085	383,046	161,131	31,908
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	187,860	1,862	185,998	
23 Insurance	59,239	57,527	1,662	50
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Equipment Rental	794,456	615,193	178,518	745
b Dues & Subscriptions	53,280	29,560	21,909	1,811
c Equipment Purchase	484,364	333,789	149,173	1,402
d				
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	49,029,572	45,084,000	3,835,801	109,771
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	62,820	1	1,091,215
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	8,103,090	3	6,464,427
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	103,615	9	32,635
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	5,958,637		
	b Less accumulated depreciation	5,420,573		
	11 Investments—publicly traded securities	2,639,297	11	2,738,042
	12 Investments—other securities See Part IV, line 11	0	12	
	13 Investments—program-related See Part IV, line 11	0	13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	173,888	15	192,608
16 Total assets. Add lines 1 through 15 (must equal line 34)	11,659,680	16	11,056,991	
Liabilities	17 Accounts payable and accrued expenses	4,926,298	17	4,906,185
	18 Grants payable		18	
	19 Deferred revenue	82,519	19	127,302
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	0
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	1,750,000	24	1,605,423
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	342,109	25	0
	26 Total liabilities. Add lines 17 through 25	7,100,926	26	6,638,910
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,558,754	27	4,418,081
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	4,558,754	33	4,418,081	
34 Total liabilities and net assets/fund balances	11,659,680	34	11,056,991	

Part 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	48,944,074
2	Total expenses (must equal Part IX, column (A), line 25)	2	49,029,572
3	Revenue less expenses Subtract line 2 from line 1	3	-85,498
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,558,754
5	Net unrealized gains (losses) on investments	5	-55,175
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,418,081

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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?
 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
 Separate basis Consolidated basis Both consolidated and separate basis
- c** 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?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 36-2712912

Name: Illinois Action for Children

Form 990 (2018)

Form 990, Part III, Line 4a:

PROVIDER SERVICES/PROVIDER RESOURCES - ILLINOIS ACTION FOR CHILDREN WORKS WITH LICENSED AND LICENSE-EXEMPT CHILD CARE PROVIDERS TO SUPPORT THEM THROUGH EDUCATIONAL AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES, AS WELL AS TECHNICAL ASSISTANCE AND OTHER VALUABLE SUPPORTS THAT HELP TO ENHANCE THE CARE THEY PROVIDE ILLINOIS ACTION FOR CHILDREN AND ITS COMMUNITY PARTNERS HAD MORE THAN 10,500 PARTICIPANTS IN NEARLY 700 TRAININGS AND WORKSHOPS DURING THE FISCAL YEAR ENDED JUNE 30, 2019 OUR EARLY LEARNING PROGRAMS MAKE EARLY EDUCATION AVAILABLE TO YOUNG CHILDREN SO THAT THEY WILL BE READY TO SUCCEED WHEN THEY START SCHOOL OUR PROGRAMS HAVE CREATED A NATIONAL MODEL FOR PROVIDING PRESCHOOL TO CHILDREN IN HOME CHILD CARE WHO WOULD OTHERWISE NOT HAVE ACCESS TO EARLY EDUCATION, AND FOR TRAINING PROVIDERS TO BECOME A CHILD'S FIRST TEACHER

Form 990, Part III, Line 4b:

CERTIFICATE/FAMILY RESOURCES - ILLINOIS ACTION FOR CHILDREN ADMINISTERS THE CHILD CARE ASSISTANCE PROGRAM (CCAP) FOR THE ILLINOIS DEPARTMENT OF HUMAN SERVICES (IDHS) IN COOK COUNTY. CCAP HELPS LOW-INCOME FAMILIES PAY FOR CHILD CARE THAT ALLOWS PARENTS TO WORK OR GO TO SCHOOL. DURING THE FISCAL YEAR ENDED JUNE 30, 2019, MORE THAN 57,400 FAMILIES AND NEARLY 102,000 CHILDREN WERE SERVED BY THE CCAP IN COOK COUNTY.

Form 990, Part III, Line 4c:

PARENT SERVICES/CHILD CARE RESOURCE AND REFERRAL SERVICES - AS THE CHILD CARE RESOURCE AND REFERRAL AGENCY FOR COOK COUNTY, ILLINOIS ACTION FOR CHILDREN CONNECTS CHILDREN AND FAMILIES WITH VITAL RESOURCES LIKE CHILD CARE REFERRALS, HEALTH SERVICES, AND COMMUNITY SUPPORT IN FISCAL YEAR ENDED JUNE 30, 2019, ALMOST 14,000 CHILDREN AND FAMILIES RECEIVED REFERRALS WHILE THOUSANDS MORE UNDER-SERVED CHILDREN ALSO HAD ACCESS TO LITERACY, MENTAL HEALTH, AND NUTRITION RESOURCES AS A RESULT OF ILLINOIS ACTION FOR CHILDREN'S WORK ILLINOIS ACTION FOR CHILDREN WAS IN THE 4TH YEAR OF A 5 YEAR HEAD START GRANT FROM THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES (USDHHS) DURING FISCAL YEAR 2019 ILLINOIS ACTION FOR CHILDREN'S HEAD START AND EARLY HEAD START LOCATIONS UTILIZE EVIDENCE-BASED APPROACHES TO SERVING LOW-INCOME CHILDREN AND FAMILIES IN A RESPECTFUL, UNDERSTANDING PARTNERSHIP WITH THEM CHILDREN RECEIVE SERVICES THAT PROMOTE CHILD DEVELOPMENT ACROSS MANY AREAS IN FISCAL YEAR 2019 WE WERE ABLE TO SERVE 876 FAMILIES

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Illinois Action for Children

Employer identification number

36-2712912

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 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 _____
- 5 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)**.
- 7 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)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 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 university _____
- 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2017 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►
- b 33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►
- 17a 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ►
- b 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ►
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	2,522,782	7,088,690	6,642,788	8,196,867	7,987,163	32,438,290
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	36,749,872	35,218,848	35,291,207	39,046,406	40,833,025	187,139,358
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	39,272,654	42,307,538	41,933,995	47,243,273	48,820,188	219,577,648
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6)						219,577,648

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	39,272,654	42,307,538	41,933,995	47,243,273	48,820,188	219,577,648
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	168,491	141,431	138,042	146,268	185,364	779,596
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	168,491	141,431	138,042	146,268	185,364	779,596
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	30,238	52,979	22,038	36,978	48,301	190,534
13 Total support. (Add lines 9, 10c, 11, and 12)	39,471,383	42,501,948	42,094,075	47,426,519	49,053,853	220,547,778
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	99.56 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	99.59 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	0.35 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	0.33 %
19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
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.		
	4b		
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.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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).		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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 .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
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 .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in 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 .		
	9c		
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.		
	10a		
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.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section 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)? <i>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).</i>		

Section 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
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	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part III, Line 12 Other Income	DESCRIPTION - GROSS RECEIPTS FROM FUNDRAISING EVENTS, COLUMN A - 30238 0, COLUMN B - 52979 0, COLUMN C - 22038 0, COLUMN D - 36978 0, COLUMN E - 48301 0, COLUMN F - 190534 0,

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
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.

OMB No 1545-0047

2018

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Illinois Action for Children	Employer identification number 36-2712912
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from 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-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	42,331	0
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0	0
c	Total lobbying expenditures (add lines 1a and 1b)	42,331	0
d	Other exempt purpose expenditures	45,045,027	0
e	Total exempt purpose expenditures (add lines 1c and 1d)	45,087,358	0
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	0
If the amount on line 1e, column (a) or (b) is:		The lobbying nontaxable amount is:	
Not over \$500,000		20% of the amount on line 1e	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000		\$1,000,000	
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	0
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	0
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	0
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	74,100	53,527	80,122	42,331	250,080
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	74,100	53,527	80,122	42,331	250,080

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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
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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 the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
Illinois Action for Children

Employer identification number
36-2712912

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an 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 qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,639,297	2,456,477	2,237,310	2,265,036	2,283,081
b Contributions		0	0	0	0
c Net investment earnings, gains, and losses	98,745	182,820	219,167	-27,726	-18,045
d Grants or scholarships		0	0	0	0
e Other expenditures for facilities and programs		0	0	0	0
f Administrative expenses		0	0	0	0
g End of year balance	2,738,042	2,639,297	2,456,477	2,237,310	2,265,036

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 100 %
 - b** Permanent endowment ▶ 0 %
 - c** Temporarily restricted endowment ▶ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|-----|----|
| (i) unrelated organizations | No | No |
| (ii) related organizations | No | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		5,958,637	5,420,573	538,064
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				538,064

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) 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 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. Federal income taxes	
Cash Overdraft	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	0

2. 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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	48,888,899
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		-55,175
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		0
e	Add lines 2a through 2d		2e	-55,175
3	Subtract line 2e from line 1		3	48,944,074
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		0
c	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	48,944,074

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	49,029,572
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		0
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	49,029,572
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		0
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	49,029,572

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 36-2712912

Name: Illinois Action for Children

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	The Sylvia Cotton Fund is an endowment fund established within Illinois Action for Children to help insure the continuity of its programs and objectives. It is a Board-restricted fund that is intended to provide resources to fulfill the organization's mission. Generally, the fund may be used to support public policy and advocacy or other programs that align with the organization's mission, including new initiatives.

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	<p>The Corporation is a not-for-profit Corporation exempt from federal income tax under Internal Revenue Code Section 501(c)(3). Accordingly, no provision for income taxes has been made. Also, the Corporation was determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Code. The Corporation follows guidance issued by the Financial Accounting Standards Board with respect to accounting for uncertainty in income taxes. The Corporation is generally not subject to federal or state income taxes except for certain income derived from unrelated business activities as defined by the IRC. Any such taxes resulting from unrelated business activities are insignificant to the operations of the Corporation. U.S. GAAP prescribes recognition thresholds and measurement attributes for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Tax benefits will be recognized only if the tax position is more-likely-than-not sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized will be the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the more-likely-than-not test, no tax benefit will be recorded. Management has concluded that they are unaware of any tax benefits or liabilities to be recognized at June 30, 2019. The Corporation is no longer subject to examination by U.S. federal taxing authorities or state taxing authorities for years before 2015. The Corporation does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months. The Corporation would recognize interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The Corporation has no amounts accrued for interest or penalties as of June 30, 2019.</p>

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2018

Open to Public Inspection

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization Illinois Action for Children

Employer identification number

36-2712912

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events. 2a Did the organization have a written or oral agreement with any individual... 2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		Annual Dinner (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	233,021			233,021
	2 Less Contributions	184,720			184,720
	3 Gross income (line 1 minus line 2)	48,301	0	0	48,301
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	18,997			18,997
	7 Food and beverages	12,808			12,808
	8 Entertainment				
	9 Other direct expenses	77,974			77,974
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				109,779
11 Net income summary Subtract line 10 from line 3, column (d) ▶				-61,478	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in

a	The organization's facility	%
b	An outside facility	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶
 Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶
 Address ▶

16 Gaming manager information

Name ▶
 Gaming manager compensation ▶ \$
 Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

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

Schedule I (Form 990)

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Illinois Action for Children

Employer identification number 36-2712912

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 27
3 Enter total number of other organizations listed in the line 1 table. 101

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Quality Counts Mini-Grants	373	4,653	28,874	FMV	Educational Supplies
(2) Provider Meal Reimbursement	622	4,415,226	0	N/A	N/A
(3) CPR & FIRST AID ASSISTANCE FUNDS	394	41,018	157,012	FMV	EDUCATIONAL TRAINING
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	The organization monitors the use of grants, reimbursements, and scholarships paid to ensure they are used for their intended purpose. IAFC does so by conducting site visits and reviewing records and documentation supporting early care and education expenses prior to issuing reimbursements.

Additional Data

Software ID: 18007697
Software Version: 2018v3.1
EIN: 36-2712912
Name: Illinois Action for Children

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Advance Preschool 2320 W Higgins Rd Hoffman Estates, IL 60169	36-4231347			7,865	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Bode Preschool & Childcare 946 Bode Rd Schaumburg, IL 60194	36-4121798			7,998	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kiddie Garden Day Care 9130 W Golf Rd Niles, IL 60714	36-4173819			5,512	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Picket Fence 36 Conti Parkway Elmwood Park, IL 60707	36-3881860			5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Picket Fence 2624 Oak St River Grove, IL 60171	47-2093679			5,292	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Precious Angels 1833 W Golf Rd Schuamburg, IL 60194	26-0686153	501(c)(3)		5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Small World Learning Center 9750 W Grand Franklin Park, IL 60131	36-3333184			7,620	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Honey Bear Day Care Center 2359 N Mannheim Rd Melrose Park, IL 60164	45-5136578			5,474	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lake Shore Schools 5611 N Clark St Chicago, IL 60660	36-3333009			7,849	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Lake Shore Schools 6759 N Greenview Chicago, IL 60626	36-3333009			7,591	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Tiny Giants Uptown Early Learning 4646 N Clark Chicago, IL 60640	46-5243067			7,667	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Kiddie Scholars Too 22323 Thomas Dr Richton Park, IL 60471	36-4799226			5,173	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare Learning Ctr 18 S Central Ave Matteson, IL 60443	47-4478313			5,076	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Mari's Bumble Bee Academy II 17750 Chicago Ave Lansing, IL 60438	46-4516767			7,663	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nazarene Nursery 699 W 8th St Chicago Heights, IL 60411	36-2735511			7,764	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Kiddie Scholars 1031 Kostner Ave Matteson, IL 60443	61-1514635			7,693	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Steps to the Future II 346 W Sibley Blvd Dolton, IL 60419	26-1091028			5,722	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
M&M Child Care Ctr 450 W 194th St Glenwood, IL 60425	36-4330466			5,282	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Teddy Bear 7319 W 87th St Bridgeview, IL 60455	36-3681191			5,320	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Eagle Academy Christian School 2750 Glenwood Lansing Rd Lansing, IL 60438	46-3145141			5,095	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Little Scholars Learning Institute 297 E Glenwood Lansing Rd Glenwood, IL 60425	46-2028991			7,873	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Nurturing Developmental & Learning Ctr 2530 E State St Burnham, IL 60633	32-0013898	501(c)(3)		7,576	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Academy for Children 2350 Bernice Rd Lansing, IL 60438	36-4158598	501(c)(3)		8,000	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Little Hearts Learning Academy 17542 Crawford Ave Country Club Hills, IL 60478	30-0546592			6,587	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare Learning Ctr 14632 John Humphrey Dr Orland Park, IL 60462	47-4478313			7,762	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Happy Kids Preschool 5815 W Irving Park Rd Chicago, IL 60634	42-1754108			5,549	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Schaumburg Child Development Ctr 1122 Westover Lane Schaumburg, IL 60193	81-4122536			5,158	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Smart from the Start 4135 W Armitage Chicago, IL 60639	45-3158478			7,458	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Tiny Giants North Ctr 3911 N Western Ave Chicago, IL 60618	46-3800110			5,271	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
River Forest Community Ctr Oak Park River Forest High School 201 N Scoville Ave Oak Park, IL 60302	36-2890404	501(c)(3)		5,292	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A Dayschool #2 865 N Sterling Ave Palatine, IL 60067	36-4156080			5,218	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Breakthrough Beginners 3219 W Carroll Chicago, IL 60624	36-3810926	501(c)(3)		5,060	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jennifer's Kids Learning Ctr 1624 W Wise Rd Schaumburg, IL 60193	36-4134144			7,655	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 925 E Nerge Rd Roselle, IL 60172	47-4478313			7,700	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare 150 S Wildflower Ln Schaumburg, IL 60173	47-4478313			6,931	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 838 N Quentin Rd Palatine, IL 60067	47-4478313			5,419	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare 780 S Schoenbeck Rd Wheeling, IL 60090	47-4478313			7,669	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 2601 N Quentin Rd Schaumburg, IL 60179	47-4478313			7,840	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare 1653 N Baldwin Rd Palatine, IL 60074	47-4478313			7,455	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 1275 Jones Rd Hoffman Estates, IL 60169	47-4478313			7,156	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare 5100 Sedge Blvd Hoffman Estates, IL 60192	47-4478313			6,818	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 800 S Arlington Heights Rd Elk Grove Village, IL 60007	47-4478313			7,362	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Learning Tree 845 Summit St Elgin, IL 60120	36-3524320			7,877	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Swift Child Care 8260 Elmwood Skokie, IL 60077	36-4285673			7,856	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Swift Child Care 8064 Lincoln Ave Skokie, IL 60077	36-4285673			7,773	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Tot Learning Center 3701 Howard St Skokie, IL 60076	36-6006104	501(c)(3)		7,856	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Small World Learning Center 1827 N 25th Ave Melrose Park, IL 60160	36-3333184			5,141	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Busy Bees Child Dev Ctr 2351 B S Wentworth Ave Chicago, IL 60616	45-5461099			7,561	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Hillside Montessori 4600 Frontage Rd Hillside, IL 60162	36-4174214			7,626	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Smart Learning Center 2980 S Archer Ave Chicago, IL 60608	27-4337898		1,049	4,451	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Teddy Bear 3 6401 S Pulaski Chicago, IL 60629	36-2793999			5,278	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Erie Neighborhood House 1347 W Erie Chicago, IL 60647	36-3043253	501(c)(3)		5,317	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Little Leaders of Tomorrow 301 N Mayfield Ave Chicago, IL 60644	74-3083758	501(c)(3)		5,411	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Near the Pier Development Ctr 540 N Lake Shore Dr Chicago, IL 60611	36-4119305			5,101	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Taylor Tots Daycare 1417 W Taylor St Chicago, IL 60607	46-4152834			7,893	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Children International Academy 5858 W Roosevelt Chicago, IL 60644	87-0746094			7,727	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Concordia Place 3855 N Seeley Chicago, IL 60618	32-0033719	501(c)(3)	4,544	801	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Kidwatch Plus 3330 N Lockwood Ave Chicago, IL 60641	36-3658785	501(c)(3)	6,986	999	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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La Escuelita Numero Dos 3001 W Diversey Ave Chicago, IL 60647	27-3038185			7,808	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Little Einstein's Daycare 3640-44 W Wrightwood Ave Chicago, IL 60647	13-4322828			5,494	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Lydia Learn & Care 4300 W Irving Park Chicago, IL 60641	36-1412810	501(c)(3)		5,050	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Puerto Rican Cultural Ctr 1345 N Rockwell St Chicago, IL 60622	23-7347778	501(c)(3)		5,146	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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UIC Children's Ctr 1919 W Taylor St M/C 525 Chicago, IL 60612	37-6000511	501(c)(3)		5,436	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
West Austin 4920 W Madison Chicago, IL 60644	20-5984602	501(c)(3)		7,336	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Concordia Place 3300 N Whipple Chicago, IL 60618	32-0033719	501(c)(3)	7,941		N/A	N/A	QUALITY IMPROVEMENTS
State of IL Child Development Ctr 160 N LaSalle N201 Chicago, IL 60601	36-4315102		7,964		N/A	N/A	QUALITY IMPROVEMENTS

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

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Bright Start Child Care & Preschool 1800 Ridge Rd Homewood, IL 60430	47-0916711			7,732	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Children of America 16124 S LaGrange Rd Orland Park, IL 60467	80-0764471			7,636	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Children of America 19814 S Kedzie Ave Flossmoor, IL 60422	26-4288314			7,387	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
God's Little Sugars Nursery 30 E 159th St Unit D Harvey, IL 60426	36-4414475			5,448	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KinderCare 9460 179th St Tinley Park, IL 60477	47-4478313			7,782	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 15700 Central Ave Oak Forest, IL 60452	47-4478313			6,791	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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KinderCare 7965 175th St Tinley Park, IL 60477	47-4478313			7,038	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 17025 S Park Ave South Holland, IL 60473	47-4478313			7,144	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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KinderCare 14301 Pinewood Dr Orland Park, IL 60467	47-4478313			7,894	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare 9906 S Roberts Rd Palos Hills, IL 60465	47-4478313			7,997	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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KinderCare 454 Burnham Ave Calumet City, IL 60409	47-4478313			6,982	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Nurturing Dev & Learning Academy 525 Wentworth Ave Calumet City, IL 60409	20-5696831			7,973	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Nurturing Dev & Learning Academy 835 E Sibley South Holland, IL 60473	27-1247727			7,073	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Penny Lane School 4527 Southwest Highway Oak Lawn, IL 60453	36-3864693			7,906	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Penny Lane School 10255 S Ridgeland Ave Chicago Ridge, IL 60415	36-3864693			7,899	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Safari Life Child Care & Learning Ctr 1935 Glenwood Dyer Rd Lynwood, IL 60411	42-1762446	501(c)(3)		8,000	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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A Step Up Career Academy 2745 Bernice Rd Lansing, IL 60438	42-1737589			7,780	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Successful Beginnings Learning Ctr 105 E 142nd St Riverdale, IL 60827	36-4358314			5,332	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Williams Christian Daycare 4300 180th St Country Club Hills, IL 60478	01-0894237	501(c)(3)		8,050	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Brenda's Kids Club 3552 E 118th St Chicago, IL 60617	20-3944583			6,956	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Dalia's Busy Bee Academy 10658 S Green Bay Chicago, IL 60617	35-2274391			5,481	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Learn Together Grow Together 1126 W 99th ST Chicago, IL 60643	45-4564866	501(c)(3)		5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Smart From the Start 1939 W 79th St Chicago, IL 60620	27-4152278	501(c)(3)		5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Pill Hill Development Ctr 8802 S Stony Island Chicago, IL 60617	36-4066992			5,133	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Allison's Infant & Toddler Ctr 234 E 115th St Chicago, IL 60628	75-3174168			5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
The Baby Academy 8607 S Cottage Grove Chicago, IL 60619	36-4249735	501(c)(3)		5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Chicago Urban Day School 1248 W 69th St Chicago, IL 60636	36-2698000	501(c)(3)		5,170	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Children's Developmental Institute 7037 S Stony Island Chicago, IL 60649	36-3070262			7,569	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Happy Holiday Nursery & Kindergarten 401 E 111th St Chicago, IL 60628	36-4106203			5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Illinois Institute for Children 10009 S Yates Chicago, IL 60617	36-4398927	501(c)(3)		5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Jelly Bean Learning Ctr IV 448 E 61st St Chicago, IL 60637	45-2678014			5,356	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Literacy Zone 5831 S Western Ave Chicago, IL 60636	80-0711444			5,370	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Mustardseed Learning Ctr 3656 W 111th St Chicago, IL 60655	20-4981716			5,499	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Prodigy Child Learning Ctr 1921 E 79th St Chicago, IL 60649	30-0377372			5,371	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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South Harper Montessori Schools 8358 S Stony Island Chicago, IL 60617	36-2879814	501(c)(3)		5,112	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
ABC Learning Ctr 401-419 W 95th St Chicago, IL 60628	37-1786859			5,096	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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ABC Learning Ctr II 10230 S Halsted Chicago, IL 60628	81-5109319			5,371	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Higher Learning Child Care Ctr 2526 E 73rd St Chicago, IL 60649	36-4303863			5,073	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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Busy Bees Learning Center 321 W 31st St Chicago, IL 60616	46-4569035			7,991	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Busy Bees Learning Center 3149-3155 S Shields Chicago, IL 60616	35-2414350			7,683	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Kids R Our Stars 5615 W Cermak Rd Cicero, IL 60804	30-0697992	501(c)(3)		5,331	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
KinderCare Des Plaines 8650 W Ballard Rd Des Plaines, IL 60016	47-4478313			6,784	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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The Learning Tree - NIA 8128 S Kedzie Ave Chicago, IL 60652	36-4140611			5,486	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Little Bear Day Care 6411 S Pulaski Chicago, IL 60629	36-2793999			5,475	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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Rainbow Daycare 3250 W Irving Park Rd Chicago, IL 60618	36-4116325			5,121	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Serendipity Child Care 1300 W 99th St Chicago, IL 60643	86-1167475			7,784	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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Smart Learning Ctr 2841 S Archer Ave Chicago, IL 60608	27-4337898			5,295	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Teddy Bear II 3473 W Columbus Ave Chicago, IL 60652	36-2793999	501(c)(3)		5,090	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

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Teddy Bear V 5160 S Pulaski Chicago, IL 60632	36-3681191			7,798	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Kids R Our Stars 5333 W 25th St Cicero, IL 60804	81-4494520			7,814	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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busy Bumble Bee Academy 6450 S Cottage Grove Chicago, IL 60637	36-3537518			5,500	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Creative Little Ones Academy 2809 W 59th St Chicago, IL 60629	26-4809927			5,401	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Teddy Bear 1 2649 W 51st St Chicago, IL 60632	36-2793999			8,036	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
East Side Development Ctr 13338 S Brandon Ave Chicago, IL 60639	30-0662851			5,007	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Belmont Child Care Ctr 5724 W Belmont Ave Chicago, IL 60634	38-4023353			5,001	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Learning Tree Child Care Ctr 950 Burnham Ave Calumet City, IL 60409	31-8728735			5,004	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Home of Life Just for You 4647 W Washington Chicago, IL 60644	36-4259274	501(c)(3)		5,001	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
HLCDC Development 4650 W Madison St Chicago, IL 60644	36-4259274	501(c)(3)		5,011	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Our Loving Arms 831 S Halsted St Chicago Heights, IL 60411	81-3259811			5,001	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
Mother Goose 4112 W 183rd St Country Club Hills, IL 60478	36-4885513			7,998	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Heaven's Learning Garden 7801 S Wolcott Chicago, IL 60620	46-1217350			5,146	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS
All About Kids Learning Academy 514 E 75th St Chicago, IL 60619	35-2199745			5,748	FMV	EDUCATIONAL MATERIALS	QUALITY IMPROVEMENTS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2018

Open to Public Inspection

Name of the organization
Illinois Action for Children

Employer identification number
36-2712912

Part I Questions Regarding Compensation

	Yes	No								
<p>1a 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</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in 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</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing 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</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>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</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a	No								
	5b	No								
<p>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</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>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</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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 O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization
Illinois Action for Children

Employer identification number

36-2712912

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 1 Briefly Describe the Organization's mission	As a state and national leader in the early care and education community, Illinois Action for Children stands distinguished by its "Strong Families, Powerful Communities" approach to child development, Pre-K education, and other family and community supports. Program services include Family Resources (child care referral and financial assistance), Provider Resources (program improvement and professional development), numerous Early Learning Programs, Outreach and Home Visiting, Mental Health Consultation, Public Health Outreach, and the Healthy Food Program. A Public Policy and Advocacy program that works with and on behalf of a member base of child care providers, parents, educators, and other advocates. Annually, we directly serve approximately 250,000 parents, children and child care providers, and 5,000 child care organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 630,832 including grants of \$ 0)(Revenue \$ 222,471) THE PUBLIC POLICY AND ADVOCACY PROGRAM - ILLINOIS ACTION FOR CHILDREN'S PUBLIC POLICY & ADVOCACY PROGRAM ORGANIZES MORE THAN 4,600 ADVOCATES STATEWIDE TO CONNECT WITH THEIR ELECTED OFFICIALS AND URGE THEM TO MAKE THE NEEDS OF CHILDREN AND FAMILIES, INCLUDING EXPANDED ACCESS TO CHILD CARE AND EARLY EDUCATION, A PRIORITY IN ILLINOIS. ADDITIONALLY, ILLINOIS ACTION FOR CHILDREN'S EARLY LEARNING PROGRAMS MAKE EARLY EDUCATION AVAILABLE TO YOUNG CHILDREN WHILE IN CHILD CARE SO THEY WILL BE READY TO SUCCEED WHEN THEY START SCHOOL. THIS WORK HAS INCLUDED CREATING A NATIONAL MODEL FOR PROVIDING PRESCHOOL TO CHILDREN IN HOME-BASED CHILD CARE, AS WELL AS BRINGING CERTIFIED TEACHERS, CHILD DEVELOPMENT EXPERTS, NUTRITION, AND LITERACY TRAINING AND BOOKS INTO THESE CHILD CARE HOMES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegation of Authority to an Executive Committee	Taken from the bylaws Article VII, the Executive Committee shall consist of the officers of the Board, the Past-Chair or the Chair-Elect and up to three at-large board directors. The Executive Committee shall - Act for the board of directors when necessary for the welfare of the organization or when action is required prior to the next scheduled board meeting - Annually evaluate the performance of the President/Chief Executive Officer - Review and approve all required tax filings including the annual Form 990 and AG990-IL - Carry out specific tasks assigned by the board

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	Prior to filing the return with the IRS, a draft of the completed Form 990 is reviewed by the organization's outside independent tax advisors and internal management. Subsequent to this review by the tax advisors and internal management, the complete and final Form 990 is distributed to the executive committee and provided to the board prior to filing the return with the IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	Annually, The organization distributes a conflict of interest questionnaire to all interested persons to determine if a potential or actual conflict of interest exists. Potential and actual conflicts of interest are monitored on a continuous basis by the board of directors. If the board determines that an actual conflict of interest exists, then the interested person with the conflict is prohibited from participating in the governing body's deliberations and decisions regarding the transaction where a conflict exists.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The compensation committee of the board of directors of IAFC is comprised of independent directors and is delegated the responsibility for reviewing and approving the compensation of the organization's top management official (CEO) The compensation committee engages an independent compensation consultant to assist in determining the appropriateness of the compensation packages This includes reviewing comparable compensation studies for similarly qualified persons in comparable organizations The compensation committee then makes a recommendation to the board, which makes a final determination as to compensation The process for determining compensation of the organization's top management official was last undertaken June 28, 2019

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The compensation committee of the board of directors of IAFC is comprised of independent directors and is delegated the responsibility for reviewing and approving the compensation of the organization's top management official (CEO) The compensation committee engages an independent compensation consultant to assist in determining the appropriateness of the compensation packages This includes reviewing comparable compensation studies for similarly qualified persons in comparable organizations The compensation committee then makes a recommendation to the board, which makes a final determination as to compensation The process for determining compensation of the organization's top management official was last undertaken June 28, 2019

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	Financial statements, governing documents, and conflict of interest policies are not required disclosures pursuant to Internal Revenue Code (IRC) Section 6104. These documents are not made available to the public by the organization at this time.