

EXTENDED TO MAY 15, 2020

## 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.

Open to Public

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

B Check if applicable LADDER UP	ation number
X Address CE/K/A CITY-WIDE TAX ASSISTANCE PROGRAM	
	070692
Number and street (or P.0. box if mail is not delivered to street address)   Room/suite   E Telephone number   350 N. ORLEANS ST.   C2-100   312-4	466-0771
termin-	1,775,796.
Amended CUTCACO TI 60654	•
return   CHICAGO, III 00054   H(a) is this a group return   Physical Phys	
pending SAME AS C ABOVE	
I Tax-exempt status X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a l	list (see instructions)
J Website: ► WWW . GOLADDERUP . ORG	
K Form of organization X Corporation	i State of legal domicile; ${f IL}$
Part I Summary	
1 Briefly describe the organization's mission or most significant activities THE ORGANIZATION OFFER	
PREPARATION, FINANCIAL AID AND FINANCIAL EDUCATION SERVICES  Check this box If the organization discontinued its operations or disposed of more than 25% of its net asset is not asset in the property of independent voting members of the governing body (Part VI, line 18)  Number of independent voting members of the governing body (Part VI, line 18)	3.
2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net asset	ets
3 Number of voting members of the governing body (Part VI, line 1a)	<u>4</u>
	18
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary)	1000
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12  OGDEN, UT 7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	0.
Prior Year	Current Year
8 Contributions and grants (Part VIII line 1b) 1, 366, 474.	1,382,088.
9 Program service revenue (Part VIII, line 2g)	0.
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 40,529.	209,271.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,776.
12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,411,164.	1,596,135.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
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) 574,528.	769,635.
15 Salaries, other compensation, employee benefits (Part IX, column (A), line 11e)  16a Professional fundraising fees (Part IX, column (A), line 11e)  17 Other expenses (Part IX, column (A), line 25)  17 Other expenses (Part IX, column (A), lines 11a, 11d, 11f, 24e)  18 Salaries, other compensation, employee benefits (Part IX, column (A), lines 3.10)  19 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.
b Total fundraising expenses (Part IX, column (D), line 25) ► 138,880.	271 052
To Other expenses (Fartis, Column (A), lines That Td, TT 2-40)	371,052. 1,140,687.
102 550	455,448.
	End of Year
Beginning of Current Year  20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20  23 Beginning of Current Year  24 2, 269, 277.  3, 137.  27 20 Net assets or fund balances Subtract line 21 from line 20	2,997,437.
21 Total liabilities (Part X, line 26)	351,900.
22 Net assets or fund balances Subtract line 21 from line 20 2,266,140.	2,645,537.
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 l	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.	· · · · · · · · · · · · · · · · · · ·
Moser on All 5-11	<u>'-20</u>
Sign Signature of officer Date	
Here ROBERT M. BURKE, PRESIDENT	
Type or print name and title  Print/Type preparer's name  Preparer's signature  Date  Check	PTIN
Frintrype preparer 5 flame   Freparer 5 Signature	<b>-</b>
	36-3168081
Prenarer   Europe name   STKTCH   LLD	
Preparer Firm's name SIKICH LLP Firm's EIN SUITE 400	30-3100001

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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

X Yes No Form 990 (2018)

SEE SCHEDULE O FOR CONTINUATION(S)

841,697.

Form **990** (2018)

Total program service expenses

Form 990 (2018)

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

s the organization described in section 501(a)(3) or 4947(a)(1) (other than a private (oundation)?  If "Yes," complete Schedule A 2 is the organization required to complete Schedule B, Schedule of Contributors?  If the complete Schedule A 3 is the organization required to complete Schedule B, Schedule of Contributors?  If the complete Schedule C, Part II 4 is the organization required to complete Schedule C, Part II 4 is the organization required to complete Schedule C, Part II 4 is the organization and schedule in Schedule C, Part II 4 is the organization and schedule in Schedule C, Part II 4 is the organization maintain and young advised funds or any similar funds or accounts for which domors have the right to provide device on the dethiculous or investment of amounts in such funds or accounts for which domors have the right to provide device on the dethiculous or investment or an investment or preserve open space, and the organization maintain collections of works of art, historical treasures, or other sensitive sceles? If "Yes," complete Schedule D, Part II 5 is the organization maintain collections of works of art, historical treasures, or other sensitive sceles? If "Yes," complete Schedule D, Part II 5 is the organization maintain collections of works of art, historical treasures, or other sensitive sceles? If "Yes," complete Schedule D, Part II 6 is the organization maintain collections of works of art, historical treasures, or other sensitive sceles? If "Yes," complete Schedule D, Part II 7 is 1 is the organization maintain collections of works of art, historical treasures, or other sensitive sceles? If "Yes," complete Schedule D, Part II 1 is 1	Par	t IV Checklist of Required Schedules			
If Yes, "complete Schedule A   2   X   X   3				Yes	No
2 Is the organization required to complete Schedule <i>B</i> , Schedule of Contributors?  Of the organization engage in direct or indered ordinates ordinates and period or in opposition to candidates for public office? If "Yes," complete Schedule <i>C</i> , Part II  Section 501(c)(3) exemplete Schedule <i>C</i> , Part II  Is the organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule C. Part II  Is the organization association (i)(iii), 501(ii)(iii), 501(iii)(iii) or 501(iii)(iii) organization that receives membership dues, assessments, or similar amounts as otherine in Revenue Procedule 9817? If "Yes," complete Schedule C, Part III  Of the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," organizes Schedule 0, Part II  Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," organizes Schedule 0, Part II  Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," organizes Schedule 0, Part II  Did the organization maintain any time funds or accounts? If "Yes," complete Schedule 0, Part II  Did the organization maintain and time and the schedule organization report any amount or funds or accounts. If the schedule organization report any amount or funds organization, decider organization, decider organization, decider organization, decider organization report any amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule 0, Part VII  Did the organization report any amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule 0, Part VII  Did the organization report any amount for other labelities in Part X, line 10? If "Yes," complete Schedule 0, Part VIII  Did the organization report any amount for other labelities or Part V, line 10? If "Yes," complete Schedule 0, Part VIII  Did the organization report any amount for other labelities or services or	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2 Is the organization reagane in derect or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "1"Yes," complete Schedule C, Part I section 501 (kg) election in effect during the tax year? If "1"Yes," complete Schedule C, Part I section 501 (kg), 501 (kg) for 201 (kg) organizations. But the organization organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III of the organization in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III of the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advisor in the distribution or investment of adminish such times or accounts for which donors have the right to provide schedule on the distribution or investment of adminish such times or accounts for which donors have the right to provide advisor in the distribution or investment of adminish such times or accounts for which donors have the right to provide advisor in the distribution of the right of the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advisor in the right of the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advisors on the distribution of the right of the organization maintain any donor and advised funds or accounts for which donors have the right to grant any accounts of the organization maintain any donor of works of art, historical treasures, or other similar assets of the complete Schedule O, Part III and the organization report an amount for level tumbers, debt management, credit repair, or debt negotiation services. If the organization report an amount for level tumbers of the state and the process of the state of the state and the process of the state and the complete Schedule D, Part IV III.  Did the organization report an		If "Yes." complete Schedule A	1	Х	
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4 Section SQ1(q)3) organizations. Did the organization engage in lobbying activities, or have a section SQ1(q)4) election in effect during the tax year? if "Yes," complete Schedule C, Part II is the organization a section SQ1(q)4), SQ1(q)5), or SQ1(q)5 organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 96-197 if "Yes," complete Schedule C, Part II is Did the organization markina any donor advested funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II is Did the organization report on that accordinate seasement, including assements to preserve opens pasce, the environment, instoric land areas, or historic structures? If "Yes," complete Schedule D, Part II is Did the organization report an amount in Part X, tine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part II is Did the organization and amount for land, buildings, and equipment in Part X, line 10" If "Yes," complete Schedule D, Part IV if If the organization service or any of the following questions is "Yes," then complete Schedule D, Part X is a spliciable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16" If "Yes," complete Schedule D, Part X is Did the organization orgonization export an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16" If "Yes," complete Schedule D, Part X is Did the organization orgonization export in ordinary investments or organized the Did the Organization organized in Part X line 16" If "Yes," complete Schedule D, Part X is Did the organization orgonized in consolidate	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4 Section 501(c)(3) organizations. Did the organization engage in tobbying activities, or have a section 501(c)(4) election in effect during the tax year? // *ves, *complete Schedule C, Part II    5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 96.197 // *ves, *complete Schedule C, Part II    5 Did the organization marked any donor advessed funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or evestment of amounts in such funds or accounts? *If *ves,* complete Schedule D, Part II    8 Did the organization report an amount or part X, Ine 21, for escrow or custodal account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If *ves,* complete Schedule D, Part II    9 Did the organization amount or provide or event of a construction, provide account liability, serve as a custodian for amounts not listed in Part X, in ery 17, ves,* complete Schedule D, Part II    9 Did the organization report an amount for Part X, Ine 21, for escrow or custodal account liability, serve as a custodian for amounts not listed in Part X, in ery 3, complete Schedule D, Part V    10 Did the organization export or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis endowments? *If *ves,* complete Schedule D, Part V    10 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 18? *If *ves,* complete Schedule D, Part X    10 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 18? *If *ves,* complete Schedule D, Part X    110 Did the organization organization accounts or consolidated financial statements for th			3		X
during the tax year? "I"'es," complete Schedule C, Part II  5 Is the organization a section 50 (16)(8), 501(6)(8), 501(6)(8) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 86 19? If "Yes," complete Schedule C, Part III  7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  8 Did the organization maintain collections of works of an, instonoal treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization insport an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, dieth management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for lond, part X, line 15 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VIII III X  11 Did the organization report an amount for other ass	4				
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Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV 10 Did the organization is sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - organization export an amount for investments - organization export an amount for investments organization export an amount for other lasbilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for other lasbilities in Part X, line 25? If "Yes," complete Schedule D, Part X line 15 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII b Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule E, Parts III and IV b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or f	8				
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?  If 'Yes,' complete Schedule D, Part IV' 10 Did the organization's answer to any of the following questions is "Yes,' then complete Schedule D, Part S I, if the organization report an amount for Industry, organization assets in temporarily restricted endowments, permanent endowments, or quasi-endowments,	_		8		Х
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b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		• • • • • • • • • • • • • • • • • • • •			
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		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2018)

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Form 990 (2018) (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 4
Part IV | Checklist of Required Schedules (continued)

Did this organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part K, column (A), line 27 ("I"yes," complete Schedule ( Part I and III 22 II X 2 II	<u> </u>	Officerist of frequired ochedules (continued)			
Part IX, column (A), line 2º // 1º /es, "complete Schedule I, Part 1 and III 2 Did the organization assert "75" to Part IVI), Science A, and 3.4 or \$a about compensation of the organization is current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 2	00	Did the experience report more than \$5,000 of grants or other accistance to or for demostic individuals on	Г	Yes	No
23 Dut the organization answer "Yea" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, furstees, key employees, and highest compensated employees? "If "Yes," complete Schedule I, "Yes," or line 258 but the organization have a tax exempt bond seve with an outstanding principal amount of more thins \$100,000 as of the last day of the year, that was issued after December 31, 2002? "If "Yes," answer lines 24b through 24d and complete Schedule I, "If "Yes," to refer 25d but the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax exempt bonds?  d bid the organization amantan an escrive account other than a refunding escrive at any time during the year?  d bid the organization are at as an "on behalf of" issuer for bonds outstanding at any time during the year?  d bid the organization are at as an "on behalf of" issuer for bonds outstanding at any time during the year?  d bid the organization are at as an "on behalf of" issuer for bonds outstanding at any time during the year?  d bid the organization are at as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d 25d 25d 25d 25d 25d 25d 25d 25d 25d 25	22		22		x
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Schedule L, Part I  25 Did the organization report any amount on Part X, Inne 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? If "Yes," complete Schedule L, Part II    26	_			:	
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former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? # "Yes," complete Schedule L, Part II 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? # "Yes," complete Schedule L, Part III 27 X 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? # "Yes," complete Schedule L, Part IV 28 X 28 X 28 Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule L, Part IV 28 X 28 Did the organization receive contributions? # "Yes," complete Schedule L, Part IV 29 Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M 29 X 29 X 20 Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M 29 X 20 Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M 29 X 20 Did the organization includate, terminate, or dissolve and cease operations? # "Yes," complete Schedule M 29 X 20 Did the organization included, P, Part II 20 Did the organization included, P, Part II 20 Did the organization on the 100% of an entity disregarded as separate from the organization under Regulations sections 301 T701.2 and 301 T701.3° # "Yes," complete Schedule R, Part II, III, or IV, and Part V, III 11 Did 10	26				
complete Schedule L, Part II  7 Did the organization provide a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  8 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, furstee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, furstee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, furstee, or key employee? If "Yes," complete Schedule L, Part IV  28b X  29 Did the organization receive more than \$25,000 in non-anish contributions? If "Yes," complete Schedule L, Part IV  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  31 Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1  32 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)?  b If "Yes" complete Schedule R, Part V, Iline 2  33 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, Iline 1  34 Did the organization complete Schedule O an					
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 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? If "Yes," complete Schedule L, Part IV 28a X 28b X C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 29 X 29 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 33 Did the organization related to any tax-exempt or transfer entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Did the organization have a controlled entity within the meaning of s			26		X
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of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 DX  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  31 Did the organization induidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule M, Part II  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3° If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization so. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3					
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instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? // "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? // "Yes," complete Schedule L, Part IV  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? // "Yes," complete Schedule L, Part IV  28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M  30 Did the organization receive contributions of air, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete Schedule N, Part II  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? // "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1  33 AW  34 Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b if "Yes," complete Schedule R, Part V, Inne 2  35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Inne 2  35b Did the organization complete Schedule R part V, Inne 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Inne 2  35b Did the organization complete Schedule R part V Inne 2	28				
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 77012 and 301 7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Heart V is complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Heart V is complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Heart V is complete Schedule R, Part V, line 2 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note,			l		
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 fever or midrect or warder to where? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1  34 A Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Ime 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, Ime 2  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 partne	а		28a		X
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions?" If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?" If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 Did the organization will 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  55 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  56 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?  If "Yes," complete Schedule R, Part V, line 2  37 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  Statements Regarding Other IRS Fillings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  11 Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable  12 Did the organization comply with backup withholding rules for reportable p	b	• • • • • • • • • • • • • • • • • • • •	28b		X
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  The organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  So Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2  Section 501(c)(3) organizations. Did the organization make any transfers to a nexempt non-chantable related organization? If "Yes," complete Schedule R, Part V, Iine 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule R, Part V, Iine 3  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, Iines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O may line in this Part V  The Statements Regarding Other IRS Fillings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The Statements Regarding Other IRS Fillings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The Side Republication of the organization comply with backup withholding rules for reportab					
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contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701.2 and 301 7701.3" If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Sabar V, line 1  Sabar V, line 1  Sabar V, line 1  Section 501(c)(3) organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2  To the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  Label Schedule O contains a response or note to any line in this Part V  Label Schedule O complete Schedule O in the 1a Enter-0- if not applicable  C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
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Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  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  1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V!  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  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  1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c   Statements   State		sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		<u> </u>
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V!  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  Note. All Form 990 filers are required to complete Schedule O  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  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
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within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  Note. If Schedule O contains a response or note to any line in this Part V  10 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  11 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  12 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  13 c	35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u> _
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
If "Yes," complete Schedule R, Part V, line 2  36			35b		
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c   X  X  X  A  X  X  A  A  A  A  A  A  A	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The image of the second of		If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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Note. All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  38 X  Yes No			37		<u> </u>
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  Ta Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  Tyes No  Yes No  1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	38	· · · · · · · · · · · · · · · · · · ·			
Check if Schedule O contains a response or note to any line in this Part V  Tall Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  The state of	<u> </u>	Note. All Form 990 filers are required to complete Schedule O	38	X	L
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  Yes No  Yes No  1b 0  1b 1c 1c	Pal				г
ta Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c		Oneck is Schedule O Contains a response of note to any line in this Fact v	1		<u> </u>
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	_	21		res	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c					
(gambling) winnings to prize winners?		Eliter the fighteen of Fermi V Za molecular mile to Eliter of the approach			
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				Г
٥-	Fatable window of amplement reported on Form W.S. Transmitted of Wage and Tay Statements		Yes	No
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 2a 18			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	$\overline{\mathbf{x}}$	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
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)?	4a		X
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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7,7
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	٠.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		$\overline{\mathbf{x}}$	
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?  If "Yes," did the organization notify the donor of the value of the goods or services provided?	7а 7b	X	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
U	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders  Cross income from other sources (Po not not one unto due or poul to other sources against			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )		ĺ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			,
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		_X_
	If "Yes," see instructions and file Form 4720, Schedule N			<del></del> -
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O	E0	990	(2010)
		rorm	33U	(ZU IŬ)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 4			
	If there are material differences in voting rights among members of the governing body, or if the governing	]		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	$\overline{\mathbf{x}}$	—
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
С		12c	х	
13	In Schedule O how this was done  Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written whisteshower policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	_ <del>,</del> -		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO. Executive Director, or top management official	15a	$\overline{\mathbf{x}}$	
h	Other officers or key employees of the organization	15b	X	
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		_
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶IL		_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only) a	avaılab	ole
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	fınanc	ıal	
	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			
	CHRISTINE CHENG - 312-466-0771			
	350 N. ORLEANS ST. , NO. C2-100, CHICAGO, IL 60654		25.5	
832006	5 12-31-18	Form	990	(2018)

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

36-4070692

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

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

Check this box if neither the organiz  (A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	١		Pos	itior	١		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson ı	than o	an	compensation	compensation	amount of
	week	offi	cer ar	nd a d	recto	r/trus	tee)	from	from related	other
	(list any	scfo						the	organizations	compensation
	hours for	=				ted		organization	(W-2/1099-MISC)	from the
	related	stee	ruste		۱	bens		(W-2/1099-MISC)		organization
	organizations	a ta	onal t		ploye	E 8				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	e a	Highest compensated employee	<b>Former</b>			organizations
(1) ROBERT M. BURKE	1.00	트	트	0	¥	≖ =	Œ			
PRESIDENT/TREASURER	1.00	x		x	l			0.	0.	0
(2) JOHN CHANDLER	1.00								• • •	
SECRETARY	1.00	x		х				0.	0.	0
(3) JAMIE O'BRIEN	1.00									
DIRECTOR	1.00	Х						0.	0.	0
(4) MARK SNEIDER	1.00							_	_	_
DIRECTOR	1.00	X						0.	0.	0
(5) CHRISTINE CHENG	40.00	1						22.24		- 400
EXECUTIVE DIRECTOR	1.00			X	-	<u> </u>		82,241.	0.	6,100
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Form										NCE PROGRAM)		7069	<u> </u>	Page 8
Гаі	1000	irectors, Trustee:		loye	es,			hes	t C	ompensated Employee		$\overline{}$		
	(A)		(B)			(C Posi				(D)	(E)		(F)	
	Name and title		Average nours per		not c	heck r	more	than o		Reportable	Reportable		Estima	
		'	week					s both r/trust		compensation	compensation from related		amour oth	
			(list any	ъ						from the	organizations	٦,		ei sation
			hours for	direct				_		organization	(W-2/1099-MISC		from	
			related	- JO 95	stee			ısateı		(W-2/1099-MISC)	(** 2) 1000 111100		organiz	
		org	ganizations	truste	al tru:		yee	iad I		(,			and rel	
			below	Individual trustee or director	Institutional trustee	× 1	key employee	est co	ā			0	rganıza	ations
			line)	함	Instit	Officer	Key e	Highest compensated employee	Former					
											**			
1b	Sub-total	1.						i	<u> </u>	82,241.	(	0.	6,	100.
	Total from continuation she	ets to Part VII. So	ection A					i	<b>•</b>	0.	(	0.		0.
	Total (add lines 1b and 1c)							i	<b>•</b>	82,241.	(	0.	6,	100.
2	Total number of individuals (in	ncluding but not li	mited to the	ose	liste	d ab	ove	) who	o re	eceived more than \$100,	000 of reportable			
_	compensation from the organ	·-						•			•			0
	3												Ye	s No
3	Did the organization list any f	ormer officer, dire	ector, or tru	stee	. ke	v en	olar	vee.	or I	highest compensated er	nployee on		$\neg$	
	line 1a? If "Yes," complete So					•		•				3	_	X
4	For any individual listed on lin			э со	mpe	nsa	tion	and	oth	ner compensation from t	he organization			
	and related organizations gre	· .	-								-	4	_	X
5	Did any person listed on line										dual for services			
-	rendered to the organization?									ŭ		5	_	
Sec	tion B. Independent Contrac													
1	Complete this table for your f	ive highest compe	ensated ind	epei	nder	nt co	ntra	ctor	s th	nat received more than \$	100,000 of compe	nsation	from	
	the organization Report com													
		(A)								(B)			(C)	
	Name	and business add	dress	NC	NE	C				Description of s	ervices	Com	pensat	tion
									T					
									_					
									$\dashv$					
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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) (A) Related or Unrelated Total revenue exempt function business revenue revenue , Grants mounts 1 a Federated campaigns Membership dues 1b 151,049. c Fundraising events 1c 1d d Related organizations 542,402. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 688,637 similar amounts not included above 36,405. Q Noncash contributions included in lines 1a-1f \$ ▶ 1,382,088. h Total. Add lines 1a-1f Business Code Program Service Revenue f All other program service revenue g Total, Add lines 2a-2f Investment income (including dividends, interest, and 44,341. 44,341. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 314,942. assets other than inventory b Less cost or other basis 147,768. 2,244 and sales expenses 167,174. -2,244.c Gain or (loss) 164,930. 164,930. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 151,049. of contributions reported on line 1c) See 34,425. Part IV. line 18 29,649. b Less direct expenses 4,776. 4,776. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d

**▶** 1,596,135.

0.

214,047.

Form 990 (2018)

Total revenue. See instructions

Form 990 (2018)

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 (B) Program service (C) Management and (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 103,343. 25,836. 56,839. 20,668. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 574,779. 541,196. 33,117. 466. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,919. 6,198. 39,238. 48,355. Other employee benefits 43,158. 9,286. 23,872. 10,000. Payroll taxes 10 Fees for services (non-employees) a Management **b** Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 13,112. 13,112. Investment management fees g Other (If line 11g amount exceeds 10% of line 25, 72,068. 30,977 20,191. 20,900. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 40,229. 141,283. 95,647. 5,407. 13 Office expenses 14 Information technology Royalties 15 58,285. 25,603. 31,336. 1,346. Occupancy 16 2,088. 8,341 6,180. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,623. 25. 277. 3,925. Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 16,991.2,832. 2,832. 22,655. Depreciation, depletion, and amortization 22 23 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.) 51,383. 47,120. 1,023. 3,240. FEES AND MISCELLANEOUS d e All other expenses 160,110. 138,880. 1,140,687. 841,697. Total functional expenses Add lines 1 through 24e Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

832010 12-31-18

Form 990 (2018)

Check here \_\_\_\_\_ if following SOP 98-2 (ASC 958-720)

Form 990 (2018)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 464,844. 116,084. Cash - non-interest-bearing 1 18,876. 2 0. 2 Savings and temporary cash investments 103,329. 400,368. 3 3 Pledges and grants receivable, net Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 6 employees' beneficiary organizations (see instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 427. 1,027. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 981,048. basis Complete Part VI of Schedule D 10a 20,325. 321,712. 659,336. 10c b Less accumulated depreciation 10b 1,661,476. 1,593,475. Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 564,771. 15 Other assets See Part IV, line 11 15 2,269,277. 2,997,437. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,137. 17 351,900. Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Labilities key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 3,137. 351,900. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here 

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,141,140. 2,455,568. 27 27 Unrestricted net assets 125,000. 28 0. 28 Temporarily restricted net assets 0. 189,969. 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 2,645,537. 2,266,140. 33 Total net assets or fund balances

2,997,437. Form **990** (2018)

2,269,277.

Total liabilities and net assets/fund balances

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

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

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Form 990 (2018)

За

Act and OMB Circular A-133?

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization LADDER UP

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

Because it is (For lines 1 through 12, check only one box)

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

See instructions

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

'nе	organı	zation is not a private found	lation because it is (I	For lines 1 through 12, c	heck only	one box )								
1		A church, convention of ch	urches, or association	n of churches described	in sectio	n 170(b)(1	I)(A)(ı).	$\mathcal{L}$						
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	一	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	$\Box$	An organization operated for	or the benefit of a col	llege or university owner	l or operat	ed by a go	vernmental unit describe	ed in						
3	ш			inege of university owner	or operat	ca by a go	A CONTROL INC. GOOD INC.	JG III						
_	$\overline{}$	section 170(b)(1)(A)(iv). (Complete Part II)												
6		A federal, state, or local government	-											
7	X.	An organization that norma	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). (C	omplete Part II)											
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II)									
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a land-grant	college						
		or university or a non-land-g	grant college of agric	ulture (see instructions)	Enter the	name, city	, and state of the college	e or						
		university												
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	port from o	contributio	ns, membership fees, an	d gross receipts from						
		activities related to its exem												
		income and unrelated busin												
		See section 509(a)(2). (Con		(1000 000tion of 1 tably in a	545	occo acqu.	ou by the organization o							
		An organization organized	•	walk to toot for public ca	foty Soo	cootion 50	)0(a)(A)							
11	=							nurnance of ano ar						
12	ш	An organization organized a												
		more publicly supported or						neck the box in						
	_	lines 12a through 12d that												
а		Type I. A supporting orga												
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	tors or trustees of the su	pporting						
		organization You must o	complete Part IV, Se	ections A and B.										
b		Type II. A supporting org	anızatıon supervised	or controlled in connect	tion with it:	s supporte	ed organization(s), by hav	ring						
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	oorted						
		organization(s) You mus	t complete Part IV,	Sections A and C.										
С		Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functionally integrate	ed with,						
		its supported organization												
d		Type III non-functionally	• • •	•				zation(s)						
		that is not functionally int												
		requirement (see instructi												
е		Check this box if the orga					Type I, Type II, Type III							
_		functionally integrated, or	• •	nally integrated supporti	ng organiz	ation		<u></u>						
f		r the number of supported of	-											
g		ide the following information		d organization(s) (iii) Type of organization	I (iv) is the orga	anization listed	(v) Amount of monetary	(vi) Amount of other						
	(1	) Name of supported organization	(ii) EIN	(described on lines 1-10	ın your governi	ing document?	support (see instructions)	1 ' '						
				above (see instructions))	Yes_	No	Support (See Historians)	Copport (Coo mondonero)						
		<del></del>			<u> </u>	<u> </u>								
_		· · ·		<del></del>										
						İ								
			<del></del>	<del> </del>		<b></b>								
fota	ıl		ı	I	I	I	I	I						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

fails to qualify under the tests listed below, please complete Part III)

Schedule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization

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") 1181038. 1294660. 1308801. 1394174. 1380613. 655928	<u>6.</u>
2 Tax revenues levied for the organ-	
ızatıon'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 1181038. 1294660. 1308801. 1394174. 1380613. 655928	<u>6.</u>
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) 143,84	4.
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 1181038. 1294660. 1308801. 1394174. 1380613. 655928	<del>6.</del>
8 Gross income from interest,	
dividends, payments received on	
securities loans, rents, royalties,	
and income from similar sources 35,140. 40,247. 45,405. 45,880. 44,341. 211,01	3.
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) 1,359. 1,000. 6,251. 8,61	Λ.
CEROOO.	9
117 60	
	•
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 94.64	
04.72	<del>/</del> %
15 Public support percentage from 2017 Schedule A, Part II, line 14  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	
, respectively. The second of	χĪ
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	
F	$\neg$
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  Schedule A (Form 990 or 990-EZ) 2	340

Schedule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 3

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

(Co	mplete only if you checked	the box on line 10	of Part I or if the	organization failed	to qualify under Pa	art II If the organiz	ation fails to
	lify under the tests listed b	elow, please comp	olete Part II)				
	Public Support	<del></del>	· · · · · · · · · · · · · · · · · · ·			Г	
	r fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
_	ts, contributions, and						
	ip fees received (Do not						
	y "unusual grants ")					/	<u></u>
	eipts from admissions, ise sold or services per-			<b>.</b>			
	facilities fumished in						
	y that is related to the						
=	on's tax-exempt purpose					/	
	eipts from activities that						
	unrelated trade or bus- er section 513					1	
				ļ			<del> </del>
	ues levied for the organ-						
	enefit and either paid to ed on its behalf						
•			<u> </u>		<del>  /</del>		
_	of services or facilities by a governmental unit to		1				
	zation without charge			/	4		
ū	l lines 1 through 5						
	ncluded on lines 1, 2, and					-	-
	from disqualified persons						
	ided on lines 2 and 3 received			+ /	•		<del></del>
from other tha	n disqualified persons that						
	eater of \$5,000 or 1% of the e 13 for the year			/			
c Add lines	•						
	oport. (Subtract line 7c from line 6)			1			
	otal Support				<del>*</del>		<u> </u>
Calendar vear (o	r fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts f							
10a Gross inco	ome from interest,						
	payments received on loans, rents, royalties,	<b> </b>					
	e from similar sources						
<b>b</b> Unrelated b	usiness taxable income						
(less section	n 511 taxes) from businesses						
acquired aft	er June 30, 1975						
c Add lines	10a and 10b						
	e from unrelated business						
	ot included in line 10b, not the business is						
regularly c	arned on						
	me Do not include gain n the sale of capital						
	plain in Part VI)				_		
	rt (Add lines 9, 10c, 11, and 12)					l	<u> </u>
14 First five y	ears. If the Form 990 is for	r the organization's	s first, second, thii	rd, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiza	ation,
	box and stop here						
	Computation of Publi					<del> </del>	
· ·	port percentage for 2018 (I			column (f))		15	%
	port percentage from 2017					16	<u>%</u>
	Computation of Inves					<del> </del>	
	Income percentage for 20			ine 13, column (f))		17	
,	t income percentage from					[ 18 ]	
/	upport tests - 2018. If the						7 is not
	33 1/3%, check this box ar	•	-				. ▶□
,	upport tests - 2017. If the	_					and
/	ot more than 33 1/3%, che						▶;;
	undation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th			<b>P</b>
832023 10-11-18					Sch	eaule A (Form 996	0 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 4

### Part IV Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 12 on 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)

1	Are all of the organization's supported organizations listed by name in the organization's governing

- documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 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)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined 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.
- 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.
- 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 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		<u> </u>
3b		_
3c		
4a		
4b		<u> </u>
l		
4c		
	,	
5a		
Ja		<u> </u>
5b		
5c		
6		
7		<u></u>
8		<del>   </del>
9a		
9b		<u></u>
<u>-</u> -		
9c		<del></del> i
10a		
10b		
990 or 99	O-EZ)	2018

832024 10-11-18

	dule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-40	<u>7069</u>	2 P	age <b>5</b>
Pa	t IV Supporting Organizations (continued)		_	·
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	1		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			lacksquare
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		L
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	1		1
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		
	tax year? 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	1		<del>                                     </del>
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? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		<del></del>	
<u> </u>	supervised, or controlled the supporting organization.	2		Щ_
Sec	tion C. Type II Supporting Organizations			<b></b>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1 1
	or management of the supporting organization was vested in the same persons that controlled or managed	<del></del>		<b>-</b>
800	the supported organization(s). tion D. All Type III Supporting Organizations	1	L	L
Sec	tion D. All Type III Supporting Organizations		V	N <sub>a</sub>
	Did the assessment as a surface of the assessment as a but the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	İ		[ ]
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		<u> </u>
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	<del></del>		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	ł		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
_	the organization maintained a close and continuous working relationship with the supported organization(s)  By reason of the relationship described in (2), did the organization's supported organizations have a			
3				i I
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		-	
' a	The organization satisfied the Activities Test. Complete line 2 below	,•		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see insi	ta ictions	١	
2	Activities Test Answer (a) and (b) below.	ructions	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
J	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
		2b		
3	activities but for the organization's involvement  Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
Ų	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	Schedule & (Form S		O E7	2010

Sche Pa	edule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX AS			36-4070692 Page 6
	. The mineral and magnetic contexts and property			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	_		Part VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	omplete Sed	ctions A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	·	
_7_	Other expenses (see instructions)	7		
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			1
_	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			1
	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		
Sect	ion 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	Check here if the current year is the organization's first as a non-functional	ılly ıntegrate	d Type III supporting orga	nization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 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 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 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 Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount (1) (iii) **Underdistributions** Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 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) Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2018 from Section D, a Applied to underdistributions of prior years **b** Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2019. Add lines 3j and 4c Breakdown of line 7 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 8 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 1, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 2 and 3, Part IV, Section E, lines 1, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, lines 1 and 2 and 3 and 3 b, Part V, Section B, lines 1 and 3 and 3 b, Part V, Section B, lines 1 and 3 and 3 b, Part V, Section B, lines 1 and 3 and 3 and 3 b, Part V, Section B, lines 1 and 3 and 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) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: **MISCELLANEOUS** 0. 2014 AMOUNT: \$ 2015 AMOUNT: \$ 0. 2016 AMOUNT: \$ 1,359. 1,000. 2017 AMOUNT: \$ 2018 AMOUNT: \$ 0. SPECIAL EVENT /FUNDRAISING INCOME 0. 2014 AMOUNT: \$ 2015 AMOUNT: \$ 0. 2016 AMOUNT: 0. 2017 AMOUNT: \$ 0. 2018\_AMOUNT: \$ 6,251.

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

Open to Public Inspection

LADDER UP

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

Employer identification number 36-4070692

OMB No 1545-0047

Pai	rt I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
-	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
_	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?	, , ,	Yes No
Par		ganization answered "Yes" on Form 990, P	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	•	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	cion's financial statements that describes the	he organization's accounting for
Da	conservation easements	Art Historical Transuras or Oth	nor Similar Assets
Pai	rt III Organizations Maintaining Collections of		lei Sillilai Assets.
	Complete if the organization answered "Yes" on Form		and and bullion a characteristic of orth
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ice of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		and believes about weaks of out bustomost
b			
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items		<b>•</b> •
	(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 tre-		gain, provide
	the following amounts required to be reported under SFAS 1	To (ASC 938) relating to these items	<b>~</b> c
a	Revenue included on Form 990, Part VIII, line 1		► \$
b	Assets included in Form 990. Part X		<b>₽ 切</b>

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

832051 10-29-18

Schedule D (Form 990) 2018

Sche		CITY-WIDE S						36-40			age 2
Par	t III   Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, o	r Othe	r Simila	r Assets	(contir	rued)	<del></del> ,
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	following tha	t are a sı	gnıfıcant	use of its c	ollection	items	3
	(check all that apply)										
а	Public exhibition	d	· Ш·	oan or exc	hange progr	ams					
b	Scholarly research	е	. [_]	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how the	y further th	ne organizatio	on's exer	mpt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or					er sımılar	assets		_	_	_
	to be sold to raise funds rather than to be ma								Yes		<u>No</u>
Par	t IV Escrow and Custodial Arrang		ete if the	organizatio	n answered	"Yes" on	Form 99	0, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par					<u> </u>					
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for co	ontributions	s or other as	sets not	ıncluded		٦	_	٦
	on Form 990, Part X?							_	_ Yes		_l No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	ble							
									Amount	<u>t                                     </u>	
C	Beginning balance						1c	<del> </del>			
	Additions during the year						1d				
	Distributions during the year						1e	<del> </del>			
	Ending balance	000 5 171	04 (		.4		<u>_1f</u>		7		٦
	Did the organization include an amount on Fo	•					iity /		Yes	<b>-</b>	∐ No
Par	t V Endowment Funds. Complete in						10				<u> </u>
L a	Lindowinient i dilds. Complete i	(a) Current year			1			years back	(e) Four	woore	back
4-	Regioning of year balance	(a) Current year	(0) PI	or year	(c) Two yea	IIS DACK	(u) Tillee	years back	(e) roui	years	Dack
_	Beginning of year balance										
b	Contributions				<del>                                     </del>						
ن س	Net investment earnings, gains, and losses						-				
a	Grants or scholarships										
е	Other expenditures for facilities					j					
	and programs Administrative expenses										
1	End of year balance	_									
9 2	Provide the estimated percentage of the curr	ent vear end halance	e (line 1a	column (a)	) held as	<u> </u>					
a	Board designated or quasi-endowment	-	% %	COldinin (a)	,, 11010 03						
b	Permanent endowment	%	<b>–</b> ′°								
	Temporarily restricted endowment	^~ %									
·	The percentages on lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posses	<u>.</u>	ation that	are held an	nd administe	red for th	ne organiz	ation			
-	by						J		ſ	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
ь	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Sc	hedule R?					3b		
4	Describe in Part XIII the intended uses of the	•									
Par											
	Complete if the organization answered	d "Yes" on Form 990	), Part IV,	line 11a S	ee Form 990	), Part X,	line 10				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumulat	ed	(d) Bool	k valu	е
	· · · · ·	basis (investr		basis	(other)	de	preciation	<u> </u>			
1a	Land										
b	Buildings										
C	Leasehold improvements				0,344.		13,5		216	5,7	76.
d	Equipment			69	6,026.		618,5		7	7,4	92.
	Other			5	4,678.		27,2	34.			44.
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. columi	n (B). line 1	0c.)			<b>•</b>	32:	1,7	12.
								Schedule	D (Form	990	2018

LADDER UP	-WIDE TAX AS:	SISTANCE PROGRA	Mr) 36-	-4070692 Page <b>3</b>
Schedule D (Form 990) 2018 (F/K/A CITY-Part VII Investments - Other Securities.	WIDE THE FILE	JIDIMOH INCOM	M, 30	10/0002 Fage €
Complete if the organization answered "Yes" o	on Form 990, Part IV, lin	e 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		of-year market value
(1) Financial derivatives			<del></del>	
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)	•			
(G)		1		
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<del>-  </del>		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" o	on Form 990. Part IV, lin	e 11c See Form 990, Part X,	line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation		of-year market value
(1)				<u> </u>
(2)				
(3)				
(4)				
(5)		<del>_</del>		
(6)	· · · · · · · · · · · · · · · · · · ·			
(7)		-	· · · · · · · · · · · · · · · · · · ·	
(8)				
(9)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" o	on Form 990, Part IV, lin	e 11d See Form 990, Part X.	line 15	
<del> </del>	Description	o Tra Goot Sim Goog Eastern		(b) Book value
(1) DUE FROM RELATED ORG			<del></del>	564,771.
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	·= •	<del></del>		564,771.
Total. (Column (b) must equal Form 990. Part X. col. (B) line  Part X Other Liabilities.				
Complete if the organization answered "Yes" o	n Form 990, Part IV, line		art X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				,

Schedule D (Form 990) 2018

(8)

Column (b) must equal Form 990, Part X, col. (B) line 25.)
 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

Sche	dule D (Form 990) 2018 (F/K/A CITY-WIDE TAX ASSIS	TANCE	PROGRAM)		4070692	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wit	h Revenue per Re	turn.		
	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	3,122	<u>,301.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) on investments	2a	-76,051.	] [		
b	Donated services and use of facilities	2b	1,585,680.			
С	Recoveries of prior year grants	2c		1 1		
d	Other (Describe in Part XIII )	2d	29,649.			
е	Add lines 2a through 2d			2e	1,539	
3	Subtract line 2e from line 1			_3	1,583	,023.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		40 440			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	13,112.			
b	Other (Describe in Part XIII )	4b		<del> </del>	1.2	110
С	Add lines 4a and 4b			4c	1,596	,112.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	onto Wi	th Evnances per E	5		,135.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		itti Expenses per r	returi	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				2,742	904
1	Total expenses and losses per audited financial statements			1	2,142	, 304.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	الما	1,585,680.			
a	Donated services and use of facilities	2a	1,505,000.	}		
b	Prior year adjustments	2b		1		
c	Other losses	2c	29,649.	1 1		
d	Other (Describe in Part XIII )	2d	27,047.	2e	1,615	329.
_	Add lines 2a through 2d Subtract line 2e from line 1			3	1,127	
3	Amounts included on Form 990, Part IX, line 25, but not on line 1				1,12,	, 3 , 3 •
4	Investment expenses not included on Form 990, Part VIII, line 7b	ا دار ا	13,112.			
	Other (Describe in Part XIII)	4a 4b	13,1110	1		
b	Add lines 4a and 4b	_ <del>10</del> ]		4c	13	,112.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	1,140	687.
	t XIII Supplemental Information.		<del></del>			7.00
	de 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 )	K, line 2, Part X	 (I,
	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addi					
					-	
PAI	T X, LINE 2:					
THI	ORGANIZATION IS A NOT-FOR PROFIT CORPORAT	NOI	AND IS EXEMP	T FI	ROM TAX	
				٠.		
UNI	ER THE PROVISIONS OF INTERNAL REVENUE CODE	E SEC	TION 501(C)(	3).	THE	
ORG	ANIZATION IS NOT CLASSIFIED AS A PRIVATE F	OUND	ATION.			
	THE TAXABLE OF THE PARTY OF THE					
PAI	T XI, LINE 2D - OTHER ADJUSTMENTS:		<del></del>			
۵۵.	ACTAL BURNE (BURNERS TOTALS BURNERS				20 6	. 40
SPI	CIAL EVENT/FUNDRAISING EXPENSES				29,0	549.
			<del></del> _			
D 3 *	m vit like in Amileo anifomalamo.					
PAI	T XII, LINE 2D - OTHER ADJUSTMENTS:					
GDI	CIAL EVENT/FUNDRAISING EXPENSES				29 6	549.
251	CIVI BABUILL MINIMINING EVERNORD				7,0	·
						_
						<del>`</del>
83205	10-29-18			Sched	dule D (Form 9	90) 2018

Schedula D	(Form 990) 2018	(F/K/A	CITY-WIDE	TAX	ASSISTANCE	PROGRAM)	36-4070692	Page F
Part XIII	(Form 990) 2018 Supplemental Infor	mation (con	tinued)			_ noonari	20/0022	raye o
			MI MANAY			<del>.</del>		
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### **SCHEDULE G**

(Form 990 or 990-EZ)

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

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

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

	to to www.irs.gov/Formeeo for mistre	uction	sanu	the latest illioillati	<del>)                                      </del>		
Name of the organization LADDER (F/K/A	UP CITY-WIDE TAX ASSI:	AT2	ICE	PROGRAM)		Employer idea 36-4070	ntification number 692
Part I Fundraising Activities	- Complete if the organization answe				ne 17	7 Form 990-EZ	filers are not
required to complete this part of the part	sed funds through any of the followin  e Solicitat  f Solicitat  g Special  or oral agreement with any individual  Part VII) or entity in connection with pi	tion of tion of fundra (includ	non-g govern Ising e Ing of Onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	□ No
compensated at least \$5,000 by the	organization						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribi	Did aiser istody trol of itions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser red in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
<del></del>							
Total			<b>&gt;</b>				
3 List all states in which the organizati or licensing	on is registered or licensed to solicit o	contribi	utions	or has been notified	ıt ıs e	exempt from reg	gistration
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 $\label{eq:LHA} \textbf{EHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.}$ 

Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4070692 Page 2

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 (a) Event #1 (b) Event #2 (c) Other events (d) Total events SPECIAL NONE (add col (a) through CASINO NIGHTEVENTS col (c)) (total number) (event type) (event type) 146,594. 38,880. 185,474. 1 Gross receipts 129,569. 21,480. 151,049. 2 Less Contributions 17,025. 17,400. 34,425. 3 Gross income (line 1 minus line 2) 1,750. 119. 1,869. 4 Cash prizes 1,755. 252. 2,007. 5 Noncash prizes Expenses 6,449. 6,449. 6 Rent/facility costs 12,193. 312. 12,505. 7 Food and beverages 2,727. 2,727. 8 Entertainment 4,092. 3,728. 364 Other direct expenses 29,649. 10 Direct expense summary Add lines 4 through 9 in column (d) 4,776. 11 Net income summary Subtract line 10 from line 3, column (d) 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 (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo col (a) through col (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs Other direct expenses Yes Yes Yes % % 6 Volunteer labor 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 Yes a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Yes 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? No **b** If "Yes," explain

Schedule G (Form 990 or 990-EZ) 2018

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Schedule G (Form 990 or 990-EZ) 2018 (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) 36-4	<u> 1070692</u>	Page 3
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	13a	<u>%</u>
<b>b</b> An outside facility	13b	%
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 <b>&gt;</b>		
Gaming manager compensation > \$		
December of consequences arounded N		
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	L∐ No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year  \$		01: 401:
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Pa	rt III, lines 9,	96, 106,
15b, 15c, 16, and 17b, as applicable Also provide any additional information. See instructions		
		<u> </u>
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Schedule G (Form	n 990 or 990	1-FZ\`2018

			LADDER	UP						
Schedule G	(Form 990	or 990-EZ)	(F/K/A	CITY	-WIDE	TAX	ASSISTANC	E PROGRAM	36-4070692	Page 4
Part IV	Supple	mental Inforn	nation (cor	itinued)						
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### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Open to Public Inspection

· · ·	e of the organization LADDER UP (F/K/A CITY-	WIDE T	AX ASSIST	ANCE PROGR	AM)		36-407		
Par									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contrit amounts report Form 990, Part VII	ed on		(d) ethod of determ ish contribution	~	its
1	Art - Works of art							-	
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ▶ ( DONATED GOODS )	X	131	36,	405.	FMV			
26	Other								
27	Other								
28	Other								
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions					
	for which the organization completed Form 828	33, Part IV, [	Donee Acknowledg	jement	29				
								Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines	1 throug	h 28, that r	t		1
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required	d to be us	ed for	<u></u> _		
	exempt purposes for the entire holding period?	>					30a	ı	X
b	If "Yes," describe the arrangement in Part II								
31	Does the organization have a gift acceptance p	olicy that re	quires the review of	of any nonstandard	contribut	ions?	31		Х
	Does the organization hire or use third parties								
	contributions?						<b>32</b> a		X
b	If "Yes," describe in Part II								
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column (	a) is chec	ked,			

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

Schedule M (Form 990) 2018

describe in Part II

Schedule M	(Form 990) 2018	(F/K/A	CITY-WII	E TAX	ASSISTANCE	PROGRAM)	36-4070692	Page
Part II	Supplemental is reporting in Part this part for any ad	Information I. column (b).	<b>on.</b> Provide the the number of c	information ontribution	n required by Part I, lin is, the number of item	es 30b, 32b, and 3 s received, or a cor	33, and whether the organization of both Also com	ition plete
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2142 10-18-1							Schedule M (Form	990) 20

### SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

(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.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

LADDER UP
(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

Employer identification number 36-4070692

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
EDUCATE 1,405 INDIVIDUALS ABOUT MONEY MANAGEMENT AND POSITIVE FINANCIAL
HABITS. DURING FY 18-19, LADDER UP CONNECTED 2,343 CLIENTS WITH
ASSET-BUILDING SERVICES INCLUDING CREDIT REPORT PULLS, FINANCIAL
COACHING, FEE-LESS DEBIT CARDS, AND INCENTIVIZED SAVINGS OPPORTUNITIES.
1,234 CLIENTS USED ALL OR A PORTION OF THEIR REFUNDS TO BUILD
PRECAUTIONARY SAVINGS, SAVING APPROXIMATELY \$788 ON AVERAGE. IN FY
18-19, LADDER UP LED 98 FAFSA 101 WORKSHOPS, HELPING 1,479 STUDENTS
ACCESS AN ESTIMATED \$18.8 MILLION IN FINANCIAL AID AWARDS. THROUGH 106
PRE- AND POST-FAFSA WORKSHOPS, LADDER UP PROVIDED CRITICAL COLLEGE
FINANCING INFORMATION TO 4,337 INDIVIDUALS.
FORM 990, PART VI, SECTION B, LINE 11B:
THE BOARD OF DIRECTORS REVIEWS THE FORM 990 FOR CLARITY AND ACCURACY BEFORE
IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C:
WHEN LADDER UP SEEKS TO ENGAGE A NEW VENDOR, SEVERAL STEPS MUST BE TAKEN.
FIRST, BECAUSE LADDER UP RECEIVES GOVERNMENT FUNDING, LADDER UP MUST
CONSULT THE ILLINOIS DEBARRED VENDOR LIST TO ENSURE THAT THE VENDOR IS NOT
BANNED BY THE STATE. ONCE A VENDOR HAS BEEN CLEARED, LADDER UP MAY PROCEED.
IF THE VENDOR'S SERVICES EXCEED \$1,000, LADDER UP PERSONNEL MUST OBTAIN
BIDS FROM THREE DIFFERENT CLEARED CONTRACTORS. THIS IS DONE TO ENSURE
LADDER UP IS BEING CHARGED A FAIR, COMPETITIVE RATE. THE THREE BIDS MUST BE
SUBMITTED TO THE EXECUTIVE DIRECTOR FOR REVIEW AND SELECTION OF THE VENDOR.
IF THE SERVICES ARE OVER \$5,000, THE BOARD CHAIR MUST APPROVE THE PROPOSAL.
TI THE DANGE TOUR OF THE OFFICE

Schedule O (Form 990 or 990-EZ) (2018)

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

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

2018

OMB No 1545-0047

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

Open to Public Inspection

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

LADDER UP

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number 36-4070692

Schedule R (Form 990) 2018 (g) Section 512(b)(13) No × controlled entity? Direct controlling Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Direct controlling entity End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) <u>e</u> LINE 7 Total income Exempt Code ਉ section 501(C)(3) ਉ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) ILLINOIS HELP LOW-INCOME FAMILIES AND INDIVIDUALS ACCESS Primary activity Primary activity FINANCIAL RESOURCES For Paperwork Reduction Act Notice, see the Instructions for Form 990. CENTER FOR ECONOMIC PROGRESS - 36-3693728 Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity CHICAGO, IL 60654 350 N. ORLEANS ST. Part Part II

LADDER

36-4070692

Page 2

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) Schedule R (Form 990) 2018 Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

(k)	General or Percentage managing ownership											
(1)	General or managing partner?	Yes No		 							 	
(1)	Code V-UBI amount in box 7	K-1 (Form 1065)							-			
(F)	Disproportionate allocations?	Yes No				_						
(6)	Share of end-of-year											
(1)	Share of total income		•	-								
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)										
(p)	Direct controlling entity											
(c)	Legal domicile (state or	country)										
(q)	Primary activity											
(a)	Name, address, and EIN of related organization											

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

1				ı		1			1		1	
tion (13) olled ty?	ž											
(i) Section 512(b)(13) controlled entity?	Yes											
(h) Percentage ownership			-									
(g) Share of end-of-year												
(f) Share of total ncome												
(e) Type of entity (C corp, S corp	(con in											
(d) Direct contro entity		•										
(c) Legal domicile (state or foreign	country)	_					<u> </u>					
(b) Primary activity												
(a) Name, address, and EIN of related organization								,				7

Schedule R (Form 990) 2018

Page 3

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# (F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM)

Schedule R (Form 990) 2018

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Yes
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalities, or (iv) rent from a controlled entity	1a

- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
  - **b** Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- 1 Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)

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- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ho must complete the	is line, including covered re	elationships and transaction thresholds
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved
(E)			
(2)			
(3)			
(4)			
(5)			
· <sub>^</sub> (9)			
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Page 4

## LADDER UP

(F/K/A CITY-WIDE TAX ASSISTANCE PROGRAM) Schedule R (Form 990) 2018 Part VI] Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

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(a)	(a)	9	(p)	Are all		(6)	<u>E</u>	3	∋	¥
Name, address, and EIN	Primary activity	Legal domicile	Predominant incom (related, unrelated,	6 partners sec 501(c)(3)	Share of	Share of	Dispropor- tionate	amount in box 20	General	Percentage
		country)	excluded from tax und sections 512-514)	Yes No	-	assets	Yes No	of Schedule K-1 (Form 1065)	Yes No	
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Part VII	(Form 990) 2018 Supplemental Infor	mation.	CIII WIDE	TIMI INDUID	TIMICE TROCKETT	30 1070032 ra	ge J
	Provide additional informa		ses to questions on	Schedule R See in	nstructions		
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Schedule R (Form 990) 2018