### CHANGE OF ACCOUNTING PERIOD

**Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

_		2020 calendar year, or tax year beginning JAN 1, 2020 and end	idina J	UN 30, 2020				
		C Name of organization	Ť	D Employer identific	cation number			
	heck if oplicable			- Employer identific				
_	Addre	S OF THE INTURDITTY OF THINOTO						
<u> </u>	Jchang Name			37-06612	57			
<u> </u>	chang							
늗	return Final	Trained, and other (or the contract of the con	oom/suite	E Telephone number (217) 33				
L_	return termin	**		<del></del>				
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	802,381.			
<u>_</u>	_return	CHAMPAIGN, II 01020		H(a) Is this a group re				
	Application pendir	F Name and address of principal officer OTH ITTEREDORG		for subordinates				
	pendi	SAME AS C ABOVE	2	H(b) Are all subordinates in				
		empt status 🔀 501(c)(3)	527	If "No," attach a	list See instructions			
		e: WWW.UNIVERSITYYMCA.ORG	<del>/</del> _	H(c) Group exemption				
		organization: X Corporation Trust Association Other ►	L Year o	of formation: 1992 N	A State of legal domicile: IL			
Pa	rt I	Summary						
	1	<u></u>		SITY YMCA SI				
Governance		CHALLENGE AND NURTURE THE MIND AND SPIRIT (	OF IN	DIVIDUALS A	ND			
rna	2	Check this box   if the organization discontinued its operations or disposed	of more	than 25% of its net ass				
) ve	3	Number of voting members of the governing body (Part VI, line 1a)	RFCF	EIVED 📴	31			
	4	Number of independent voting members of the governing body (Part VI, line 1b)	<u> </u>	10 4	31			
85	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	11.15.1	1 2021 0 5	36			
Activities &	6	Total number of volunteers (estimate if necessary)	JUN	1 2021 6	1250			
cţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		Œ  7a	0.			
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	CDF	М 17 7ь	0.			
		, \	<u> </u>	Prior Year	Current Year			
•	8	Contributions and grants (Part VIII, line 1h)		733,558.	525,940.			
Revenue	9	Program service revenue (Part VIII, line 2g)		301,704.	115,548.			
ě.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	Ĺ	991,281.	132,016.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		24,882.	26,390.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,051,425.	799,894.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		193,300.	292,463.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)						
<b>,</b> 0	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		645,169.	399,648.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
e .		Total fundraising expenses (Part IX, column (D), line 25) 73,760	o. 🦳					
찣		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		373,272.	189,703.			
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,211,741.	881,814.			
	19	Revenue less expenses. Subtract line 18 from line 12		839,684.	-81,920.			
- 2		Heveride 1635 expenses. Outstack line 16 from line 12	Bee	ginning of Current Year	End of Year			
Net Assets or	20	Total assets (Part X, line 16)		11,425,302.	11,353,123.			
ASSE	21	Total liabilities (Part X, line 16)		411,856.	701,987.			
let/	22	Net assets or fund balances Subtract line 21 from line 20		11,013,446.	10,651,136.			
P	irt II	Signature Block			,_,_,_,_			
		alties of perjury, I_declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the hest of my	knowledge and belief it is			
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which			, knowledge and control, k is			
uuc,	COITE	is, and complete. Declaration of propagation than officer / is based on all information of which	прорагог	17.14	en 2021			
C:	_	Signature of office		Date	<del>24 20 21</del>			
Sig		JIM HINTERLONG, EXECUTIVE DIRECTOR			•			
Her	е	Type or print name and title						
			Тг	Date Check	PTIN			
0.1		Print/Type preparer's name  Preparer's signature  AND PRINT CHA		5/14/21 self-employ	<b></b>			
Paid		ANDREW SMITH, CPA ANDREW SMITH, CPA	- 10		41-0746749			
	arer	Firm's name CLIFTONLARSONALLEN LLP	<del></del>	Firm's EIN 🕨	71-0/40/47			
Use	Only	Firm's address 301 S.W. ADAMS STREET, SUITE 1000	,	Dha	00) 671_4500			
_		PEORIA, IL 61602	_	[ Phone no. ( 3	09) 671-4500			
May	the I	RS discuss this return with the preparer shown above? See instructions			X Yes No			

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			·
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		7.7	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	ļ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<del>-^</del>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	and the state of t			
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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	45		x
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15_		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		х
4-7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		<u> </u>	<del></del>
18	1c and 8a? If "Yes, " complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
13	complete Schedule G, Part III	19	}	х
20>	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 12 if "Yes." complete Schedule I. Parts I and II	21	<u></u>	Х

032003 12-23-20

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS Form 990 (2020) OF THE UNIVERSITY

| Part IV | Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part K, column (A), line 2" if "Yes," compilete Schedule I, Parts I and III 2 Did the organization aware "Yes" to That VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, directions, fusions, 4, or 5 about compensation of the organization's current and former offices, directions, fusions, 4, or 5 about compensation of the organization's current and former offices, directions, fusions, 4, or 5 about compensation of the organization was the state of the total control of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002" if "Yes," answer lines 25th through 24d and complete Schedule K if "No," or a fine 25d Section 501(5)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization spage in an excess benefit transaction with a disqualified person during the yea?" If "Yes," complete Schedule L, Part I is 1 to reparanization aware that the regapization and societies benefit transaction with a disqualified person during the yea?" If "Yes," complete Schedule L, Part I is 1 to reparanization aware that the regapition an excess benefit transaction with a disqualified person of part years or former office, deedor, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or fauntly member of any of these persons? If "Yes," complete Schedule L, Part IV is 1 but the organization provide a gard or other assistance to any current or former office, deedor, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV is 1 but the organization review of part of the assistance to any current or former office, deedor, trustee, key employee, creator or founder, substa		Continued)		Voc	No
Part IX, column (A), Ine?? If "Yes," complete Schedule I, Parts I and III Did the organization is current and former officiers, directors, funstees, key employees, and highest compensation of the organization scurrent and former officiers, directors, funstees, key employees, and highest compensation of the organization former officiers, directors, funstees, key employees, and highest compensation of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, if "No," go to line an secrow account of them than a refunding secrow at any time during the year to defease any tax-exempt bonds are necessary and secromation and secrow account of them than a refunding secrow at any time during the year to defease any tax-exempt bonds?  25a Section \$01(x)31, \$01(x)43, \$01(x)43), and \$201(x)23) organizations. Did the organization empage in an excess benefit transaction with a disqualified person during the year?  25b Is the organization organization are provided and any expensive section \$100(x)31, \$01(x)43, \$01(x)43), and \$201(x)23) organizations. Did the organization empage in an excess benefit transaction with a disqualified person of unity the year?  25c In the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creation of founder, substantial contributor, or 35% controlled entity for landing manner of any of these persons? If Yes, complete Schedule I, Part II If If I I I I I I I I I I I I I I I	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
23 Dut the organization reviewer. Yes* 10 Part VIII. Section A, Ine 3. 4, or 5 about compensation of the organization's current and former officers, directors, trusteses, key employees, and highest compensated employees? If Yes, *complete Schedule / Jan Dut the organization have at at exercempt bonds seuw with an outstanding prenopal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If Yes, *answer lines 240 through 24d and complete Schedule K if Yibo,* go to line 25a.  24b. Dut the organization markation an escribed account of the than a refunding escribed at any tax-event bonds?  24c. Dut the organization markation an escribed account of the state and the organization and the state as an *on behalf of "issuer for bonds outstanding at any time during the year' to defease any tax-event bonds?  24d. Dut the organization and as an *on behalf of "issuer for bonds outstanding state that the state of the organization and the state as an *on behalf of "issuer for bonds outstanding state that the state of the organization and the state that agreed in an excess benefit transaction with a disqualified person during the year? If Yes, *complete Schedule I, Part I II is the organization answer that it engaged in an excess benefit transaction with a disqualified person during the year? If Yes, *complete Schedule I, Part II II is the organization and that the transaction has not been reported on any of the organizations provide a grant or other assistance or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If Yes, *complete Schedule I, Part II II is the organization provide a grant or other assistance to any current or former officer, drector, trustee, key employee, creator or founder, or substantial contributor? II Yes, *complete Schedule I, Part II		· · · · · · · · · · · · · · · · · · ·	22	х	
Schedule / 23	23				
249 Did the organization have a tax-evering to bord issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," arrawer lines 24b through 24d and complete Schedule K If "No." go to hie 25a  b Did the organization mines an an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  24d  Did the organization mines an an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualided person during the year? If "Yes," complete Schedule L, Part!  b is the organization aware that it engaged in an excess benefit transaction with a disqualided person in a prior year, and that the transaction was not been reported on any of the organization prior of 900 e72? If "Yes," complete Schedule L, Part!  b is the organization in export any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officier, director, fusite, key employee, creator or founder, substantial contributor, or 30% controlled entity or founder, fusited in the prior of any of these persons? If "Yes," complete Schedule L, Part III and the prior of former officer, director, fusite, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 39% controlled entity fincling in the endise, conditions, and exceptions)  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV "Yes," complete Schedule L, Part IV "Yes," complete Schedule L, Part IV "Yes," complete Schedule III and		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
stat day of the year, that was saued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is "The "De year of the Deservation of the Part Is and the organization mental and secretive account other than a refunding escrew at any time during the year to defease any tax exempt bronds?  d Did the organization mental and secretive account other than a refunding escrew at any time during the year to defease any tax exempt bronds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax exempt bronds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d			23		<u> </u>
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25a Section 50 (to(3), 50 (to(4)), and 50 (to(2)) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I (25b	А				
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2" If "Yes," complete Schedule L, Part I  Did the organization provide a grant or other assistance to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  26					
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // 1/*yes, complete Schedule L, Part I // 25 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // 1/*yes, complete Schedule L, Part I/ 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity of family member of any of these persons? // 1/*yes, complete Schedule L, Part I// 28 Was the organization and provide a finite provide in the selection of the following parties (see Schedule L, Part I// 28 and A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? // 1/*yes, complete Schedule L, Part I// 28 b A family member of any individual described in line 2887 // 1/*yes, complete Schedule L, Part I// 28 b A family member of any individual described in line 2887 // 1/*yes, complete Schedule L, Part I// 28 Did the organization receive more than \$25,000 in non-cash contributions? // 1/*yes, complete Schedule L, Part I// 29 Did the organization receive more than \$25,000 in non-cash contributions? // 1/*yes, complete Schedule N, Part I// 30 Did the organization sell, exchange, dispose of, or transfer more than 2596 of its net assets? // 1/*yes, complete Schedule N, Part I// 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 // 270 and 301 770 13? // 1/*yes, complete Schedule R, Part I// 1/*yes, complete Schedule R, Part I// 1/*yes, complete Schedule R, Part I//			25a		Х
Schedule L, Part I   25b   X   25b	b				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions, for aphicable fling thresholds, conditions, and exceptions)  a A current or former officer, director, frustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 28b X 29b X 30b dit the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30b dit the organization receive contributions of air, instoncal treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31b dit the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 30b dit the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, IIne 2 35b Old the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, IIne 2 35b Old the organization one too 15120(193) ir "Yes," complete Schedule R, Part V, IIne 2 35b Old the organization one too					
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controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 55% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 28a X 28a X 5b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 28	26				
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creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? "If "Yes," complete Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions)  a A current or fourner officer, director, trustee, key employee, creator or founder, or substantial contributor? "If "Yes," complete Schedule L, Part IV by A family member of any individual described in line 28a? "If "Yes," complete Schedule L, Part IV 28b X  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? "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  30 Did the organization receive more than \$25,000 in non-cash contributions? "If "Yes," complete Schedule M 30 X  31 Did the organization individuals exchange, dispose of, or transfer more than 25% of its net assets; "If "Yes," complete Schedule N, Part I 31 X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 77012 and 301 77013? ""Yes," complete Schedule R, Part II 33 X  34 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-charitable 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-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? "If "Yes," complete Schedule R, Part V, line 2  38 Section 501(c)(3) organizations. Did the organizat			26		
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"Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 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 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 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 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-charitable 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-charitable 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-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization conduct more than 5% of ts activities through an entity that is not a related organization  37 X  X  Did the organization complete Schedule O and p	а				
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"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "yes," complete Schedule M  28	ь		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  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 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  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 an exempt non-charitable 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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V Iines 11b and 19?  Note: All Form 930 filers are required to complete Schedule O  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  Table The number of Forms W-2G included in line 1a. Enter 0- if not applicable  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
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 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  35 a Did the organization have 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  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 for Part VI, lines 11b and 19?  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 1. 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," complete Schedule L, Part IV	28c		
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 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 35 and 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 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 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  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 The Organization complete Schedule O and provide explanations in Schedule O for Part VI, Iines 11b and 19?  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 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  To Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	29	<del>-</del>	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, line 1  34	33		33		х
Part V, line 1  34	34				
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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?	20		31		
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 X	38		38	$ _{\mathbf{x}} $	
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	Pa				<u> </u>
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?  Yes No  Yes No  1a					
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
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X	1a	Zittor tillo manibor toporito till Dono di richini rocci di richini di principali.	4		
(gambling) winnings to prize winners?		Enter the number of Forms W 2d included in this fac Enter of in fact applicable	1		
(garnowing) within go to prize with text	c				
		(gambling) winnings to prize winners?			(0000

orm	990 (2020) OF THE UNIVERSITY OF ILLINOIS 37-066	<u> 1257</u>	Р	age 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			WIN.
	filed for the calendar year ending with or within the year covered by this return 2a 30	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	NIF.		MARK
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	- A.W-1881	Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country		are o	
_	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	2.11	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	100		<del> </del>
	any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ua		
•	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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?		ten y heligikh 2	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del></del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		_
·	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	CHA	ALS B	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	eddelfigh b	X
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del> </del>
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		<del></del>
ь 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0		8	TANKS COLUMN	CARTER ST
9	sponsoring organization have excess business holdings at any time during the year?			FREE CO.
	Sponsoring organizations maintaining donor advised funds.	<u> </u>	( REPORT GRO	TO STEER
a	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a		<del>                                     </del>
10		9b		menic
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	-		
44				
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders  Cross income from other courses (Do not not one unit of the courses ground to other			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	316885062	ARCHESSE.	21.70% S826
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	Gener	10000000
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	High said	wiioż	***********
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	\$\$\$\$\$\$\$\$\$\$\$\$	185623027
L	Note: See the instructions for additional information the organization must report on Schedule O			
D	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			
	Enter the amount of reserves on hand		ar es	of the
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<del> </del>
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15	STELEOWS?	X
ŧ	If "Yes: " see instructions and file Form 4720. Schedule N			

Form 990 (2020)

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O

37-0661257 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 31 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 31 b Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Х 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization 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 X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶IL 17 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) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Upon request Other (explain on Schedule O) Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records JIM HINTERLONG - (217) 337-1500

032006 12-23-20

1001 S. WRIGHT STREET,

IL

61820

CHAMPAIGN

Form 990 (2020)

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

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

Name and title	(A)	(B)			((	<del></del>			(D)	(E)	(F)
NICHAEL DOYLE   ACCOUNTS   ACCO			Position		· ·		Estimated				
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NICHAEL DOYLE		week	offic	cer an	d a d	recto	r/trus	tee)	from	from related	other
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NICHAEL DOYLE		hours for	1 2 2	ا			ᆵ			(W·2/1099·MISC)	
NICHAEL DOYLE			Ste c	ruste		١,,	eusa		(W-2/1099-MISC)		
NICHAEL DOYLE		-	1 = 1	nal t		loye	E				
NICHAEL DOYLE			P de	stilutic	licer	yemg	ghest	iner Tile			organizations
X	/1\ MICHAEL DOVIE		Ĕ	iii	, <del>5</del>	×	포통	ਫ਼			
C20   REBERAH RAUSCHENBERGER   20.00	• •	40.00	ł		x				93.021.	0.	9.173.
BUSINESS OFFICE ADMIN		20.00		-		╁─			33,0210		3,11,30
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RESIDENT		5.00	<del>                                     </del>	-							
(1) ANN-PERRY WITHER			x		х				0.	0.	0.
STATE PEARSON	(4) ANN-PERRY WITMER	5.00									
TREASURER	VICE PRESIDENT		X		X				0.	0.	0.
SECRETARY	(5) CARL PEARSON	5.00									
SECRETARY	TREASURER		X	_	X		_		0.	0.	0.
STUDENT BODY PRESIDENT	(6) JULIA KELLMAN	5.00	1						_	_	_
STUDENT BODY PRESIDENT			X	<u> </u>	X		L	_	0.	0.	0.
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(17) ELEANOR HUMPHREYS BOARD MEMBER  3.00 X 0.0.0	(16) ADRIENNE HARRIS	3.00	]			}					
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Form 990 (2020) OF THE UN	IIVERSIT	'Y	OF	' I	LL	IN	01	IS	37-066	<u> 5125</u>	57	Page <b>8</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	d Hi	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)	T		(F)
Name and title	Average	, ا			itior	) than d		Reportable	Reportable		Esti	mated
	hours per	ю́ох	, unle	ss pe	rson	s both	an	compensation	compensation		amo	ount of
	week	offi	cer ar	nd a c	irecto T	r/trus	tee)	from	from related		O,	ther
	(list any	ector				Į		the	organizations			ensation
	hours for	ğ	, a			릁		organization	(W-2/1099-MISC			m the
	related organizations	nstee	frus		وي ا	l g		(W-2/1099-MISC)			-	nization related
	below	ual tr	tonal		ploy	ye si	١.			، ا		izations
	line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			`	J. 94.	Lationio
(18) ALLISON BURKE	3.00	Ι-	Ī	Ť	-	٣	-			$\neg$		
BOARD MEMBER		x						0.	C	).		0.
(19) NOAH SIMON	3.00					Г						
BOARD MEMBER		X						0.	(	).		0.
(20) EVELYN KRASNIK	3.00											
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(21) DANY RODRIGUEZ	3.00											
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(22) GRACE LUCENTI	3.00	l		ŀ								•
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(23) BRITTANY AMAWAN	3.00		Ì	ļ								•
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(24) NATE SUN BOARD MEMBER	3.00	x						0.	(	o.		0.
(25) JAMIE SINGSON	3.00	<u> </u>	$\vdash$	╁╌	╁	$\vdash$				<del>'</del> —		<u> </u>
BOARD MEMBER	3.00	X						0.	(	o.		0.
(26) AARON SMITH	3.00	ऻ	<del>                                     </del>							_		
BOARD MEMBER		$\mathbf{x}$					ŀ	0.	(	).		0.
1b Subtotal							<b>&gt;</b>	120,844.	(	).	20	,618.
c Total from continuation sheets to Part VI	l, Section A						<b></b>	0.		).		0.
d Total (add lines 1b and 1c)							<b></b>	120,844.	(	0.	20	,618.
2 Total number of individuals (including but n	ot limited to th	ose	lıst€	ed al	bove	e) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization											<u> </u>	0
												res No
3 Did the organization list any former officer,		ee, l	key e	emp	loye	e, or	hiĝ	ghest compensated emp	loy <del>ee</del> on	$\vdash$	$\dashv$	- 17
line 1a? If "Yes," complete Schedule J for s										<u> </u> -	3	X
4 For any individual listed on line 1a, is the su									he organization	$\vdash$	+	77
and related organizations greater than \$150										<u> </u>	4	X
5 Did any person listed on line 1a receive or a	•						elate	ed organization or individ	dual for services	<u> </u>	_	X
rendered to the organization? If "Yes." com Section B. Independent Contractors	plete Schedul	e <i>J 1</i>	or si	uch	pers	on		<del></del>			5	
Complete this table for your five highest contact of the stable for your five highest contact of the your five highe	mnensated inc	tene	ende	nt c	ontr	acto	rs tl	hat received more than 9	100 000 of compe	nsatio	n fron	
the organization. Report compensation for												•
(A)	,			-3-				(B)			(C)	
Name and business	address	N	ON	E				Description of s	ervices	Con		sation
												•
		_	•									J
												·
								l				

\$100,000 of compensation from the organization ▶ 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) (A) Reportable Name and title Average Position Reportable Estimated compensation (check all that apply) compensation amount of hours from from related other per organizations week the compensation Highest compensated employee director (W-2/1099-MISC) (list any organization from the (W-2/1099-MISC) hours for organization Individual trustee or related and related Key emptoyee organizations organizations Institutional below Officer line) 3.00 (27) SAM SMITH BOARD MEMBER 0. 0. 0. X 3.00 (28) JESSICA TRAN X 0. 0. 0. BOARD MEMBER (29) CRYSTAL WOMBLE 3.00 BOARD MEMBER X 0. 0. 0. Total to Part VII, Section A, line 1c

Form 990 (2020)

Page 9 Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenue excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 1a Gifts, Grants llar Amounts 1 a Federated campaigns **b** Membership dues 1b 28,812. 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 497,128. similar amounts not included above 1f 1g \$ g Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f **Business Code** 531110 112,528. 112,528 2 a RENTAL INCOME Program Service Revenue 900099 3,020. OTHER PROGRAM REVENUE f All other program service revenue 115,548. q Total. Add lines 2a-2f Investment income (including dividends, interest, and 132,016. 132,016. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents 6a 6b b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 7b Other Revenue 7c c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not 28,812. of contributions reported on line 1c). See 28,877. Part IV, line 18 2,487. **b** Less direct expenses 26,390. 26,390. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 9ь b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances 10b b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** d All other revenue Total. Add lines 11a-11d

799,894.

032009 12-23-20

Total revenue See instructions

158,406.

PartiX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) X Check if Schedule O contains a response or note to any line in this Part IX (B) (A) Do not include amounts reported on lines 6b, Fundraising Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII **expenses** expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 292,463. 292,463. 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 5 Compensation of current officers, directors, 61,018. 15,614. 29,143. 16,261. 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) 259,063. 219,809. 14,780. 24,474. Other salaries and wages 7 Pension plan accruals and contributions (include 12,283. 8,310. 2,102. 1,871. section 401(k) and 403(b) employer contributions) 25,462. 6,438. 5,732. 37,632. Other employee benefits 22,170. 29,652. 3,861. 3,621. 10 Payroll taxes 11 Fees for services (nonemployees) Management Legal b Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 30,372 1,582. 6,233. 38,187. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 16,200. 8,529 545. 7,126. Office expenses 13 Information technology 14 Royalties 15 40,266. 37,354. 2,163 749. 16 Occupancy 1,505. 323. 1,831. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,488. 2,740. 719 29. 19 Conferences, conventions, and meetings 7,170. 128. 4,971. 2,071. 20 Interest 21 Payments to affiliates 37,649. 47,657. 5,004 5.004. 22 Depreciation, depletion, and amortization 3.126. 2,496 498. 132. 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) <u>15,209.</u> 15,209. ALTERNATIVE SPRING BREA 6,178. 6,088. 56. MAINTENANCE 34. <del>-75.</del> MISCELLANEOUS 3,217. 703. 2,589. 1,561. 1,411. 175. DUES & SUBSCRIPTIONS 3,147. 4,027. 4,027. SEE SCH O All other expenses 732,189. 75,865. 73,760. 881,814. Total functional expenses. Add lines 1 through 24e 25 Joint costs Complete this line only if the organization 5 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2020)

Check if Schedule O contains a response or note to any line in this Part X		990 (2 <b>t X</b>		t OF IDDINOIS	,		OOO1ZJ/ Page II
1   Cash - non-interest-bearing   Savings and temporary cash investments   224, 866. 1   730, 048     2   Savings and temporary cash investments   224, 866. 1   730, 048     3   Pedges and grants receivable, net   459, 886. 3   427, 538     4   Accounts receivable, net   459, 886. 3   427, 538     5   Cash and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons     6   Loans and other receivables from other dequalified persons (as defined under section 4958(i)(i)), and persons described in section 4958(i)(ii), and persons described in section 4958(i)(ii), and persons described in section 4958(i)(iii), and persons described in section 4958(ii), and expenses and deferred charges     7   Notes and loans receivable, net   10g   3,918,423.     8   Personal dependences on   10g   3,918,423.     9   Personal dependences on   10g   3,918,423.     10   Less, accumulated deprecation   10g   3,918,423.     11   Investments - poblocity fraided securities   10g   3,918,423.     11   Investments - other securities See Part IV, line 11   13   Investments - other securities See Part IV, line 11   14   Intangule assets   15   15   15   15   15   15   15   1		JTKT, TAN		any line in this Part X			
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A Accounts receivable, net   St. Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (as defined under section 4958(n)(1)), and persons described in section 4958(n)(8)   Notes and loans receivable, net   Notes and loans receivable net   Notes and loans receivable net   Notes and loans receivable net   Notes and loans payable to unrelated third parties   Notes a				·	459,886.	3	427,538.
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  6. Loans and other receivables from other disqualified persons (as defined under section 4958(c)(1)), and persons described in section 4958(c)(3)(b)  7. Notes and loans receivable, net inventions for sale or use  9. Prepaid expenses and deferred charges  9. Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis. Complete Part Vi of Schedule D  11. Investments - publicly traded securities  12. Investments - publicly traded securities  13. Notes assets  14. Intangule assets  15. Other assets. See Part IV, line 11  16. Total assets. Add lines 1 through 15 (must equal line 33)  17. Accounts payable and accrued expenses  17. Investment and interpret lines 2 (and incomplete lines 2) (and incomplete lines 27, 28, 32, and 33)  18. Carpital isabilities and related third parties  29. Organizations that do not follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. (and incomplete lines 28, 28, 32, and 33. (and incomplete lines 28		4	-	•	81,335.	4	68,657.
Tax-exempt bond labilities  100  101  102  103  104  105  105  106  107  107  107  108  108  109  109  109  109  109  109		5	Loans and other receivables from any current or form	ner officer, director,			
6 Loans and other recevables from other disqualified persons (as defined under section 4958(h(1)), and persons described in section 4958(h(3)(B)			trustee, key employee, creator or founder, substantia	l contributor, or 35%			
under section 4958(h(1)), and persons described in section 4958(c)(3)(B)  7 Notes and loans receivable, net  8 Inventiories for sale or use  9 Prepard expenses and deferred charges  10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D  b Less, accumulated depreciation  11 Investments - publicly traded securities  12 Investments or other securities See Part IV, line 11  13 Investments - program-related. See Part IV, line 11  15 Cither assets. See Part IV, line 11  16 Total assets. See Part IV, line 11  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability Complete Part IV of Schedule D  22 Loans and other payable st on are undered third parties  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other habilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here   26 Organizations that follow FASB ASC 958, check here   27 Accounts that follow FASB ASC 958, check here   28 Squat assets with donor restrictions  Organizations that follow FASB ASC 958, check here   29 Capital stock or trust principal, or current funds  30 Patriot and carried earnings, endowment, accumulated income, or other funds  31 Retained earnings, endowment, accumulated income, or other funds  31 Total net assets fund balances  11, 013, 446. 32 10, 651, 136  11, 013, 446. 32 10, 651, 136  11, 013, 446. 32 10, 651, 136  11, 013, 446. 32 10, 651, 136  11, 013, 446. 32 10, 651, 136  11, 013, 446. 32 10, 651, 136  11, 013, 446. 33 11, 353, 136  11, 013, 446. 33 11, 353, 136			controlled entity or family member of any of these pe	rsons		5	,
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10a   3,918,423   1	Ä	9	Prepaid expenses and deferred charges		19,597.		15,240.
b Less. accumulated depreciation    10b   2,069,095   1,835,762   10c   1,849,328     11   Investments - publicly traded securities   3,278,339   11   3,199,385     12   Investments - program-related. See Part IV, line 11   5,286,556   13   5,035,528     14   Intangible assets   14       15   Other assets. See Part IV, line 11   15   15     16   Total assets. Add lines 1 through 15 (must equal line 33)   11,425,302   16   11,353,122     17   Accounts payable and accrued expenses   45,409   17   74,357     18   Grants payable   7,175   19   61,637     19   Deferred revenue   7,175   19   61,637     20   Tax-exempt bond liabilities   20     21   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   22     23   Secured mortsgages and notes payable to unrelated third parties   26   131,538     24   Unsecured notes and loans payable to unrelated third parties   285,139   23   274,955     25   Total liabilities. Add lines 17 through 25   701,987     26   Total liabilities. Add lines 17 through 25   701,987     27   Net assets with donor restrictions   7,908,199   28   7,519,344     28   Net assets with donor restrictions   7,908,199   28   7,519,344     29   Statistics (including deferal income formal fund   30   7,908,199   28   7,519,344     30   Paddin or capital surplus, or land, building, or equipment fund   30   11,013,446   32   10,651,136     31   Retained earnings, endowment, accumulated income, or other funds   31   11,013,446   32   10,651,136     32   Total liabilities and net assets/fund balances   11,013,446   32   10,651,136     11,425,302   33   11,353,123     11,425,302   33   11,353,123     12,425,302   33   11,353,123     13,533,125   13,135,312     14,425,302   33   11,353,123     15,425,302   33   11,353,123     15,425,302   33   11,353,123     15,425,302   33   11,353,123     15,425,302   33   11,353,123     15,425,302   33   11,353,123     15,42		10a	Land, buildings, and equipment cost or other				
11   Investments : publicity traded securities   3 , 278 , 339		'	basis. Complete Part VI of Schedule D 10			A SHARE	
12   Investments - other securities See Part IV, line 11   5 , 286 , 556		ь	Less. accumulated depreciation . 10	<u>ы 2,069,095.</u>			
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14   Intangible assets   14   15   15   15   16   Total assets. See Part IV, line 11   15   17   17   19   17   19   17   19   17   19   19		12			F 006 FF6		5 025 500
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33)  17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that do not rollow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  27 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here  and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31 Total liabilities and net assets/fund balances 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 32 Total liabilities and net assets/fund balances		13		5,286,556.	-	5,035,528.	
16 Total assets. Add lines 1 through 15 (must equal line 33)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 - Escrow or custodial account liability Complete Part IV of Schedule D  22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Net assets with donor restrictions  28 Net assets with donor restrictions  29 Capital stock or trust principal, or current funds  29 Capital stock or furst principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  31 Total liabilities and net assets/fund balances  11, 013, 446. 32 10, 651, 136  31 Total liabilities and net assets/fund balances  11, 1425, 302. 16 11, 353, 123  171, 100. 18 159, 500  77, 175. 19 61, 637  77, 175. 19 61, 61, 637  77, 175. 19 61, 61, 637  77,		14	•		<del> </del> -		
Total liabilities and not payable and accrued expenses  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 - Escrow or custodial account liability Complete Part IV of Schedule D  22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  22 Secured mortgages and notes payable to unrelated third parties  23 Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Net assets with donor restrictions  28 Net assets with donor restrictions  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  31 Total liabilities and net assets/fund balances  33 Total liabilities and net assets/fund balances  45,409 • 17 71,100 • 18 159,500  71,175 • 19 61,637  71,100 • 18 159,500  71,175 • 19 61,637  720  721  22 Loans and other payables to related toric director, trustee, key employee, creator of founder, substantial contributor, or 35% controlled Date and other payables to unrelated third parties  28 2 13 274,955  29 21  28 25,139 • 23 274,955  411,856 • 26 701,987  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,343  3,105,247 • 27 3,131,787  7,908,199 • 28 7,519,349  3,105,247 • 27 3,131,787		1			11 425 202		11 252 122
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Per		l					
20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 41, 013, 4466. 32 10, 651, 136		l	•				
21 - Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33.  27 Net assets with donor restrictions 28 Net assets with donor restrictions 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances 38 Total liabilities and net assets/fund balances 39 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Patantal Relative Andreas Andre		l			7,173.		01,037.
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  Cither 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  Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  Total liabilities and net assets/fund balances  Total liabilities and net assets/fund balances  22  23  24  25  26  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  285, 139 . 23  274, 955  28  3, 033 . 25  3131, 538  27  3, 131, 787  7, 908, 199 . 28  7, 519, 349  29  29  20  21  22  22  22  23  274, 955  24  24  25  26  2701, 987  27  3, 131, 787  7, 908, 199 . 28  7, 519, 349  29  29  20  21  22  23  274, 955  24  24  25  26  27  27  3, 131, 787  7, 908, 199 . 28  7, 519, 349  29  29  20  20  21  21  22  22  23  274, 955  24  24  25  26  27  27  3, 131, 787  7, 908, 199 . 28  7, 519, 349  29  29  20  21  21  22  23  24  24  25  24  26  27  27  27  27  27  27  27  27  27			•	IV of Schedule D			-
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  Cher 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  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  28 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  31 Retained earnings, endowment, accumulated income, or other funds  32 Total net assets or fund balances  33 Total liabilities and net assets/fund balances  34 Total liabilities and net assets/fund balances  35 Total liabilities and net assets/fund balances  36 Secured mortgages and notes payable to unrelated third parties  28 28 J.139 . 23 274 , 955  29 23 274 , 955  24 Unsecured notes and loans payable to unrelated third parties  29 4 J.  30 J. 31 J. 3						ASSESSED OF	
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances	ties	22					
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances	Ē				**************************************	22	Binding and more comment on the Kinner of Marie
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X. of Schedule D 26 Total liabilities. Add lines 17 through 25  Corganizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Corganizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 34 Unsecured notes and loans payable to unrelated third parties to related third parties to relate third parties to related third parties to relate third parties to related third parties to relate third parties to related third parties to relate	Ľ	23			285,139.	<del></del>	274,955.
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  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  28 Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  31 Total liabilities and net assets/fund balances  11,013,446. 32 10,651,136							
parties, and other liabilities not included on lines 17-24) Complete Part X. of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions  Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here  and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 11, 425, 302. 33 11, 353, 123		ı			,		,
of Schedule D  26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  Organizations that do not follow FASB ASC 958, check here Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  Total liabilities and net assets/fund balances  11,013,446. 32 10,651,136							,
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances  Total liabilities and net assets/fund balances  Organizations that follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 1, 013, 446. 32 10, 651, 136					3,033.	25	131,538.
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 11, 013, 446. 32 10, 651, 136		26_	Total liabilities. Add lines 17 through 25	•	411,856.	26	701,987.
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123			Organizations that follow FASB ASC 958, check h	ere 🕨 🗓			
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	Ses		and complete lines 27, 28, 32, and 33.				
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	au	27	Net assets without donor restrictions				3,131,787.
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	Ва	28		_	7,908,199.	28	7,519,349.
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	pur	ĺ	Organizations that do not follow FASB ASC 958, or	check here 🕨 🔔			
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	Ţ						
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	S O	29	·				<u> </u>
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	seq	30 :					
33 Total liabilities and net assets/fund balances 11, 425, 302. 33 11, 353, 123	t As	31		e, or other funds	11 012 446	_	10 651 136
	Se	l		•			
		33	Total liabilities and net assets/fund balances		11,420,302.	33	Form <b>990</b> (2020

Form	990 (2020) OF THE UNIVERSITY OF ILLINOIS	37-	0661257	Pag	<sub>le</sub> 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	799		
2	Total expenses (must equal Part IX, column (A), line 25)	2	881		
3	Revenue less expenses. Subtract line 2 from line 1	3	-81		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,013		
5	Net unrealized gains (losses) on investments	5	-29	,36	<u>52.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-251	.,02	<u> </u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,	ł			
	column (B))	10	10,651	,13	<u> 36.</u>
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<del> </del>		X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		;		- ,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	š, ÷.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	\$ 2 1 ° 14	,	<u>,</u> }*
	separate basis, consolidated basis, or both		' '		,
	Separate basis Consolidated basis Both consolidated and separate basis		<u>`</u>	b	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		ti.	,
	consolidated basis, or both			*	12
	X Separate basis Consolidated basis Both consolidated and separate basis		<del>                                     </del>		• •
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	: audit,		., l	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	r 577 - 1
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch			•	3, -
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audr	1 1		v
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	0000
			Form	コタリ (	2020)

# SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

10

d

Name of the organization

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

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

► Attach to Form 990 or Form 990-EZ.

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

Inspection
Employer identification number

OMB No. 1545-0047

Open to Public

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

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iiv). (Complete Part II)

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

YOUNG MEN'S CHRISTIAN ASSOCIATION

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)

A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)

An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college

or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or

university

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975

See section 509(a)(2). (Complete Part III)

An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g	Provide the following information	about the supporte	d organization(s)				
	(i) Name of supported	(ii) EIN	(III) Type of organization	(iv) Is the organization listed in your governing document?		(v) Amount of monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
	_						
			·			-	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990 EZ) 2020 OF THE UNIVERSITY OF ILLINOIS

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

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

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	564,301.	530,453.	925,852.	733,558.	525,940.	3280104.			
2	Tax revenues levied for the organ-									
	ızatıon's benefit and either paid to									
	or expended on its behalf			. <del>_</del>			. <u> </u>			
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	564,301.	530,453.	925,852.	733,558.	525,940.	3280104.			
5										
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)									
6	Public support. Subtract line 5 from line 4				urrania ni		3280104.			
_	ction B. Total Support				·					
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
7	Amounts from line 4	564,301.	530,453.	925,852.	733,558.	525,940.	3280104.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	492,736.	1150174.	36,632.	1720297.	244,544.	3644383.			
9	Net income from unrelated business									
	activities, whether or not the					1				
	business is regularly carried on									
10	Other income Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI)			97,139.	74,286.	29,410.	200,835.			
11	Total support. Add lines 7 through 10		SICHERAL PROPERTY.				7125322.			
12	Gross receipts from related activities,	etc (see instruction	ons)	~		12				
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)				
	organization, check this box and stop	o here					<b>▶</b> □			
Sec	ction C. Computation of Publi	ic Support Per	centage				15.00			
14	Public support percentage for 2020 (I	ine 6, column (f), d	livided by line 11, o	column (f))		14	46.03 %			
	Public support percentage from 2019					15	44.51 %			
16a	33 1/3% support test - 2020. If the	organization did no	ot check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box				
	stop here. The organization qualifies		_				ightharpoons X			
b	33 1/3% support test - 2019. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check the	s box			
	and stop here. The organization qual									
17a	10% -facts-and-circumstances test									
	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	- 2019. If the org	janization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 1	10% or			
	more, and if the organization meets the	he facts-and-circun	nstances test, che	ck this box and st	t <b>op here.</b> Explain ii	n Part VI how the				
	organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization									
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions				
					Sche	dule A (Form 990	or 990-EZ) 2020			

Schedule A (Form 990 or 990-EZ) 2020 OF THE UNIVERSITY OF ILLINOIS

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

Support Concude for Organizations Described in Section Gooday(2)		
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II	I If the organization fail:	s to
qualify under the tests listed below, please complete Part II)		
A. Public Support		

Sec	ction A. Public Support	blow, pleaded doing	noto i die ii j			/	_
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not					/	
	include any "unusual grants ")						
2	Gross receipts from admissions,					<i>Y</i>	
	merchandise sold or services per-				/		
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						_
	are not an unrelated trade or bus-				/	]	
	iness under section 513						
4	Tax revenues levied for the organ-				<i>[</i> /		
	ization's benefit and either paid to	,		/			
	or expended on its behalf					-	
5	The value of services or facilities	1					
	furnished by a governmental unit to	ļ					
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and			_			_
	3 received from disqualified persons		ļ <i>,</i>	/			
t	Amounts included on lines 2 and 3 received		/		1		
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		/				
	amount on line 13 for the year				ļ		
•	Add lines 7a and 7b		/			ļ	
	Public support. (Subtract line 7c from line 6)						
Se	ction B. Total Support	·		1			
Cale	endar year (or fiscal year beginning in)	(a) 2016	/ <b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
_	Amounts from line 6		V			ļ	
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b				,		
11	Net income from unrelated business activities not included in line 10b.	/					
	whether or not the business is	<b>/</b>					
	regularly carned on						<u>.</u>
12	Other income Do not include gain or loss from the sale of capital			Ì	1		
	assets (Explain in Part VI)						
	Total support (Add lines 9, 10c, 11, and 12)				1	1	<u> </u>
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) organizatio	on,
<u> </u>	check this box and stop here ction C. Computation of Publi	io Support Do-	centage			·	
	<del></del>					45	
	Public support percentage for 2020 (I		_	column (I))	•	15	%
	Public support percentage from 2019 ction D. Computation of Inves					16	<u>%</u>
				ne 13 column (A)		17	0/
	Investment income percentage for 20			ne is, column (f))		18	<u>%</u>
	Investment income percentage from			on line 14 and line	15 is more than 5	<del></del>	
198	a 33 1/3% support tests - 2020. If the pore than 33 1/3%, check this box at	_					IS HUL
		=			-		nd P
	33 1/3% support tests - 2019. If the line 18 is not more than 33 1/3%, che	<del>-</del>					
20	Private foundation If the organization			•	• •	=	

### Schedule A (Form 990 or 990 EZ) 2020 OF THE UNIVERSITY OF ILLINOIS

Part V Supporting Organizations

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

### Section A. All Supporting Organizations

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

I	Yes	No
	V. 2.	32.
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Par	Supporting Organizations (continued)		
		Ye:	No.
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and		
	11c below, the governing body of a supported organization?	11a	
b	A family member of a person described in line 11a above?	11b	
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI.	11c	
Sec	tion B. Type I Supporting Organizations		
		Ye:	No No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,		( Pig
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)		
	effectively operated, supervised, or controlled the organization's activities of the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	
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,		
	supervised, or controlled the supporting organization.	2	$\perp$
Sec	tion C. Type II Supporting Organizations		
	•	Ye	s No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
	the supported organization(s).	1	
Sec	tion D. All Type III Supporting Organizations		
		Ye	s No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
	supported organizations played in this regard.	3	
Sec	tion E. Type III Functionally Integrated Supporting Organizations		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	<b>)</b> .	
а	The organization satisfied the Activities Test Complete line 2 below		
b	The organization is the parent of each of its supported organizations Complete line 3 below.		
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ii	nstruction <u>s).</u>	
2	Activities Test Answer lines 2a and 2b below.	Ye	s No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.	2a	
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in		
	these activities but for the organization's involvement	2b	
3	Parent of Supported Organizations Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	`3a	
b			
_	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	$\perp$

### YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule A (Form 990 or 990-EZ) 2020 OF THE UNIVERSITY OF ILLINOIS 37-0661257 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 4 Add lines 1 through 3 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) 1a a Average monthly value of securities 1b b Average monthly cash balances c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. Cash deemed held for exempt use Enter 0 015 of line 3 (for greater amount, 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0 035 Recoveries of prior-year distributions 7 R Minimum Asset Amount (add line 7 to line 6) **Current Year** Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2020

instructions)

37-0661257 Page 7

Schedule A (Form 990 or 990 EZ) 2020 OF THE UNIVERSITY OF ILLINOIS 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 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 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 6 Other distributions (describe in Part VI) See instructions 6 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI) See instructions. 9 Distributable amount for 2020 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount 10 (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2020 Pre-2020 Distributable amount for 2020 from Section C, line 6 Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI) See instructions 3 Excess distributions carryover, if any, to 2020 a From 2015 **b** From 2016 c From 2017 d From 2018 e From 2019 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2020 distributable amount i Carryover from 2015 not applied (see instructions) j Remainder Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2020 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2020 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2020, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions 7 Excess distributions carryover to 2021. Add lines 3j and 4c Breakdown of line 7: a Excess from 2016 b Excess from 2017 c Excess from 2018 d Excess from 2019 e Excess from 2020

Schedule A (Form 990 or 990-EZ) 2020

### YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule A (Form 990 or 990-EZ) 2020 OF THE UNIVERSITY OF ILLINOIS	37-0661257 Page 8
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 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 line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V,	17b; Part III, line 12, and 2, Part IV, Section C, , Section B, line 1e; Part V,
Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any addition (See instructions)	al information
PART II, SHORT YEAR EXPLANATION:	<del></del>
THE ORGANIZATION IS FILING A SHORT YEAR RETURN AS IT HAS CHAI	NGED FROM A
CALENDAR YEAR END TO A JUNE 30 YEAR END.	
	····

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

➤ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS

**Employer identification number** 37-0661257

Par			or Acc	counts.	<ul> <li>Complete if the</li> </ul>	ne
	organization answered "Yes" on Form 990, Part IV, lin					
		(a) Donor advised funds	(b	) Funds	and other accou	ints
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	S		
	are the organization's property, subject to the organization's $% \left( 1\right) =\left( 1\right) \left( 1$	exclusive legal control?			Yes	L No
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose o	conferni	ng		
	impermissible private benefit?				Yes	No_
Pai	<del> </del>		Part IV, I	line 7.		
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recrea			•		ł
	Protection of natural habitat	Preservation of	a certifi	ied histor	ic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of	of a con F			
	day of the tax year.				ld at the End of th	e lax Year
a	Total number of conservation easements		F	2a		
b	Total acreage restricted by conservation easements		ŀ	2b		
C	Number of conservation easements on a certified historic str		<b>.</b>	2c		
d	Number of conservation easements included in (c) acquired a	arter //25/06, and not on a historic structul	ire	ایم		
_	listed in the National Register	langed and an engineering and an engineering but the	L	2d	and the tex	
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	Organiz	auon uui	ing the tax	
	year >	noment in located				
4	Number of states where property subject to conservation eas Does the organization have a written policy regarding the per	•				
5	violations, and enforcement of the conservation easements if				Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,		ervation	n easeme		
U	Starrand volunteer round devoted to monitoring, inspecting,	Training of Violations, and otherwing cons	or valior		ino damig the y	<b>.</b>
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	tion easi	ements o	luring the year	
•	► \$	g			, , , , , , , , , , , , , , , , , , , ,	
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(r	h)(4)(B)(ī	)		
	and section 170(h)(4)(B)(ii)?	• ,			Yes	No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	stateme	ent and		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	ents that	t describ	es the	
	organization's accounting for conservation easements					
Pa	t III Organizations Maintaining Collections of		her Si	milar A	ssets.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	68, not to report in its revenue statement ai	nd balaı	nce shee	t works	
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in fu	ırtherand	ce of pub	olic	
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these item:	s			
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and b	palance	sheet wo	orks of	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance	of public	service,	
	provide the following amounts relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$_		
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical tre		l gaın, p	rovide		
	the following amounts required to be reported under FASB A	ASC 958 relating to these items				
	Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$_		<del>-</del>
	Assets included in Form 990, Part X			<u> </u>		000) 0000
ΙНΔ	For Panerwork Reduction Act Notice, see the Instruction	e tor Form 990		50	hedule D (Form	994 N 2020

# YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS

Sche		JNIVERSITY				37-06			age 2
Par		ollections of Art	, Historical Tre	asures, or Oth	er Similar	Assets	(contin	rued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significant u	ise of its			
	collection items (check all that apply)								
а	Public exhibition	d		nange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co					se in Part :	XIII		
5	During the year, did the organization solicit or				lar assets		٦	_	٦
D	to be sold to raise funds rather than to be ma			-	5 000		Yes		No
Par	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Par	•	te if the organization	n answered "Yes"	on Form 990	, Part IV, I	ine 9, or		
				ar ather seeds a	at included				
па	Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermedia	ary for contributions	or other assets no	ot included	Г	Yes		No
L		and complete the fell	ovena tabla			٠	] 162		J 140
b	If "Yes," explain the arrangement in Part XIII a	and complete the folio	owing table				Amoun		
_	Beginning balance				1c	<del></del> -	Anoun		
c d	Additions during the year				1d				
e	Distributions during the year		•		1e	-			
f	Ending balance		•		1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. line 2	21, for escrow or cu	stodial account lia			Yes		No
	If "Yes," explain the arrangement in Part XIII								<u> </u>
Par									
		(a) Current year	(b) Pnor year	(c) Two years back		ears back	(e) Four	years	back
1a	Beginning of year balance	7,184,402.	6,414,809.	6,841,872	. 6,2	77,958.	5	988,	467.
ь	Contributions	22,434.	299,629.	249,787		19,970.		213,	600.
С	Net investment earnings, gains, and losses	-235,351.	727,522.	-422,271	. 7	78,534.		311,	271.
đ	Grants or scholarships	197,572.	193,300.	-167,300	2	33,600.	-	-193,	800.
е	Other expenditures for facilities	į				i			
	and programs	18,806.	64,258.	-87,279	<u>.                                     </u>				
f	Administrative expenses					-990.			580.
g	End of year balance	6,755,107.	7,184,402.	6,414,809	. 6,8	41,872.	6	277,	958.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)	) held as					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ►100	%							
С		%							
	The percentages on lines 2a, 2b, and 2c shou					_			
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held an	d administered for	the organiza	ition	ſ		
	by						0-6	Yes X	No
	(i) Unrelated organizations						3a(i)		X
_	(ii) Related organizations	tions listed as require	od on Cabadula D2				3a(ii) 3b		
	If "Yes" on line 3a(ii), are the related organization.  Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·							
Par	rt VI Land, Buildings, and Equipm		VIII CIII TUNUS						
	Complete if the organization answered		Part IV. line 11a S	ee Form 990. Part	X. line 10.				
	Description of property	(a) Cost or ot			Accumulate	ed	(d) Boo	k valu	—— е
	besomption of property	basis (investm			depreciation		(4, 500		-
1a	Land		6	1,081.			6.	1,0	81.
	Buildings				,583,47	74.	1,73		
	Leasehold improvements						-		
d	Equipment		50	8,166.	472,92	27.	3	5,2	39.
	Other			8,609.	12,69			5,9	
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part >					1,84		
						Schedule	D (Forn	n 990)	2020

Part VII Investments - Other Securities.	ERSITY OF ILL		-0661257 Page 3
Complete if the organization answered "Yes"			d of
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end	d-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			<del> </del>
<u>(F)</u>			
(G)			
(H)			A STATE OF THE STA
Fort VIII Investments - Program Related.			Concession of the second
Complete if the organization answered "Yes"	on Form 990, Part IV, line (b) Book value	11c See Form 990, Part X, line 13.  (c) Method of valuation: Cost or end	d of year market value
(a) Description of investment			
(1) BAILEY TRUST	5,035,528.	END-OF-YEAR MARKET	VALUE
(2)			· · · · · · · · · · · · · · · · · · ·
(3)			<del></del>
(4)			<del></del>
(5)			
(6)			
(7)			
(8)			
(9)	5,035,528.	1	
	on Form 990, Part IV, line Description	11d See Form 990, Part X, line 15	(b) Book value
(1)	<del> </del>		<del> </del>
(2)			
(3)		<del></del>	
(4)		<u> </u>	
(5)			
(6)			
(7)			
(8)			· · · · · · · · · · · · · · · · · · ·
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) lin Part X Other Liabilities.		<b>&gt;</b>	·1
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			2 4 2 2
(2) DEPOSITS			3,138
(3) PAYROLL PROTECTION PROGRA	M LOAN		128,400
(4)	<u>.                                    </u>		ļ
(5)			ļ . — — — —
(6)			
(7)	<u></u>		
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X. col. (B) lin	e 25.)	<b>&gt;</b>	131,538
2. Liability for uncertain tax positions. In Part XIII, provide		the organization's financial statements t	that reports the

organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2020

Pai	t XI Reconciliation of Revenue per Audited Financial Sta		levenue per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, II	ne 12a			
1	Total revenue, gains, and other support per audited financial statements			1	519,504.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-29,362.	- 22	
b	Donated services and use of facilities	2b		1.0*	
С	Recoveries of prior year grants	2c	054 000		
d	Other (Describe in Part XIII)	2d	-251,028.		000 000
е	Add lines 2a through 2d		-	2e	-280,390.
3	Subtract line 2e from line 1			3	799,894.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			0
С	Add lines 4a and 4b		ŀ	4c	799,89 <b>4.</b>
5		atomonte With	Evnenses ner B	5 oturn	
Pa			Expenses per n	etuiii.	
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a	<del> </del>		881,814.
1	Total expenses and losses per audited financial statements		ŀ	_1,	001,014.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	اما		· .	
a	Donated services and use of facilities	2a		, .	
þ	Pnor year adjustments	2b		NE -	
C	Other losses	2c			
d	Other (Describe in Part XIII ) .	2d		2e	0.
e	Add lines 2a through 2d		ŀ	3	881,814.
3	Subtract line 2e from line 1		Ì		001,011.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a		4b			
b	Other (Describe in Part XIII ) Add lines 4a and 4b	<u> </u>		4c	0.
с 5	Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I, line:	101		5	881,814.
	rt XIII Supplemental Information.	(0.)		<u> </u>	<u> </u>
-	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4: Part IV, lines 1b a	and 2b: Part V. line 4:	Part X.	line 2. Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a				
111103	20 and 40, and 1 are /m, into 22 and 10.7100 complete and part to provide a	,			
PAI	RT X, LINE 2:				
				•	<del></del>
TH	E ASSOCIATION IS A NONPROFIT ORGANIZATI	ON THAT IS	EXEMPT FR	OM II	NCOME
					<u> </u>
TA	KES UNDER SECTION 501(C)(3) OF THE INTE	RNAL REVEN	UE CODE (I	RC)	AND IS
NO'	T CLASSIFIED BY THE INTERNAL REVENUE SE	RVICE (IRS	) TO BE A	PRIV	ATE
FO	UNDATION UNDER SECTION 509(A) OF THE IR	RC.			
TH:	E ASSOCIATION FILES INFORMATION TAX RET	URNS IN TH	E U.S. FED	ERAL	AND
					_
IL:	LINOIS JURISDICTIONS. THE ASSOCIATION I	S NO LONGE	R SUBJECT	TO U	<u>.s.</u>
FE	DERAL, STATE, AND LOCAL INCOME TAX EXAM	INATIONS B	Y TAX AUTH	ORIT	IES FOR
YE	ARS ENDING PRIOR TO DECEMBER 31, 2017.				<del></del>
PA	RT XI, LINE 2D - OTHER ADJUSTMENTS:				

# YOUNG MEN'S CHRISTIAN ASSOCIATION 37-0661257 Page 5 OF THE UNIVERSITY OF ILLINOIS Schedule D (Form 990) 2020 Part XIII. Supplemental Information (continued) LOSS FROM CHANGE IN VALUE OF INTEREST IN PERPETUAL TRUST -251,028.

### 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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION
OF THE UNIVERSITY OF ILLINOIS

Employer identification number

Part I Fundraising Activities.	Complete if the organization answ			Form 990, Part IV, I	ne 17. Form 990-EZ	
required to complete this part  1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or key employees listed in Form 990, Pai b If "Yes," list the 10 highest paid individ	e Solicità f Solicità g Specia oral agreement with any individua rt VII) or entity in connection with p	ation of ation of al fundra al (includo professi	non-g gover using u ing of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	Yes	<del></del>
compensated at least \$5,000 by the o	•	uant to	agreer	nents under which ti	ie fundraiser is to be	•
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		ļ				
Total  3 List all states in which the organization or licensing	is registered or licensed to solicit	contrib	utions	or has been notified	ıt ıs exempt from re	gistration
		· · · · · ·				
LHA For Paperwork Reduction Act Notic	e, see the Instructions for Form	990 or	990-E		Schedule G (Form 9	90 or 990-EZ) 2020

### YOUNG MEN'S CHRISTIAN ASSOCIATION

Schedule G (Form 990 or 990 EZ) 2020 OF THE UNIVERSITY OF ILLINOIS 37-0661257 Page 2

- 1			(a) Event #1 ANNUAL	(b) Event #2	(c) Other events NONE	(d) Total events
1			DINNER		NONE	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Hevenue		Cuesa vaccinta	28,812.			28,812
9	1	Gross receipts	20,012.			
	2	Less: Contributions	28,812.		,	28,812.
4	3	Gross income (line 1 minus line 2)	· ·			
	4	Cash prizes				
	5	Noncash prizes	6,723.			6,723.
Seuses	6	Rent/facility costs	2,095.			2,095.
Direct Expenses	7	Food and beverages				
<u>ا</u> ت	8	Entertainment				
	9	Other direct expenses	1,055.		<u></u>	1,055
	10	Direct expense summary Add lines 4 throug	h 9 ın column (d)		<b>&gt;</b>	9,873
	11	Net income summary. Subtract line 10 from			. •	-9,873
a.	rt I	II 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.				<b></b>
اہ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
إيّ			(=, ===================================	bingo/progressive bingo	(1, 1 1 3 3 3	col (a) through col (c
Revenue		Gross revenue				
+		Gloss revenue			<del></del>	<del> </del>
- 1						
S	2	Cash prizes				
xpenses	2 3	Cash prizes  Noncash prizes				
Direct Expenses						
Direct Expenses	3	Noncash prizes  Rent/facility costs				
Direct Expenses	3	Noncash prizes	Yes %	Yes %	Yes %	
Direct Expenses	3	Noncash prizes  Rent/facility costs		Yes%	Yes%	
Direct Expenses	3 4 5	Noncash prizes  Rent/facility costs  Other direct expenses	No			
Direct Expenses	3 4 5 6 7	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor	No h 5 in column (d)		No No	
	3 4 5 6 7 8	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the gaming income summary. Subtract line	No h 5 in column (d) from line 1, column (d)	No .	No No	
9	3 4 5 6 7 8 En	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the gaming income summary. Subtract line ter the state(s) in which the organization conditions.	No h 5 in column (d) from line 1, column (d) ucts gaming activities:	No .	No No	
9 a	3 4 5 6 7 8 En ls t	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the gaming income summary. Subtract lines ter the state(s) in which the organization conduction to the organization licensed to conduct gaming and states.	No  h 5 in column (d)  from line 1, column (d)  ucts gaming activities: activities in each of these	No .	No No	
9 a	3 4 5 6 7 8 En ls t	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the gaming income summary. Subtract line ter the state(s) in which the organization conditions.	No  h 5 in column (d)  from line 1, column (d)  ucts gaming activities: activities in each of these	No .	No No	5
9 a b	3 4 5 6 7 8 Entire in	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the total prize the state (s) in which the organization conduct the organization licensed to conduct gaming a No, "explain:	No  h 5 in column (d)  from line 1, column (d)  ucts gaming activities: activities in each of these	No .	No No	Yes No
9 a b	3 4 5 6 7 8 En is t	Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through the gaming income summary. Subtract lines ter the state(s) in which the organization conduction to the organization licensed to conduct gaming and states.	No  h 5 in column (d)  from line 1, column (d)  ucts gaming activities: activities in each of these	No	No No	

٠,

### YOUNG MEN'S CHRISTIAN ASSOCIATION

Sch	edule G (Form 990 or 990-EZ) 2020 OF THE UNIVERSITY OF ILLINOIS	<u> 37-066</u>	<u> 1257</u>	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	□ No
	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?	<u></u>	Yes	No
13	Indicate the percentage of gaming activity conducted in.	-	_	
	The organization's facility	13	a	%
	An outside facility	13		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record		<u> </u>	
14	Effet the flame and address of the person who prepares the organization's gaming-special events books and record	,		
	Alexan N			
	Name			<del></del>
	Address >			
		_	٦.,	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	.∟	_ Yes	∟ No
t	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amo	unt		
	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			
	Carring that ages in contactors			
	Name			
	Name =			
	0			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions			
á	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
ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	ı the		
	organization's own exempt activities during the tax year > \$			
Pa	Irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part III,	lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
		•		
_				
			<del></del>	<del></del>
	the state of the s			
0320	N83 11-25-20 Schedule	G (Form 99	0 or 990	-EZ) 2020

•	YOUNG MEN'S CHRISTIAN ASSOCIATION	
Schedule G (Form 990 or 990 EZ) Part IV Supplemental Info	OF THE UNIVERSITY OF ILLINOIS	37-0661257 Page 4
Part IV Supplemental Info	rmation (continued)	
	<del></del>	
	<del> </del>	
	· · · · · · · · · · · · · · · · · · ·	
•		

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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information	
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fort	
Form990	
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w.irs	

OMB No 1545-0047	2020	
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Open to Public Inspection

SESTING OF TLLINOIS Sestance S	Department of the Treasury Internal Revenue Service	1			Attach to Form 990. s.gov/Form990 for the la	► Attach to Form 990.  Go to www.irs.gov/Form990 for the latest information.	ation.	!	Open to Public Inspection	<del>,                                    </del>
and Assistance  To substantate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection  To sold provide a the amount of the grants or assistance.  To sold provide a the organizations are also of grant funds in the United States  To concepture for monitoring the use of grant funds in the United States  To sold Dear License of grant funds in the United States  To concepture for monitoring the use of grant funds in the last of grant funds of grant funds in the United States and Grant funds in the United St	ا ے		ITI		NOI				Employer identification number 37–0661257	
so to substantiate the amount of the grants or assistance, the granted states  Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any notice and provided states are determined flading that gapes is needed a split (if applicable) and Amount of Inn-cash (if applicable) (a provided state) (a policable) (a provided state) (a policable) (a provided state) (a policable) (a policable) (a provided state) (a policable) (a policable) (a provided state) (a policable) (a policab	יסו	rmation on Grants and	Assistance							- 1
o Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, In \$5,000 Part II can be duplicated if additional space is needed (if applicable) (ash grant cash grant assistance		tion maintain records to said the grants or assistar the organization's proce	substantiate the ance?	amount of the grants of	or assistance, the ( unds in the United	grantees' eligibility	for the grants or assis	stance, and the selection	Yes	
(b) EIN (c) IRC section (d) Amount of (e) Amount of (e) Amount of (e) assistance assistance (f applicable) (grant assistance other)  And government organizators listed in the line 1 table assistance of the properties of the prop		Other Assistance to Do	mestic Organiza	itions and Domestic e duplicated if additio	Governments. Con space is neede	complete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
In the line 1 table		ress of organization rnment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
ions listed in the line 1 table										1
ions listed in the line 1 table	I									1
ions listed in the line 1 table	I									1
ions listed in the line 1 table	I									1
ions listed in the line 1 table	1									1
ions listed in the line 1 table r Form 990.	1									1
r Form 990.	1 (1) (1)	r of section 501(c)(3) and r of other organizations lis	government orga	anizations listed in the table	line 1 table					1 1
		Reduction Act Notice, se	ee the Instructio	ns for Form 990.					Schedule I (Form 990) 2020	

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) 2020 शुस्त्रेत्राह्या Grants and Oth

Page 2

37-0661257

(f) Description of noncash assistance (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. ٠. (d) Amount of non-cash assistance ö 94,891. 195,500. (c) Amount of cash grant 147 78 (b) Number of recipients COVID-19 IMMIGRANT RELIEF FUND EMERGENCY AID (a) Type of grant or assistance SCHOLARSHIPS PartiV

032102 11-02-20

Schedule I (Form 990) 2020

### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS

**Employer identification number** 37-0661257

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COMMUNITIES TO DEVELOP AND PRACTICE ETHICAL PRINCIPLES AND RESPONSIBLE
LEADERSHIP FOR SOCIAL JUSTICE AND THE INTEGRITY OF OUR NATURAL WORLD.
THE SERVICES PROVIDED BY THE PROGRAMS INCLUDE INTEGRATION AMONG
DIFFERENT SOCIO-ECONOMIC LEVELS, CULTURES, RELIGIONS, RACES, AND
GENERATIONS FOR THE UNIVERSITY OF ILLINOIS AND CHAMPAIGN-URBANA
COMMUNITY. THE RESULTS OF THESE PROGRAMS ARE LEARNING LEADERSHIP
SKILLS, COMMITMENT, TOLERANCE AND VALUES FOR GOOD CITIZENSHIP.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ALL OTHER PROGRAMS
EXPENSES \$ 34,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ 10,399.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION DOES HAVE MEMBERS WHO MAY VOTE ON THE ELECTION OF MEMBERS
OF THE BOARD OF DIRECTORS IN CERTAIN CIRCUMSTANCES. HOWEVER, THE
ORGANIZATION'S MEMBERS DO NOT APPROVE SIGNIFICANT DECISIONS OF THE BOARD OF
DIRECTORS NOR DO THEY SHARE IN ANY INCOME OR PROFITS.
FORM 990, PART VI, SECTION A, LINE 7A:
THE ORGANIZATION DOES HAVE MEMBERS WHO MAY VOTE ON THE ELECTION OF MEMBERS
OF THE BOARD OF DIRECTORS IN CERTAIN CIRCUMSTANCES. HOWEVER, THE
ORGANIZATION'S MEMBERS DO NOT APPROVE SIGNIFICANT DECISIONS OF THE BOARD OF
DIRECTORS NOR DO THEY SHARE IN ANY INCOME OR PROFITS.

FORM 990, PART VI, SECTION B, LINE 11B:

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

Schedule O (Form 990 or 990-EZ) 2020

THE STEPS FOR DETERMINING THE EXECUTIVE DIRECTOR'S COMPENSATION ARE BASED ON REVIEWING COMPARABLE DATA FROM LIKE ORGANIZATIONS AND BUDGET CONSTRAINTS. THIS REVIEW AND THE SALARY GUIDELINES WERE COMPLETED BY THE PERSONNEL COMMITTEE. THE SALARY GUIDELINES WERE APPROVED BY THE BOARD OF

032212 11-20-20

Name of the organization YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE UNIVERSITY OF ILLINOIS	Employer identification numb
OVERNORS.	
COMPENSATION FOR OTHER KEY EMPLOYEES IS DETERMINED BY TH	E PERSONNEL
COMMITTEE BASED ON COST OF LIVING AND BUDGET CONSTRAINTS	. PERSONNEL
COMMITTEE BRINGS RECOMMENDATIONS TO THE BOARD OF GOVERNO	RS FOR FINAL
APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE DOCUMENTS ARE OPEN TO THE PUBLIC AT THE MAIN OFFICE,	1001 S. WRIGHT
ST., CHAMPAIGN, IL, UPON WRITTEN REQUEST. THERE WILL BE	A SMALL FEE FOR
COPYING CHARGES.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PROFESSIONAL FEES AND CONTRACTS:	
PROGRAM SERVICE EXPENSES	30,372
MANAGEMENT AND GENERAL EXPENSES	1,582
FUNDRAISING EXPENSES	6,233
TOTAL EXPENSES	38,187
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	38,187
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENS	ES:
ENGINEERS WITHOUT BORDERS:	
PROGRAM SERVICE EXPENSES	1,815
MANAGEMENT AND GENERAL EXPENSES	0
FUNDRAISING EXPENSES	0
TOTAL EXPENSES	1,815
AMNESTY INTERNATIONAL:	
)32212 11-20-20 A 1	Schedule O (Form 990 or 990-EZ) 2

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Schedule O (Form 990 or 990-EZ) 2020  Name of the organization	Employer identification number 37-0661257
PROGRAM SERVICE EXPENSES	600.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	600.
LA COLECTIVA:	
PROGRAM SERVICE EXPENSES	500.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	500.
STUDENTS FOR ENVIRONMENTAL CONCERNS:	
PROGRAM SERVICE EXPENSES	393.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	393.
INTERFAITH IN ACTION:	
PROGRAM SERVICE EXPENSES	286.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	286.
AWARDS:	
PROGRAM SERVICE EXPENSES	191.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	191.
092212 11-20-20	Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990 EZ) 2020  Name of the organization	Employer identification number 37-0661257
OI IIID ONIVERDATI OI IZBINOID	
GREEN OBSERVER:	
PROGRAM SERVICE EXPENSES	166.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	166.
STUDENT PROGRAMS:	
PROGRAM SERVICE EXPENSES	73.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	73.
RED BISON:	
PROGRAM SERVICE EXPENSES	3.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	4,027.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF INTEREST IN PERPETUAL TRUST	-251,028.
FORM 990, PART XII, LINE 2C:	
PROCESSES HAVE NOT CHANGED FROM THE PRIOR YEAR.	