**ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT**

**Attorney General LISA MADIGAN State of Illinois**
**Charitable Trust Bureau, 100 West Randolph**
**11th Floor, Chicago, Illinois 60601**

Report for the Fiscal Period:
**Beginning 7/01/18**
**& Ending 6/30/19**

<table>
<thead>
<tr>
<th>MO</th>
<th>DAY</th>
<th>YR</th>
</tr>
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<tbody>
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</table>

Federal ID # 36-2515625

Are contributions to the organization tax deductible? **Yes**

Date Organization was created: 1/01/1936

**LEGAL NAME** UNITED WAY OF WILL COUNTY

**MAIL**

**ADDRESS** 54 NORTH OTTAWA ST #300

**CITY, STATE** JOLIET, IL 60432-4345

**Z I N C**

<table>
<thead>
<tr>
<th>Year-end amounts</th>
<th>Year-end amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong> ASSETS</td>
<td><strong>$ 2,456,951.</strong></td>
</tr>
<tr>
<td><strong>B</strong> LIABILITIES</td>
<td><strong>$ 73,785.</strong></td>
</tr>
<tr>
<td><strong>C</strong> NET ASSETS</td>
<td><strong>$ 2,383,166.</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERCENTAGE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>99.45%</td>
<td>$ 2,876,488.</td>
</tr>
<tr>
<td>0.55%</td>
<td>$ 15,906.</td>
</tr>
<tr>
<td>100%</td>
<td>$ 2,892,394.</td>
</tr>
</tbody>
</table>

**SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:**

**D** PUBLIC SUPPORT, CONTRIBUTIONS AND PROGRAM SERVICE REVENUE (GROSS AMOUNTS)

**E** GOVERNMENT GRANTS AND MEMBERSHIP DUES

**F** OTHER REVENUES

**G** TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, AND F)

**SUMMARY OF ALL EXPENDITURES DURING THE YEAR:**

**H** OPERATING CHARITABLE PROGRAM EXPENSE

**I** EDUCATION PROGRAM SERVICE EXPENSE

**J** TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H AND I)

**K** GRANTS TO OTHER CHARITABLE ORGANIZATIONS

**L** TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J AND K)

**M** MANAGEMENT AND GENERAL EXPENSE

**N** FUNDRAISING EXPENSE

**O** TOTAL EXPENDITURES THIS PERIOD (ADD L, M, AND N)

**SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:**

(Attach Attorney General Report of Individual Fundraising Campaign — Form IFC. One for each PFR)

**PROFESSIONAL FUNDRAISERS:**

**P** TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS

**Q** TOTAL FUNDRAISERS FEES AND EXPENSES

**R** NET RECEIVED BY THE CHARITY (P MINUS Q=R)

**PROFESSIONAL FUNDRAISING CONSULTANTS:**

**S** TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS

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

**T NAME, TITLE:** MICHAEL HENNESSY, PRESIDENT & CEO

**U NAME, TITLE:** SARAH OPREDEK, SR DVLPMNT DIR

**V NAME, TITLE:** KRISTI HARRINGTON, FINANCE DIRECTR

**CHARITABLE PROGRAM DESCRIPTION:** CHARITABLE PROGRAM (3 HIGHEST BY $ EXPENDED) CODE CATEGORIES

**W DESCRIPTION:** ALLOCATIONS TO CHARITABLE ORGANIZATIONS

**X DESCRIPTION:**

**Y DESCRIPTION:**
IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6</td>
<td>DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7a</td>
<td>DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7b</td>
<td>IF 'YES', ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS $<em><strong><strong><strong><strong>; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES $</strong></strong></strong></strong></em>; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL $________<strong>; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING $</strong>_______</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8</td>
<td>DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SEE STATEMENT 2

12 NAME AND TELEPHONE NUMBER OF CONTACT PERSON: MICHAEL HENNESSY 815-723-2500

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT – SEE INSTRUCTIONS


BE SURE TO INCLUDE ALL FEES DUE:

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

TOM HERNANDEZ
PRESIDENT or TRUSTEE (PRINT NAME) SIGNATURE DATE

FRED GANDY
TREASURER or TRUSTEE (PRINT NAME) SIGNATURE DATE

STEWART YATES
PREPARE (PRINT NAME) SIGNATURE DATE

CUKIERSKI & COCHRANE, L.L.C.
1990 E ALGONQUIN ROAD STE 100
SCHAUMBURG, IL 60173

ILVA212L 02/07/17
STATEMENT 1
FORM AG990-IL, PAGE 1, LINE F
OTHER REVENUES

INTEREST .......................................................... $ 15,906.

TOTAL .............................................................. $ 15,906.

STATEMENT 2
FORM AG990-IL, PAGE 2, QUESTION 11
NAME AND ADDRESS OF INSTITUTIONS HOLDING THREE LARGEST ACCOUNTS

BMO HARRIS BANK
78 N CHICAGO ST JOLIET, IL 60432

FIRST MIDWEST BANK
PO BOX 580 JOLIET, IL 60434