**ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT**

**Report for the Fiscal Period:**
Beginning 06/01/2018 & Ending 05/31/2019

**LEGAL**

- **NAME:** ALTRUSA INTERNATIONAL FOUNDATION INC.
- **MAIL ADDRESS:** ONE NORTH LASALLE STREET, NO. 1955
- **CITY, STATE:** CHICAGO, IL
- **ZIP CODE:** 60602

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>D) PUBLIC SUPPORT, CONTRIBUTIONS &amp; PROGRAM SERVICE REV. (GROSS AMTS.)</td>
<td>72.124%</td>
<td>$342,468</td>
</tr>
<tr>
<td>E) GOVERNMENT GRANTS &amp; MEMBERSHIP DUES</td>
<td>27.876%</td>
<td>$132,365</td>
</tr>
<tr>
<td>G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, &amp; F)</td>
<td>100%</td>
<td>$474,833</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>H) OPERATING CHARITABLE PROGRAM EXPENSE</td>
<td>4.426%</td>
<td>$22,354</td>
</tr>
<tr>
<td>J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H &amp; I)</td>
<td>4.426%</td>
<td>$22,354</td>
</tr>
<tr>
<td>K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS</td>
<td>60.601%</td>
<td>$306,065</td>
</tr>
<tr>
<td>L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J &amp; K)</td>
<td>65.027%</td>
<td>$328,419</td>
</tr>
<tr>
<td>M) MANAGEMENT AND GENERAL EXPENSE</td>
<td>28.348%</td>
<td>$143,170</td>
</tr>
<tr>
<td>N) FUNDRAISING EXPENSE</td>
<td>6.626%</td>
<td>$33,463</td>
</tr>
<tr>
<td>O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, &amp; N)</td>
<td>100%</td>
<td>$505,052</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS</td>
<td>100%</td>
<td>$0</td>
</tr>
<tr>
<td>Q) TOTAL FUNDRAISERS FEES AND EXPENSES</td>
<td>%</td>
<td>$0</td>
</tr>
<tr>
<td>R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)</td>
<td>%</td>
<td>$0</td>
</tr>
</tbody>
</table>

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

- **T) NAME, TITLE:** SHAWNA KAISER, SECRETARY/FOUNDATION DIRECTOR
- **U) NAME, TITLE:**
- **V) NAME, TITLE:**

**V. CHARITABLE PROGRAM DESCRIPTION:**

- **DESCRIPTION:** GRANTS TO OTHER CHARITABLE ORGANIZATIONS

**CODE:** List on back side of instructions

**AMOUNT:** $150
IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?  
   YES ☑ NO ☐

2. 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?  
   YES ☐ NO ☑

3. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?  
   YES ☐ NO ☑

4. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?  
   YES ☑ NO ☐

5. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?  
   YES ☐ NO ☑

6. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)  
   YES ☐ NO ☑

7a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?  
   YES ☐ NO ☑

7b. IF ‘YES’, ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS $  
   ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES $  
   ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL $  
   ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING $  

8. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?  
   YES ☑ NO ☐

9. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?  
   YES ☑ NO ☐

10. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?  
    YES ☐ NO ☑

11. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:

   US BANK, 1555 NORTH RIVERCENTER DRIVE, SUITE 300, MILWAUKEE, WI 53212

   WELLS FARGO ADVISORS, 71-703 HWY 111, STE 1C/2C, RANCHO MIRAGE, CA 92270

   JPMORGAN CHASE BANK, 1111 POLARIS PARKWAY, COLUMBUS, OH 43240

12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: SHAWNA KAISER – 312-427-4410

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.

LINDA ROBISON
PRESIDENT or TRUSTEE (PRINT NAME)  SIGNATURE  DATE

SUSAN CARPENTER
TREASURER or TRUSTEE (PRINT NAME)  SIGNATURE  DATE

MARCY STEINDLER
PREPARER (PRINT NAME)  SIGNATURE  DATE