

A COMPLETE ANNUAL FINANCIAL REPORT (AG990-IL with all required attachments and applicable fees) is due within six months after the organization's fiscal year end. A REPORT WILL NOT BE CONSIDERED FILED UNLESS IT IS COMPLETE. A COMPLETE ANNUAL FINANCIAL REPORT must include the following items:

1. **\$15 Annual Filing Fee** - Make check or money order payable to "ILLINOIS CHARITY BUREAU FUND." An annual financial report submitted without proper fees will not be considered filed.
 - **Soliciting Organizations** are required to pay a \$15 Annual Report Filing Fee if gross contributions are greater than \$15,000 or assets are greater than \$25,000.
 - **Trust Organizations registered under the Charitable Trust Act only** are required to pay a \$15 Annual Report Filing Fee if gross revenues or assets are greater than \$25,000.
2. **Form AG990-IL** - Complete all sections and line items applicable to the organization. See 6 below for **Simplified Filing Option for Small Organizations**. An annual financial report submitted with an incomplete Form AG 990-IL will not be considered filed.
 - A. **CO#:** Include CO# on the Form AG 990-IL. Correct any incorrect name or address information if using preprinted form and highlight any corrections.
 - B. **SIGNATURES:** The Form AG 990-IL must be signed by **two** different officers (president or other authorized officer and the chief fiscal officer) or by **two** trustees. One signature shall be accepted if there is only one trustee. A Form AG 990-IL without required signatures is incomplete.
 - C. **Part I, Line D:** Report "contributions" as defined by the Solicitation for Charity Act. The Solicitation for Charity Act defines "contributions" to include the gross amounts of cash donations as well as gross sums paid by the public for merchandise, special events, rights or services of the organization. A Form AG 990-IL that fails to report "contributions" as defined by the Solicitation for Charity Act is incomplete. (A complete definition of "contribution" under the Solicitation for Charity Act is shown on the back of these instructions.)
 - D. **Part II, Line J1:** Report all program costs associated with a combined fund-raising appeal to the extent such was allocated to Charitable Program Service Expense and entered on line J as Charitable Program Service Expense. The amount should equal the amount reported on the back of the AG990-IL form, question 7b(ii). You must have and maintain the documentation to support the allocations made.
 - E. **Part III, Line S:** Report fees paid to all fund-raising consultants during the year. Attach a list identifying each consultant by name and address and specify the amount paid to each.
 - F. **Part V, Lines W, X, Y Program Service Codes:** Select up to three codes from those on back of these instructions which best describe the program service(s) for which the organization spent funds.
3. **IRS Return or Report** - IRS form 990 (excluding Schedule B), 990EZ (excluding Schedule B), 990PF, 1041, 1120 or other, must be attached if required by the IRS. If the organization did not file a federal return or report, attach explanation. An annual financial report submitted without the required federal return or report is incomplete.
4. **Audited Financial Statements** - must be attached by a public charity if contributions exceeded \$150,000 or if the public charity raised contributions in excess of \$25,000 through the services of professional fund-raiser. The Solicitation for Charity Act defines "contributions" to include the gross amounts of cash donations as well as gross sums paid by the public for merchandise, special events, rights or services of the organization. (A complete definition of "contribution" under the Solicitation for Charity Act is shown on the back of these instructions.) An annual financial report without required audited financial statements is incomplete.
5. **Form IFC - Report of Individual Fundraising Campaign** - If the organization used a paid professional fund-raiser, a separate Form IFC is required for each campaign, and each must be signed by both the professional fund-raiser and an officer or director of the organization. An annual financial report without the required Form IFC is incomplete.
6. **Simplified Filing Option for Small Organizations:**
 - **Soliciting Organizations** with gross contributions and assets of \$25,000 or less during the fiscal year may file an AG990-IL with all required signatures, disclosing only total revenue, total expenditures, and assets at the fiscal year end (Line A, G and O of the AG990-IL). A \$15 annual report filing fee is due only if gross contributions were more than \$15,000.
 - **Trust Organizations registered solely under the Charitable Trust Act** with gross revenue and assets of \$25,000 or less during the fiscal year may file an AG990-IL with all required signatures, disclosing only total revenue, total expenditures, and assets at the fiscal year end (Line A, G and O of the AG990-IL). A \$15 annual report filing fee is not due.

60 DAY EXTENSION and LATE REPORT FILING FEES:

- A 60 day extension will be granted only upon the filing of a written request with the Attorney General prior to the report due date.
- If a proper and complete annual report (AG990-IL with all required attachments and applicable fees) or a written extension request is not received prior to the due date, a \$100 late report filing fee (checks payable to the "Illinois Charity Bureau Fund") is required by Illinois law. The report cannot be accepted and will not be considered filed if it is late and the late fee is not paid.

Submit the complete annual financial report (AG990-IL with all required attachments and applicable fees) or written extension request to:

OFFICE OF THE ATTORNEY GENERAL
CHARITABLE TRUST BUREAU
ATTN: ANNUAL REPORT SECTION
100 WEST RANDOLPH STREET, 11th FLOOR
CHICAGO, ILLINOIS 60601-3175
(312) 814-2595

Section 1(b) of the Solicitation for Charity Act defines contributions as follows: "Contribution." The promise or grant of any money or property of any kind or value, including the promise to pay, except payments by union members of an organization. Reference to the dollar amount of "contributions" in this Act means in the case of promises to pay, or payments for merchandise or rights of any other description, the value of the total amount promised to be paid or paid for such merchandise or rights and not merely that portion of the purchase price to be applied to a charitable purpose. Contribution shall not include the proceeds from the sale of admission tickets by any not-for-profit music or dramatic arts organization which establishes, by such proof as the Attorney General may require, that it has received an exemption under Section 501(c)(3) of the Internal Revenue Code [26 U.S.C. @ 501 et seq.] and which is organized and operated for the presentation of live public performances of musical or theatrical works on a regular basis. For purposes of this subsection, union member dues and donated services shall not be deemed contributions. (225 ILCS 460/1(b))

Part V Lines W, X, Y Program Service Codes:

Charitable activity code numbers (select up to three codes which best describe the activity and/or the program service for which your organization expends funds). Enter in Part V of the first page of the AG 990-IL. Enter first the code which most accurately identifies you.

SCHOOLS

- 001 Pre-School
- 002 Elementary or High Schools
- 003 College & Universities
- 004 Trade Schools, Vocational Schools & Job Training

PUBLIC EDUCATION OTHER THAN SCHOOLS

- 010 Public Education by Mail
- 011 Seminars and Conferences
- 012 Other Educational Materials for the Public

RELIGIOUS ACTIVITIES

- 020 Church, Synagogue, etc.
- 021 Missionary Activities

CULTURAL AND HISTORICAL

- 030 Performing Arts (Ballet, Symphony, Theatre)
- 031 Art and/or Literature
- 032 Museum
- 033 Library
- 034 Historical Societies

RECREATIONAL & SOCIAL ACTIVITIES

- 040 Youth
- 041 Adult
- 042 Music Groups & Youth Bands
- 043 Youth Clubs (i.e. Boy Scouts, Girl Scouts, 4-H, Boys Club, etc.)
- 044 Community Recreational facilities

RESEARCH

- 050 Scientific Research
- 051 Heart Disease Research
- 052 Cancer Research
- 053 Other Medical and Disease Research

HEALTH FACILITIES

- 060 Hospitals
- 061 Nursing Homes
- 062 Health Clinics
- 063 HMO
- 064 Hospice

ANIMAL WELFARE

- 070 Animal Shelter, Humane Society and/or Anti-cruelty Society
- 071 Wildlife Preservation & Shelter for Wildlife

ENVIRONMENT

- 080 Preservation & Conservation of Natural Resources
- 081 Prevention of Pollution

CIVIC ACTIVITIES

- 090 Legal Services and legal Aid
- 091 Civil Rights Activities

PUBLIC POLICY

- 100 Legislative and Political Activities
- 101 Lobbying & Advocacy
- 102 Consumer Interest Group (non-education)
- 103 Peace
- 104 Other Public Policy

HUMAN SERVICES

- 110 Day Care Centers
- 111 Family and Individual Services
- 112 Neighborhood and Community Development
- 113 Nursing Services (i.e. Home Care)
- 114 Programs for Minority Advocacy
- 115 Programs for Needy Children
- 116 Rescue and Emergency Service
- 117 Services for the Aged
- 118 Services for Alcohol or Drug Abuse
- 119 Services for Blind Adults
- 120 Services for Blind Children
- 121 Services for Developmentally Disabled Adults
- 122 Services for Developmentally Disabled Children
- 123 Services for Handicapped Adults
- 124 Services for Handicapped Children
- 125 Services for the Hearing Impaired
- 126 Services for the Poor
- 127 Services for Veterans

HOUSING

- 130 Housing for Youth
- 131 Housing for the Poor
- 132 Housing for the Aged
- 133 Women Shelter
- 134 Housing for the Disabled

BENEFITTING PUBLIC SAFETY EMPLOYEES & FAMILY

- 140 Firemen & Families
- 141 Law Enforcement Personnel & Families

ACTIVITIES INVOLVING OTHER ORGANIZATIONS

- 150 Grants to Other Charitable Organizations
- 151 Furnished Services or Facilities to Other Organizations
- 152 Umbrella Parent Organization

OTHER PROGRAM SERVICES

- 200 Scholarships and Student loans

MISCELLANEOUS PROGRAM SERVICES

- 300 (Write in Description)

For Office Use Only

ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

Form AG990-IL

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

Revised 3/05

PMT #	_____
AMT	_____
INIT	_____

CO # 01024872

Report for the Fiscal Period:

Beginning 01 /01 /2008

& Ending 12 /31 /2008

Make Checks Payable to the Illinois Charitable Bureau Fund

Check all items attached:

<input checked="" type="checkbox"/>	Copy of IRS Return
<input checked="" type="checkbox"/>	Audited Financial Statements
<input type="checkbox"/>	Copy of Form IFC
<input checked="" type="checkbox"/>	\$15.00 Annual Report Filing Fee
<input checked="" type="checkbox"/>	\$100.00 Late Report Filing Fee

Federal ID # 36-3781104

Are contributions to the organization tax deductible? Yes No

Date Organization was created: 01 / 01 / 1989

LEGAL Dreams for Kids, Inc. NAME MAIL 155 N. Michigan Avenue ADDRESS Suite 700 CITY, STATE Chicago, IL ZIP CODE 60601	Year-end amounts	
	A) ASSETS	A) \$ 115,856
	B) LIABILITIES	B) \$ 40,800
	C) NET ASSETS	C) \$ 75,056
I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	100.6999%	D) \$ 279,968
E) GOVERNMENT GRANTS & MEMBERSHIP DUES	0.0000%	E) \$
F) OTHER REVENUES	-0.6999%	F) \$ -1,946
G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100%	G) \$ 278,022
II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:		
H) OPERATING CHARITABLE PROGRAM EXPENSE	84.0784%	H) \$ 264,223
I) EDUCATION PROGRAM SERVICE EXPENSE	0.0000%	I) \$
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	84.0784%	J) \$ 264,223
J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):		\$
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	0.0000%	K) \$
L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	84.0784%	L) \$ 264,223
M) MANAGEMENT AND GENERAL EXPENSE	15.2703%	M) \$ 47,988
N) FUNDRAISING EXPENSE	0.6514%	N) \$ 2,047
O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100%	O) \$ 314,258
III. 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	100%	P) \$
Q) TOTAL FUNDRAISERS FEES AND EXPENSES	0.0000%	Q) \$
R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	100.0000%	R) \$ 0
PROFESSIONAL FUNDRAISING CONSULTANTS:		
S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$ 0
IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:		
T) NAME, TITLE: MISHELE GONSCH - OPERATIONS DIRECTOR	T) \$	49,298
U) NAME, TITLE: HEATHER MIX - ADMINISTRATOR	U) \$	7,317
V) NAME, TITLE: MARY TYSON - PROGRAM COORDINATOR	V) \$	16,728
V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) CODE CATEGORIES	List on back side of instructions CODE	
W) DESCRIPTION: Youth leadership programs	W) #	300
X) DESCRIPTION: Services for Children with disabilities	X) #	124
Y) DESCRIPTION: Programs for needy children	Y) #	115

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?		X
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?		X
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?		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?		X
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		X
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)		X
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?		X
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?		X
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?		X
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?		X
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS: <u>CHARTER ONE BANK - CHICAGO, IL - HARRIS BANK - CHICAGO IL</u> <u>UBS FINANCIAL SERVICES, INC - OAKBROOK TERRACE IL</u>		
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: <u>THOMAS TUOHY - 312-729-5404</u>		

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

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.	<u>THOMAS TUOHY</u> PRESIDENT or TRUSTEE (PRINT NAME)	_____	_____
	SIGNATURE	DATE	
	<u>TREASURER or TRUSTEE (PRINT NAME)</u> <u>JOHN FERRENTINO, CPA</u> PREPARER (PRINT NAME)	_____	_____
	SIGNATURE	DATE	