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.

A  For the 2021 calendar year, or tax year beginning

B  Check if applicable:

Address change  

Change of name  

Initial return  

Final return/annulled  

Amended return  

Application pending

C  Name of organization  

FRIENDS OF THE FOREST PRESERVE  

DISTRICT OF WILL COUNTY

Doing business as  

17540 W LARAWAY ROAD

City or town, state or province, country, and ZIP or foreign postal code

JOLIET  IL  60433

D  Employer identification number

**-***3713

E  Telephone number

815-722-2022

F  Name and address of principal officer:

CYNTHIA A HARN  

17540 W LARAWAY ROAD  

JOLIET  IL  60433

G  Gross receipts $  

346,781

H  (a) Is this group return for subordinates?  

X No  

H  (b) Are all subordinates included?  

X Yes

If "No," attach a list. See instructions

I  Tax-exempt status:

X 501(c)(3)  

501(c) ( ) (insert no.)  

527

J  Websites: 

N/A

K  Form of organization:

Corporation  

Trust  

Association  

Other

L  Year of formation:  

2009

M  State of legal domicile:  

Ill

Part I  Summary

1  Briefly describe the organization's mission or most significant activities:

WE WORK TO CREATE A LEGACY OF GIVING THAT SUPPORTS AND CELEBRATES THE PRESERVATION, CONSERVATION, EDUCATION, AND RECREATION PRIORITIES OF THE FOREST PRESERVE DISTRICT OF WILL COUNTY IN PERPETUITY.

2  Check this box ☑️ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3  Number of voting members of the governing body (Part VI, line 1a)

4  Number of independent voting members of the governing body (Part VI, line 1b)

5  Total number of individuals employed in calendar year 2021 (Part V, line 2a)

6  Total number of volunteers (estimate if necessary)

7a  Total unrelated business revenue from Part VIII, column (C), line 12

7b  Net unrelated business taxable income from Form 990-T, Part I, line 11

8  Contributions and grants (Part VIII, line 1h)

9  Program service revenue (Part VIII, line 2a)

10  Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12  Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13  Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14  Benefits paid to or for members (Part IX, column (A), line 4)

15  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a  Professional fundraising fees (Part IX, column (A), line 11e)

17  Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18  Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19  Revenue less expenses. Subtract line 18 from line 12

20  Total assets (Part X, line 16)

21  Total liabilities (Part X, line 26)

22  Net assets or fund balances. Subtract line 21 from line 20

Part II  Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. A declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of chief executive officer

CYNTHIA A HARN  

EXECUTIVE DIRECTOR

Date

10/5/22

Preparer

Type or print name and title

THOMAS R. BERG  

DEANNA M. QUINN & ASSOCIATES, LTD.

16W343 83RD ST STE C  

BURLINGTON, IL 60527-7950

Phnx 630-353-0838

Form 990 (2021)
Form 990 (2021)  FRIENDS OF THE FOREST PRESERVE  **-***3713  Page 2

Part III Statement of Program Service Accomplishments
Check if Schedule O contains a response or note to any line in this Part III  

1 Briefly describe the organization's mission:

WE WORK TO CREATE A LEGACY OF GIVING THAT SUPPORTS AND CELEBRATES THE PRESERVATION, CONSERVATION, EDUCATION AND RECREATION PRIORITIES OF THE FOREST PRESERVE DISTRICT OF WILL COUNTY IN PERPETUITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  
   □ Yes  □ No
   If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  
   □ Yes  □ No
   If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code ) (Expenses $ 32,771 including grants of $ ) (Revenue $ )
   THE ORGANIZATION SUPPORTS THE FOREST PRESERVE DISTRICT OF WILL COUNTY'S PUBLIC SERVICE FUNCTIONS BY RAISING AND ADMINISTERING FUNDS.

4b (Code N/A) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code N/A) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses 32,771

Form 990 (2021)
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1</td>
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<td>20b</td>
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<td>21</td>
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</tr>
</tbody>
</table>
**Part IV** Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24a Did 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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>25b If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 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? If &quot;Yes,&quot; complete Schedule L, Part II.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 (including an employee thereof) or family member of any of these persons? If &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>33 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 &quot;Yes,&quot; complete Schedule R, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 117? Note: All Form 990 filers are required to complete Schedule O.</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
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</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td></td>
<td>2b</td>
</tr>
<tr>
<td>Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.</td>
<td></td>
<td>3a X</td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td></td>
<td>3b</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No&quot; to line 3b, provide an explanation on Schedule O</td>
<td></td>
<td>4a X</td>
</tr>
<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td></td>
<td>4b</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</td>
<td></td>
<td>5a X</td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td></td>
<td>5b X</td>
</tr>
<tr>
<td>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td></td>
<td>5c</td>
</tr>
<tr>
<td>c If &quot;Yes&quot; to line 5a or 5b, did the organization file Form 8888-T?</td>
<td></td>
<td>6a X</td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</td>
<td></td>
<td>6b</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td>7a X</td>
</tr>
<tr>
<td>7a Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
<td>7b</td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td>7c X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
<td>7d</td>
</tr>
<tr>
<td>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td></td>
<td>7e X</td>
</tr>
<tr>
<td>d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td></td>
<td>7f</td>
</tr>
<tr>
<td>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td></td>
<td>7g X</td>
</tr>
<tr>
<td>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td></td>
<td>7h</td>
</tr>
<tr>
<td>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
<td>8a</td>
</tr>
<tr>
<td>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td></td>
<td>9a</td>
</tr>
<tr>
<td>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td>9b</td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter:</td>
<td></td>
<td>10a</td>
</tr>
<tr>
<td>a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
<td>10b</td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td></td>
<td>11a</td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter:</td>
<td></td>
<td>11b</td>
</tr>
<tr>
<td>a Gross income from members or shareholders</td>
<td></td>
<td>12a</td>
</tr>
<tr>
<td>b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
<td>12b</td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td>12c</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td></td>
<td>13a</td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
<td>13b</td>
</tr>
<tr>
<td>Note: See the instructions for additional information the organization must report on Schedule O.</td>
<td></td>
<td>13c</td>
</tr>
<tr>
<td>b Enter the amount of reserves the organization is required to maintain in the states in which the organization is licensed to issue qualified health plans</td>
<td></td>
<td>14a X</td>
</tr>
<tr>
<td>c Enter the amount of reserves on hand</td>
<td></td>
<td>14b</td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td></td>
<td>14c</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation on Schedule O</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?</td>
<td></td>
<td>16 X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; see instructions and file Form 4720, Schedule N</td>
<td></td>
<td>16</td>
</tr>
<tr>
<td>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?</td>
<td></td>
<td>17</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; complete Form 4720, Schedule O</td>
<td></td>
<td>17</td>
</tr>
<tr>
<td>17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4962 or 4967?</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; complete Form 6069</td>
<td></td>
<td>19</td>
</tr>
</tbody>
</table>

Form 990 (2021)
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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

<table>
<thead>
<tr>
<th>1a</th>
<th>Enter the number of voting members of the governing body at the end of the tax year</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>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.</td>
</tr>
<tr>
<td>1b</td>
<td>Enter the number of voting members included on line 1a, above, who are independent</td>
</tr>
</tbody>
</table>

| 2  | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? |

| 3  | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? |

| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? |

| 5  | Did the organization become aware during the year of a significant diversion of the organization's assets? |

| 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 more members of the governing body? |

| 7b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or others other than the governing body? |

| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: |

| 8a | The governing body |

| 8b | Each committee with authority to act on behalf of the governing body |

| 9  | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| 10a | Did the organization have local chapters, branches, or affiliates? |

| 10b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, branches, or affiliates, and ensure their operations are consistent with the organization's exempt purposes? |

| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? |

| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 |

| 12b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? |

| 12c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done |

| 13 | Did the organization have a written whistleblower policy? |

| 14 | Did the organization have a written document retention and destruction policy? |

| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? |

| 16a | The organization's CEO, Executive Director, or top management official |

| 16b | Other officers or key employees of the organization |

| 16c | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. |

| 16d | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? |

| 16e | 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

| 17 | List the states with which a copy of this Form 990 is required to be filed: |

| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3) only) available for public inspection. Indicate how you made these available. Check all that apply. |

| 19 | 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. |

| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: |

<p>| CYNTHIA HARN | 17540 W LARNAY ROAD | 60433 | 815-722-2022 |</p>
<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ED GARNER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(2) DONALD GOULD</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(3) ANN DRALE</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(4) CYNTHIA A HARN</td>
<td>0.00</td>
<td>X</td>
<td>12,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EXECUTIVE DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>156,998</td>
<td>28,052</td>
</tr>
<tr>
<td>(5) RALPH SCHULTZ</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(6) JAMIE DONOVAN</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHAIRMAN</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) PENELIPE WAKELAND</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) MARCY DEMAURO</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SECRETARY</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) JIM FLAX</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TREASURER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) META MUELLER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) RACHEL VENTURA</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MEC/1099-NEC)</th>
<th>(E) Reportable compensation from related organization (W-2/1099-MEC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) DONNA THEIMER</td>
<td>0.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(13) REGAN PATTISON</td>
<td>0.00</td>
<td>VICE-CHAIR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(14) JEFF TUMINELLO</td>
<td>0.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1b Subtotal                                                  12,000   156,998  28,052

c Total from continuation sheets to Part VII, Section A       ▶                                                                                       ▶

d Total (add lines 1b and 1c)                                  ▶                                                                                       ▶

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual ▶

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual ▶

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person ▶

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

☑
### Part VIII  Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

#### Contributions, Gifts, Grants and Other Similar Amounts

<table>
<thead>
<tr>
<th>(a)</th>
<th>Total revenue</th>
<th>(b) Related or exempt function revenue</th>
<th>(c) Unrelated business revenue</th>
<th>(d) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f 275,383</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td>1g $</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Total. Add lines 1a-1f</strong></td>
<td>275,383</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Program Service Revenue

- 2a
- 2b
- 2c
- 2d
- 2e
- 2f All other program service revenue
- **Total. Add lines 2a-2f**

#### Investment Income (Including Dividends, Interest, and Other Similar Amounts)

<table>
<thead>
<tr>
<th>(a)</th>
<th>Total revenue</th>
<th>(b)</th>
<th>Related or exempt function revenue</th>
<th>(c)</th>
<th>Unrelated business revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>199</td>
<td>199</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Royalties

- 6a Gross rents (i) Real (ii) Personal
- 6b Less rental expenses
- 6c Rental inc. or (loss)
- 7a Net rental income or (loss) (i) Securities (ii) Other
- 7b Less cost or other expenses
- 7c Gain or (loss)

#### Other Revenue

- 8a Gross income from fundraising events (not including $ of contributions reported on line 1c. See Part IV, line 18)
- 8b Less: direct expenses
- 8c Net income or (loss) from fundraising events
- 9a Gross income from gaming activities. See Part IV, line 19
- 9b Less: direct expenses
- 9c Net income or (loss) from gaming activities
- 10a Gross sales of inventory, less returns and allowances
- 10b Less: cost of goods sold
- 10c Net income or (loss) from sales of inventory

#### Miscellaneous Revenue

- 11a
- b
- c
- d All other revenue
- **Total. Add lines 11a-11d**
- 12 Total revenue. See instructions 346,781 199 0 71,199
### Form 990 (2021) FRIENDS OF THE FOREST PRESERVE Page 10

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX

<table>
<thead>
<tr>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Fees for services (nonemployees): a Management</td>
<td>834</td>
<td>834</td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>553</td>
<td>553</td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)</td>
<td>54,941</td>
<td>11,515</td>
<td>43,426</td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>21,019</td>
<td>21,019</td>
<td></td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>396</td>
<td>237</td>
<td>159</td>
</tr>
<tr>
<td>14 Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 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). a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Total functional expenses, Add lines 1 through 24</td>
<td>77,743</td>
<td>32,771</td>
<td>1,546</td>
</tr>
<tr>
<td>26 Joint costs. Complete this line only if the organization reported in column (E) joint costs from a combined educational campaign and fundraising solicitation. Check here □ if following SOP 98-2 (ASC 958-720)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2021)
<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cash—non-interest-bearing</td>
<td>228,699</td>
<td>497,737</td>
</tr>
<tr>
<td>2. Savings and temporary cash investments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. 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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>10b. Less: accumulated depreciation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Investments—publicly traded securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Investments—other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Investments—program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Other assets. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>228,699</td>
<td>497,737</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Total liabilities. Add lines 17 through 25.</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

- Organizations that follow FASB ASC 958, check here □ and complete lines 27, 28, 32, and 33.
- Net assets without donor restrictions | 27 |
- Net assets with donor restrictions | 28 |
- Organizations that do not follow FASB ASC 958, check here □ and complete lines 29 through 33.
- Capital stock or trust principal, or current funds | 29 |
- Paid-in or capital surplus, or land, building, or equipment fund | 30 |
- Retained earnings, endowment, accumulated income, or other funds | 228,699 | 497,737 |
- Total net assets or fund balances | 228,699 | 497,737 |
- Total liabilities and net assets/fund balances | 228,699 | 497,737 |
### Part XI  Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI:

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>346,781</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>77,743</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>269,038</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>228,699</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>497,737</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Accounting method used to prepare the Form 990:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Accrual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Consolidated basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b Were the organization's financial statements audited by an independent accountant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Consolidated basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Public Charity Status and Public Support**

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

- [ ] 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).)
- [ ] 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 by the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- [ ] 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)(vii). (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).
- [x] 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - [x] 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.
  
  - [x] 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.
  
  - [x] 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.

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

- Enter the number of supported organizations:

<table>
<thead>
<tr>
<th>Name of supported organization</th>
<th>EIN</th>
<th>Amount of monetary support (see instructions)</th>
<th>Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) FOREST PRESERVE DISTRICT OF WILL COUNTY</td>
<td>**-***6668</td>
<td>X</td>
<td>1</td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
**FRIENDS OF THE FOREST PRESERVE**

**Schedule A (Form 990) 2021**

**Part II** Support Schedule for Organizations Described in Sections 170(b)(1)(A)(v) 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.)

### Section A. Public Support

**Calendar year (or fiscal year beginning in)** ▶

<table>
<thead>
<tr>
<th></th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
</table>

1. Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")

2. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

3. The value of services or facilities furnished by a governmental unit to the organization without charge

4. Total. Add lines 1 through 3

5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)

6. Public support, surcharge line 5 from line 4

### Section B. Total Support

**Calendar year (or fiscal year beginning in)** ▶

<table>
<thead>
<tr>
<th></th>
<th>(e) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
</table>

7. Amounts from line 4

8. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources

9. Net income from unrelated business activities, whether or not the business is regularly carried on

10. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)

11. Total support. Add lines 7 through 10

12. Gross receipts from related activities, etc. (see instructions) 12

13. First 8 years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

### Section C. Computation of Public Support Percentage

14. Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))

15. Public support percentage from 2020 Schedule A, Part II, line 14

16a. 33 1/3% support test—2021. If the organization did not check the box on line 11, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

16b. 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a. 10% facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

17b. 10% facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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**Schedule A (Form 990) 2021**

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**Page 2**
**Schedule A (Form 990) 2021**

**FRIENDS OF THE FOREST PRESERVE**

**Support Schedule for Organizations Described In Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 1 and 2 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First 5 years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))</th>
<th>16</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public support percentage for 2020 Schedule A, Part III, line 15</td>
<td>18</td>
<td>%</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))</th>
<th>17</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investment income percentage for 2020 Schedule A, Part III, line 17</td>
<td>18</td>
<td>%</td>
</tr>
</tbody>
</table>

| 19a 33 1/3% support tests—2021, if the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | |
| 19b 33 1/3% support tests—2020, if the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions | | |
Part IV 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

1. Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

3. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
   a. 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.
   b. 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.
   c. 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.
   d. 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.
   e. 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.
   f. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below. 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).

4. 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?

5. 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).

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 3b? If "Yes," complete Part I of Schedule L (Form 990).

9. 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.

10. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

11. Did a disqualified person (as defined on 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.

12. 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.

13. 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.)
Schedule A (Form 990) 2021

FRIENDS OF THE FOREST PRESERVE

Page 5

Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?
   a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and
      11c below, the governing body of a supported organization?
      11a X
   b A family member of a person described on line 11a above?
      11b X
   c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,
      provide details in Part VI.
      11c X

Section B. Type I Supporting Organizations

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,
   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. If 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 X

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 X

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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 on 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

Section 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).
   a 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.
   c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
   1

2 Activities Test. Answer lines 2a and 2b below.
   a 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 on 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 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each
      of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
      3b
### Part V

#### 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.

<table>
<thead>
<tr>
<th>Section A – Adjusted Net Income</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Recoveries of prior year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section B – Minimum Asset Amount</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Multiply line 5 by 0.035</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Recoveries of prior year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

### Section C – Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 0.85 of line 1</td>
<td>2</td>
</tr>
<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, column A)</td>
<td>3</td>
</tr>
<tr>
<td>4 Enter greater of line 2 or line 3</td>
<td>4</td>
</tr>
<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td>6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td>6</td>
</tr>
</tbody>
</table>

Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).
<table>
<thead>
<tr>
<th>Section D</th>
<th>Distribution Allocations (see instructions)</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Amounts paid to supported organizations to accomplish exempt purposes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Amounts paid to acquire exempt-use assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Other distributions (describe in Part VI), See instructions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Total annual distributions, Add lines 1 through 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Distributions to attactive supported organizations to which the organization is responsive (provide details in Part VI), See instructions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Distributable amount for 2021 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Line 8 amount divided by line 9 amount</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section E</th>
<th>Distribution Allocations (see instructions)</th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2021</th>
<th>(iii) Distributable Amount for 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Distributable amount for 2021 from Section C, line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI), See instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Excess distributions carryover, if any, to 2021</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a From 2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b From 2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c From 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d From 2019</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>e From 2020</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Total of lines 3a through 3e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Applied to 2021 distributable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i Carryover from 2016 not applied (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j Remainder, Subtract lines 3g, 3h, and 3j from line 3f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Distributions for 2021 from Section D, line 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Applied to 2021 distributable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Remainder, Subtract lines 4a and 4b from line 4</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>5 Remaining underdistributions for years prior to 2021, if any, Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI, See instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI, See instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Excess distributions carryover to 2022, Add lines 3j and 4c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Breakdown of line 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Excess from 2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Excess from 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Excess from 2019</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Excess from 2020</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Excess from 2021</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part VI  Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, 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 additional information. (See instructions.)
**SCHEDULE G** (Form 990)

**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.

[Go to IRS.gov/Form990 for instructions and the latest information.]

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Solicitation of non-government grants
   - Internet and email solicitations
   - Solicitation of government grants
   - Phone solicitations
   - Special fundraising events
   - In-person solicitations

2a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

   - Yes  [ ]
   - No  [ ]

b. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (ii)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td></td>
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<tr>
<td>4</td>
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<td>9</td>
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<tr>
<td>10</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990) 2021
Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Plant Sale</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>71,199</td>
<td>None</td>
<td>71,199</td>
<td></td>
</tr>
<tr>
<td>2 Less. Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>71,199</td>
<td>None</td>
<td>71,199</td>
<td></td>
</tr>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10 Direct expense summary. Add lines 4 through 9 in column (d) ▲

11 Net income summary. Subtract line 10 from line 3, column (d) ▲ 71,199

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>%</td>
<td>Yes</td>
<td>%</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d) ▲</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▲</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities.
   a. Is the organization licensed to conduct gaming activities in each of these states? □ Yes □ No
   b. If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? □ Yes □ No
   b. If "Yes," explain:
Schedule G (Form 990) 2021  

11 Does the organization conduct gaming activities with nonmembers?  
☐ Yes  ☐ No  

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  
☐ Yes  ☐ No  

13 Indicate the percentage of gaming activity conducted in:  
   a The organization's facility  
   ☐ %  
   b An outside facility  
   ☐ %  

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:  
Name ▶  
Address ▶  

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  
☐ Yes  ☐ No  

   b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $  

   c If "Yes," enter name and address of the third party:  
Name ▶  
Address ▶  

16 Gaming manager information:  
Name ▶  
Gaming manager compensation ▶ $  
Description of services provided ▶  
☐ Director/officer  ☐ Employee  ☐ Independent contractor  

17 Mandatory distributions:  
   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  
☐ Yes  ☐ No  

   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $  

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
## Part I Questions Regarding Compensation

1a. Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<table>
<thead>
<tr>
<th>Box</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>First-class or charter travel</td>
</tr>
<tr>
<td>☐</td>
<td>Travel for companions</td>
</tr>
<tr>
<td>☐</td>
<td>Tax negotiation and gross-up payments</td>
</tr>
<tr>
<td>☐</td>
<td>Discretionary spending account</td>
</tr>
<tr>
<td>☐</td>
<td>Housing allowance or residence for personal use</td>
</tr>
<tr>
<td>☐</td>
<td>Payments for business use of personal residence</td>
</tr>
<tr>
<td>☐</td>
<td>Health or social club dues or initiation fees</td>
</tr>
<tr>
<td>☐</td>
<td>Personal services (such as maid, chauffeur, chef)</td>
</tr>
</tbody>
</table>

b. If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2. Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3. Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

<table>
<thead>
<tr>
<th>Box</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>Compensation committee</td>
</tr>
<tr>
<td>☐</td>
<td>Independent compensation consultant</td>
</tr>
<tr>
<td>☐</td>
<td>Form 990 of other organizations</td>
</tr>
<tr>
<td>☐</td>
<td>Written employment contract</td>
</tr>
<tr>
<td>☐</td>
<td>Compensation survey or study</td>
</tr>
<tr>
<td>☐</td>
<td>Approval by the board or compensation committee</td>
</tr>
</tbody>
</table>

4. During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

   a. Receive a severance payment or change-of-control payment?
   b. Participate in or receive payment from a supplemental nonqualified retirement plan?
   c. Participate in or receive payment from an equity-based compensation arrangement?

   If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

   a. The organization?
   b. Any related organization?

   If "Yes" on line 5a or 5b, describe in Part III.

6. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

   a. The organization?
   b. Any related organization?

   If "Yes" on line 6a or 6b, describe in Part III.

7. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9. If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(a)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Schedule J (Form 990) 2021

**FRIENDS OF THE FOREST PRESERVE**

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (a) and from related organizations, described in the instructions, on row (b). Do not list any individuals that aren’t listed on Form 990, Part VII.

Note: The sum of columns (E)(a)-(E)(g) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Salaries of VPs and/or 1099-MISC and/or 1099-NEC Compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nonwage benefits</th>
<th>(E) Total of columns (B)-(D)</th>
<th>(F) Compensation reported on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RALPH SCHULTZ</strong></td>
<td>156,998</td>
<td>0</td>
<td>0</td>
<td>28,052</td>
<td>185,050</td>
</tr>
<tr>
<td>1 EX OFFICIO DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Part III - Other Additional Information

PART I, LINE 3

ALL MEMBERS OF THE ORGANIZATION ARE VOLUNTEERS AND THEREFORE NO
COMPENSATION DETERMINATIONS HAVE BEEN MADE. ALL COMPENSATION IS PAID BY
THE RELATED ORGANIZATION.
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 Form 990-EZ

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

** Form 990, Part VI, Line 3 – Management Delegated **


MATT CAMPBELL (ATTORNEY) – THIS INDIVIDUAL WORKS FOR THE LAW FIRM OF KGG LLC AND SERVES AS THE FOUNDATION'S ATTORNEY.


1a. The Board of Directors includes four Ex-Officio Directors that do not have voting rights as outlined in the Foundation's By-laws.

Form 990, Part VI, Line 11b – Organization's Process to Review Form 990

FORM 990 IS PROVIDED TO THE FINANCE COMMITTEE WHICH IS LED BY THE FOUNDATION'S TREASURER, FOR REVIEW, PRIOR TO FILING. UPON FILING, THIS FORM IS PROVIDED TO ALL BOARD MEMBERS ON THE FOUNDATION'S BOARD MEMBER...
PORTAL WHICH CONTAINS ALL PERTINENT FINANCIAL REPORTS AND DOCUMENTS, POLICIES, MEETING MINUTES AND AGENDAS. FORM 990 IS ALSO POSTED ON THE FOUNDATION'S WEBSITE, WILLCOUNTYNATURE.ORG FOR PUBLIC VIEWING.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
THE FOUNDATION HAS A CONFLICT OF INTEREST POLICY AND REQUIRES EACH BOARD MEMBER AND THE ED TO FILE AN ANNUAL DISCLOSURE OF CONFLICTS.

SECTION C DISCLOSURE, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE POSTED ON THE FOUNDATION'S WEBSITE AND ARE AVAILABLE BY REQUEST ANY TIME.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE POSTED ON THE FOUNDATION'S WEBSITE AND ARE AVAILABLE BY REQUEST AT ANY TIME.

Form 990, Part IX, Line 11g - Other Fees for Services

<table>
<thead>
<tr>
<th>Description</th>
<th>Tot/Prog</th>
<th>Service</th>
<th>Mgt &amp; General</th>
<th>Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRACT LABOR</td>
<td>$ 7,799</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>OTHER DIRECT EXPENSES</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 12,000</td>
</tr>
<tr>
<td>MISCELLANEOUS COMMODITIES</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 31,426</td>
<td></td>
</tr>
<tr>
<td>TAXES</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of the organization</td>
<td>Employer identification number</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF THE FOREST PRESERVE</td>
<td>3713</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3,716</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$11,515</td>
<td>$0</td>
<td>$43,426</td>
</tr>
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</table>

Page 2 of 2
<table>
<thead>
<tr>
<th>Name</th>
<th>2020</th>
<th>2021</th>
<th>Differences</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Contributions, gifts, grants</td>
<td>64,618</td>
<td>275,383</td>
<td>210,765</td>
</tr>
<tr>
<td>2. Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Government contributions and grants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Investment income</td>
<td>1,149</td>
<td>199</td>
<td>-950</td>
</tr>
<tr>
<td>6. Proceeds from tax exempt bonds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Net gain (or loss) from sale of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Net income (or loss) from fundraising events</td>
<td>24,129</td>
<td>71,199</td>
<td>47,070</td>
</tr>
<tr>
<td>9. Net income (or loss) from gaming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Net gain (or loss) on sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total revenue. Add lines 1 through 11</strong></td>
<td>89,896</td>
<td>346,781</td>
<td>256,885</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Grants and similar amounts paid</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Compensation of officers, directors, trustees, etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Salaries, other compensation, and employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Professional fundraising fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Other professional fees</td>
<td>23,693</td>
<td>56,328</td>
<td>32,635</td>
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<tr>
<td>19. Occupancy, rent, utilities, and maintenance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Depreciation and Depletion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Other expenses</td>
<td>68,390</td>
<td>21,415</td>
<td>-46,975</td>
</tr>
<tr>
<td>22. Total expenses. Add lines 13 through 21</td>
<td>92,083</td>
<td>77,743</td>
<td>-14,340</td>
</tr>
<tr>
<td>23. Excess or (Deficit). Subtract line 22 from line 12</td>
<td>-2,187</td>
<td>269,038</td>
<td>271,225</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>89,896</td>
<td>346,781</td>
<td>256,885</td>
</tr>
<tr>
<td><strong>Other Information</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Total exempt revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Total unrelated revenue</td>
<td>25,278</td>
<td>71,398</td>
<td>46,120</td>
</tr>
<tr>
<td>26. Total excludable revenue</td>
<td>228,699</td>
<td>497,737</td>
<td>269,038</td>
</tr>
<tr>
<td>27. Total assets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Total liabilities</td>
<td>228,699</td>
<td>497,737</td>
<td>269,038</td>
</tr>
<tr>
<td>29. Retained earnings</td>
<td>10</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>30. Number of voting members of governing body</td>
<td>10</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>31. Number of independent voting members of governing body</td>
<td>10</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>32. Number of employees</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>33. Number of volunteers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2017</td>
<td>2018</td>
<td>2019</td>
</tr>
<tr>
<td>--------------------------</td>
<td>------------</td>
<td>------------</td>
<td>------------</td>
</tr>
<tr>
<td>Contributions, gifts, grants</td>
<td>67,193</td>
<td>74,495</td>
<td>87,859</td>
</tr>
<tr>
<td>Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital gain or loss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment income</td>
<td></td>
<td></td>
<td>298</td>
</tr>
<tr>
<td>Fundraising revenue (income/loss)</td>
<td>37,119</td>
<td>45,001</td>
<td>62,085</td>
</tr>
<tr>
<td>Gaming revenue (income/loss)</td>
<td>2,567</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total revenue</td>
<td>106,879</td>
<td>119,496</td>
<td>150,369</td>
</tr>
<tr>
<td>Grants and similar amounts paid</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compensation of officers, etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other compensation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional fees</td>
<td>36,859</td>
<td>33,813</td>
<td>47,015</td>
</tr>
<tr>
<td>Occupancy costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation and depletion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other expenses</td>
<td>10,803</td>
<td>4,592</td>
<td>46,814</td>
</tr>
<tr>
<td>Total expenses</td>
<td>47,662</td>
<td>36,405</td>
<td>93,829</td>
</tr>
<tr>
<td>Excess or (Deficit)</td>
<td>59,217</td>
<td>81,091</td>
<td>56,540</td>
</tr>
<tr>
<td>Total exempt revenue</td>
<td>106,879</td>
<td>119,496</td>
<td>150,369</td>
</tr>
<tr>
<td>Total unrelated revenue</td>
<td>39,686</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total endurable revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Assets</td>
<td>93,255</td>
<td>174,346</td>
<td>230,886</td>
</tr>
<tr>
<td>Total Liabilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net Fund Balances</td>
<td>93,255</td>
<td>174,346</td>
<td>230,886</td>
</tr>
<tr>
<td>-------------------</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Total gross income</td>
<td>2,915</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td>$325,000</td>
<td>$223,000</td>
<td>$117,000</td>
</tr>
<tr>
<td>Exempt Revenue (Loss)</td>
<td>$452,000</td>
<td>$263,000</td>
<td>$154,000</td>
</tr>
<tr>
<td>Expenses_Deductions</td>
<td>$100,000</td>
<td>$80,000</td>
<td>$52,000</td>
</tr>
<tr>
<td>Net Exempt Revenue</td>
<td>$268,000</td>
<td>$134,000</td>
<td>$0</td>
</tr>
</tbody>
</table>

* Income shown net of expenses

- Business activity profits
- Capital gains/losses
- Partner and S Corp gains/losses
- Rental income
- Debt-financed income
- Controlled organization income/losses
- Investment income, specific organizations
- Exploited exempt activity income
- Other income
- Total trade or business income
- Compensation of officers, etc.
- Other salaries and wages
- Repairs and maintenance
- Bad debt
- Interest
- Taxes and licenses
- Charitable contributions
- Depreciation and depletion
- Deferred compensation plans
- Employee benefit programs
<table>
<thead>
<tr>
<th>Form 990T</th>
<th>Tax Return History</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>FRIENDS OF THE FOREST PRESERVE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DISTRICT OF WILL COUNTY</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Other deductions</th>
<th>Net income (first activity, year 2019 &amp; prior)</th>
<th>UBTI from all trades</th>
<th>Charitable contributions</th>
<th>Net operating loss deduction</th>
<th>Specific deduction</th>
<th>Section 199A deduction (trusts)</th>
<th>Income after deductions</th>
<th>Income tax (corporates or trusts)</th>
<th>Other taxes</th>
<th>Total taxes</th>
<th>General business credit</th>
<th>Other credits</th>
<th>Net tax after credits</th>
<th>Estimated tax payments</th>
<th>Other payments</th>
<th>Balance due/Overpayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>$1,976</td>
<td>$939</td>
<td>$939</td>
<td></td>
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<td>2018</td>
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<tr>
<td>2019</td>
<td></td>
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</tr>
<tr>
<td>2020</td>
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<td>2021</td>
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<td>2022</td>
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</tr>
</tbody>
</table>

### Graphs

#### Total Assets
- **$600,000**
- **$400,000**
- **$200,000**
- **$0**

- 2017
- 2018
- 2019
- 2020
- 2021

#### Total Liabilities
- **$30**
- **$20**
- **$10**
- **$0**

- 2017
- 2018
- 2019
- 2020
- 2021

#### Business Income (990T)
- **$30**
- **$20**
- **$10**
- **$0**

- 2017
- 2018
- 2019
- 2020
- 2021

#### Tax Due (990T)
- **$30**
- **$20**
- **$10**
- **$0**

- 2017
- 2018
- 2019
- 2020
- 2021
### Federal Statements

**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

<table>
<thead>
<tr>
<th>Description</th>
<th>Total Expenses</th>
<th>Program Service</th>
<th>Management &amp; General</th>
<th>Fund Raising</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRACT LABOR</td>
<td>$7,799</td>
<td>$7,799</td>
<td>$</td>
<td>$12,000</td>
</tr>
<tr>
<td>OTHER DIRECT EXPENSES</td>
<td>12,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MISCELLANEOUS COMMODITIES</td>
<td>31,426</td>
<td></td>
<td></td>
<td>31,426</td>
</tr>
<tr>
<td>TAXES</td>
<td>3,716</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$54,941</strong></td>
<td><strong>$11,515</strong></td>
<td><strong>$0</strong></td>
<td><strong>$43,426</strong></td>
</tr>
</tbody>
</table>
### PLANT SALE

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>BANK CC FEES</td>
<td>$</td>
</tr>
<tr>
<td>MARKETING</td>
<td></td>
</tr>
<tr>
<td>MISCELLANEOUS</td>
<td></td>
</tr>
<tr>
<td>PLANTS TO SELL</td>
<td></td>
</tr>
<tr>
<td>SUPPLIES</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$0</td>
</tr>
</tbody>
</table>
Illinois Return Summary

For calendar year 2021, or tax year beginning __________ and ending __________

FRIENDS OF THE FOREST PRESERVE **-***3713
DISTRICT OF WILL COUNTY

Amount you are paying (IL-990T)

Apportionment
Total sales everywhere
Total Illinois sales
Apportionment factor

Net income or loss
Investment credits
Net replacement tax
Income tax credits
Net income tax

Credit from prior year overpayment
Total estimated payments
Extension payment
Pass-through withholding payments
Pass-through entity tax credits
Gambling withholding
Total payments

Overpayment
Amount to credit forward
Refund

Tax due before penalty and interest
Late payment interest
Failure to pay penalty
Failure to file penalty
Total amount due

Next Year's Estimates

1st quarter
2nd quarter
3rd quarter
4th quarter
Total

Charitable Registration
Filing fee
Return / extended due date

Miscellaneous Information
Amended return
IL-990T due date / extended date

11/15/22
# ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

**Attorney General KWAME RAOUŁ State of Illinois**
Charitable Trust Bureau, 100 West Randoiph
11th Floor, Chicago, Illinois 60601

**CO # 01-066032**

Report for the Fiscal Period:

**Beginning 01/01/2021**

& **Ending 12/31/2021**

**Federal ID # 37-1330313**

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

**Date Organization was created:** 07/15/2009

---

<table>
<thead>
<tr>
<th>I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>D) PUBLIC SUPPORT, CONTRIBUTIONS &amp; PROGRAM SERVICE REV. (GROSS AMTS.)</td>
</tr>
<tr>
<td>E) GOVERNMENT GRANTS &amp; MEMBERSHIP DUES</td>
</tr>
<tr>
<td>F) OTHER REVENUES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>H) OPERATING CHARITABLE PROGRAM EXPENSE</td>
</tr>
<tr>
<td>J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H &amp; I)</td>
</tr>
<tr>
<td>J') JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J)</td>
</tr>
<tr>
<td>M) MANAGEMENT AND GENERAL EXPENSE</td>
</tr>
<tr>
<td>O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, &amp; N)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:</th>
</tr>
</thead>
<tbody>
<tr>
<td>P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>T) NAME</td>
</tr>
<tr>
<td>U) NAME</td>
</tr>
<tr>
<td>V) NAME</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY $ EXPENDED) CODE CATEGORIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>W) DESCRIPTION</td>
</tr>
<tr>
<td>X) DESCRIPTION</td>
</tr>
<tr>
<td>Y) DESCRIPTION</td>
</tr>
</tbody>
</table>
FRIENDS OF THE FOREST PRESERVE

**-***3713

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:
    FIRST MIDWEST BANK, 24509 W LOCKPORT ST., PLAINFIELD, IL 60544
    

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS


CYNTHIA HARN
PRESIDENT or TRUSTEE (PRINT NAME) SIGNATURE DATE

JAMES FLAX
TREASURER or TRUSTEE (PRINT NAME) SIGNATURE DATE

THOMAS R. BERG
PREPARER (PRINT NAME) SIGNATURE DATE

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.
Return of Organization Exempt From Income Tax

Under section 501(c), 627, or 4847(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.

A For the 2021 calendar year, or tax year beginning , and ending 

B Check if applicable: 

Address change 

Name change 

Initial return 

Final return/terminated 

Amended return 

Application pending 

C Name of organization: 

FRIENDS OF THE FOREST PRESERVE
DISTRICT OF WILL COUNTY

D Employer identification number: 

***-***3713

E Telephone number: 

815-722-2022

F Name and address of principal officer: 

CYNTHIA A HARN
17540 W LARAWAY ROAD
JOLIET IL 60433

G Gross receipts: 

346,781

I Tax-exempt status: 

X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527

J Website: 

N/A

K Form of organization: 

X Corporation 

Trust 

Association 

Other

Group exemption number: 

L Year of formation: 2009

M State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

WE WORK TO CREATE A LEGACY OF GIVING THAT SUPPORTS AND CELEBRATES THE PRESERVATION, CONSERVATION, EDUCATION, AND RECREATION PRIORITIES OF THE FOREST PRESERVE DISTRICT OF WILL COUNTY IN PERPETUITY.

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 

3 9

4 Number of independent voting members of the governing body (Part VI, line 1b) 

4 9

5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 

5 0

6 Total number of volunteers (estimate if necessary) 

6 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 

7a 0

7b Net unrelated business taxable income from Form 990-T, Part I, line 11 

7b 0

8 Contributions and grants (Part VIII, line 1h) 

Prior Year 64,618

Current Year 275,383

9 Program service revenue (Part VIII, line 2g) 

0

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 

1,149 199

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 

24,129 71,199

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 

89,896 346,781

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 

0

14 Benefits paid to or for members (Part IX, column (A), line 4) 

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 

0

16a Professional fundraising fees (Part IX, column (A), line 11e) 

0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 

92,083 77,743

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 

92,083 77,743

19 Revenue less expenses. Subtract line 18 from line 12 

-2,187 269,038

20 Total assets (Part X, line 16) 

228,699 497,737

21 Total liabilities (Part X, line 26) 

0 0

22 Net assets or fund balances. Subtract line 21 from line 20 

228,699 497,737

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: CYNTHIA A HARN

EXECUTIVE DIRECTOR

Date: 

Paid

Preparer

Use Only

Type or print name and title:

SIGNATURE

THOMAS R. BERG

Preparer’s signature: 

Date: 10/03/22

Check [ ] self-employed

PTIN: **************

Preparer

Firm’s name: DENNIS A. QUINN & ASSOCIATES, LTD.

Firm’s EIN: ******9275

Use Only

Firm’s address: 16W343 83RD ST STE C

Burr Ridge, IL 60527-7950

Phone no.: 630-325-0333

May the IRS discuss this return with the preparer shown above? See instructions: [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2021)
Part III  Statement of Program Service Accomplishments

1  Briefly describe the organization's mission:

WE WORK TO CREATE A LEGACY OF GIVING THAT SUPPORTS AND CELEBRATES THE PRESERVATION, CONSERVATION, EDUCATION AND RECREATION PRIORITIES OF THE FOREST PRESERVE DISTRICT OF WILL COUNTY IN PERPETUITY.

2  Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
   □ Yes  □ No
   If "Yes," describe these new services on Schedule O.

3  Did the organization cease conducting, or make significant changes in how it conducts, any program services?
   □ Yes  □ No
   If "Yes," describe these changes on Schedule O.

4  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:  ) (Expenses $ 32,771 including grants of $ ) (Revenue $ )
THE ORGANIZATION SUPPORTS THE FOREST PRESERVE DISTRICT OF WILL COUNTY'S PUBLIC SERVICE FUNCTIONS BY RAISING AND ADMINISTERING FUNDS.

4b (Code:  ) (Expenses $ including grants of $ ) (Revenue $ )
N/A

4c (Code:  ) (Expenses $ including grants of $ ) (Revenue $ )
N/A

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses $ 32,771

DAA
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If &quot;Yes,&quot; complete Schedule A</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?</td>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>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 &quot;Yes,&quot; complete Schedule C, Part II</td>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>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 Rev. Proc. 98-19? If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td>5</td>
<td>X</td>
</tr>
<tr>
<td>6</td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>7</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part II</td>
<td>7</td>
<td>X</td>
</tr>
<tr>
<td>8</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td>8</td>
<td>X</td>
</tr>
<tr>
<td>9</td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td>9</td>
<td>X</td>
</tr>
<tr>
<td>10</td>
<td>Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td>10</td>
<td>X</td>
</tr>
<tr>
<td>11</td>
<td>If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td>11b</td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td>11c</td>
<td>X</td>
</tr>
<tr>
<td>d</td>
<td>Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td>11d</td>
<td>X</td>
</tr>
<tr>
<td>e</td>
<td>Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td>11e</td>
<td>X</td>
</tr>
<tr>
<td>f</td>
<td>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td>11f</td>
<td>X</td>
</tr>
<tr>
<td>12a</td>
<td>Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td>12a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td>12b</td>
<td>X</td>
</tr>
<tr>
<td>13</td>
<td>Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>14a</td>
<td>Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>14a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td>14b</td>
<td>X</td>
</tr>
<tr>
<td>15</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td>15</td>
<td>X</td>
</tr>
<tr>
<td>16</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td>16</td>
<td>X</td>
</tr>
<tr>
<td>17</td>
<td>Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If &quot;Yes,&quot; complete Schedule G, Part I. See instructions</td>
<td>17</td>
<td>X</td>
</tr>
<tr>
<td>18</td>
<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td>18</td>
<td>X</td>
</tr>
<tr>
<td>19</td>
<td>Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td>19</td>
<td>X</td>
</tr>
<tr>
<td>20a</td>
<td>Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td>20a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>20b</td>
<td>X</td>
</tr>
<tr>
<td>21</td>
<td>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 17? If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td>21</td>
<td>X</td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----</td>
<td>----</td>
<td></td>
</tr>
<tr>
<td>22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27? If &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td></td>
<td>22 X</td>
<td></td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J.</td>
<td>23 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24a Did 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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td>24a X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year in lieu of any tax-exempt bonds?</td>
<td>24c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td>25a X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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-EZ? If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td>25b X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 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? If &quot;Yes,&quot; complete Schedule L, Part II.</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 (including an employee thereof) or family member of any of these persons? If &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td>27 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28a X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28b X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td>28c X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td>29 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td>30 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I.</td>
<td>31 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II.</td>
<td>32 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 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 &quot;Yes,&quot; complete Schedule R, Part I.</td>
<td>33 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1.</td>
<td>34 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>35a X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td>35b X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td>36 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI.</td>
<td>37 X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.</td>
<td>38 X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>2</td>
</tr>
<tr>
<td>b</td>
<td>0</td>
</tr>
<tr>
<td>c</td>
<td>1c</td>
</tr>
</tbody>
</table>

DAA

Form 990 (2021)

Page 4
2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, for the calendar year ending with or within the year covered by this return.  

2b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See Instructions.  

3a. Did the organization have unrelated business gross income of $1,000 or more during the year?  

b. If "Yes," has it filed a Form 990-T for this year? If "No" to line 3a, provide an explanation on Schedule O.  

4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  

b. If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  

5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

c. If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  

6a. Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  

b. If "Yes," did the organization include in every solicitation an express statement that such contributions or gifts were not tax deductible?  

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?  

b. If "Yes," did the organization notify the donor of the value of the goods or services provided?  

c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  

7d. If "Yes," indicate the number of Forms 8282 filed during the year.  

e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  

f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  

g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  

h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  

9 Sponsoring organizations maintaining donor advised funds.  

a. Did the sponsoring organization make any taxable distributions under section 4966?  

b. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  

10 Section 601(c)(7) organizations. Enter:  

a. Initiation fees and capital contributions included on Part VIII, line 12.  

b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  

11 Section 501(c)(12) organizations. Enter:  

a. Gross income from members or shareholders.  

b. Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  

12a. Section 4947(a)(11) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

a. Is the organization licensed to issue qualified health plans in more than one state?  

Note: See the instructions for additional information the organization must report on Schedule O.  

b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  

c. Enter the amount of reserves on hand.  

14a. Did the organization receive any payments for indoor tanning services during the tax year?  

b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  

16 Is the organization an educational institution subject to the section 4958 excise tax on net investment income?  

If "Yes," complete Form 4720, Schedule O.  

17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  

If "Yes," complete Form 6689.
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year.
   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.

   1a  9

1b Enter the number of voting members included on line 1a, above, who are independent

   1b  9

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with
   any other officer, director, trustee, or key employee?

   2   X

3 Did the organization delegate control over management duties customarily performed by or under the direct
   supervision of officers, directors, trustees, or key employees to a management company or other person?

   3   X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

   4   X

5 Did the organization become aware during the year of a significant divestment of the organization's assets?

   5   X

6 Did the organization have members or stockholders?

   6   X

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint
   one or more members of the governing body?

   7a  X

7b Were any governance decisions of the organization reserved to (or subject to approval by) members,
   stockholders, or persons other than the governing body?

   7b  X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

   a The governing body?

   8a X

   b Each committee with authority to act on behalf of the governing body?

   8b X

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at
   the organization’s mailing address? If “Yes,” provide the names and addresses on Schedule O.

   9   X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?

   10a X

10b If “Yes,” did the organization have written policies and procedures governing the activities of such chapters,
   branches, or affiliates?

   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 X

11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.

   11b X

12a Did the organization have a written conflict of interest policy? If “No,” go to line 13

   12a X

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

   12b X

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,”
   describe on Schedule O how this was done

   12c X

13 Did the organization have a written whistleblower policy?

   13 X

14 Did the organization have a written document retention and destruction policy?

   14 X

15 Did the process for determining compensation of the following persons include a review and approval by
   independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

   a The organization's CEO, Executive Director, or top management official

   15a X

   b Other officers or key employees of the organization

   15b X

If “Yes” to line 15a or 15b, describe the process on Schedule O. See instructions.

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement
   with a taxable entity during the year?

   16a X

16b If “Yes,” did the organization follow a written policy or procedure requiring the organization to evaluate its
   participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the
   organization's exempt status with respect to such arrangements?

   16b X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed.

18 Section 8104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)
   (3) only) available for public inspection. Indicate how you made these available. Check all that apply.
   X Own website   X Another's website   X Upon request   X Other (explain on Schedule O)

19 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.

20 State the name, address, and telephone number of the person who possesses the organization’s books and records.

CYNTHIA HARN
17540 W LARAWAY ROAD
JOLIET, IL 60433 815-722-2022

Form 990 (2021)
### Friends of the Forest Preserve

**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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED GARNER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DONALD GOULD</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ANN DRAILE</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CYNTHIA A HARN</td>
<td>0.00</td>
<td>X</td>
<td>12,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EXECUTIVE DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>RALPH SCHULTZ</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>156,998</td>
<td>28,052</td>
</tr>
<tr>
<td>JAMIE DONOVAN</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHAIRMAN</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PENELOPE WAKELAND</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MARCY DEMAURO</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SECRETARY</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JIM FLAX</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TREASURER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>META MUELLER</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>RACHEL VENTURA</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EX-OFFICIO DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Form 990 (2021)
### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and title</td>
<td>Average hours per week (not any hours for related organizations below dotted line)</td>
<td>Position</td>
<td>Reportable compensation from the organization: (W-2/1099-MISC/1099-NEC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</td>
<td>Estimated amount of other compensation from the organization and related organizations</td>
</tr>
<tr>
<td>(12) DONNA THEIMEER</td>
<td>0.00</td>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
</tr>
<tr>
<td>(13) REGAN PATTISON</td>
<td>0.00</td>
<td>VICE-CHAIR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
</tr>
<tr>
<td>(14) JEFF TUMINELLO</td>
<td>0.00</td>
<td>DIRECTOR</td>
<td>0.00</td>
<td>X</td>
<td>0</td>
</tr>
</tbody>
</table>

1b Subtotal: 12,000 156,998 28,052

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 0

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual.

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and business address</td>
<td>Description of services</td>
<td>Compensation</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 0
## Part VIII: Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VII.

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>275,383</td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-f</td>
<td>1g</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total, Add lines 1a-1f</td>
<td></td>
<td>275,383</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total, Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investment Income (including dividends, interest, and other similar amounts)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>199</td>
<td>199</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental inc. or loss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or loss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Total</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from fundraising events not including $ of contributions reported on line 1c. See Part IV, line 18</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>8a</td>
<td></td>
<td>71,199</td>
<td>71,199</td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td>71,199</td>
<td>71,199</td>
</tr>
<tr>
<td>9a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Expenditures</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total, Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue, See instructions</td>
<td></td>
<td>346,781</td>
<td>199</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Revenue excluded from tax under section 512-514</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 (2021)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(A) Total expenses</td>
<td>(B) Program service expenses</td>
<td>(C) Management and general expenses</td>
</tr>
<tr>
<td>---</td>
<td>-------------------</td>
<td>-----------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Management</td>
<td>834</td>
<td>834</td>
</tr>
<tr>
<td></td>
<td>b. Legal</td>
<td>553</td>
<td>553</td>
</tr>
<tr>
<td></td>
<td>c. Accounting</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Lobbying</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f. Investment/management fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g. Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>54,941</td>
<td>11,515</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>21,019</td>
<td>21,019</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>396</td>
<td>237</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>77,743</td>
<td>32,771</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-729)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assets</td>
<td></td>
<td>Liabilities</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1. Cash—non-interest-bearing</td>
<td>228,699</td>
<td>497,737</td>
<td></td>
</tr>
<tr>
<td>2. Savings and temporary cash investments</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. 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</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Less: accumulated depreciation</td>
<td>10b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Investments—publicly traded securities</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Investments—other securities. See Part IV, line 11</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Investments—program-related. See Part IV, line 11</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Other assets. See Part IV, line 11</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>228,699</td>
<td>497,737</td>
<td></td>
</tr>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td>17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Grants payable</td>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total liabilities. Add lines 17 through 25</td>
<td>0</td>
<td>26</td>
<td>0</td>
</tr>
<tr>
<td>Organizations that follow FASB ASC 988, check here □</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and complete lines 27, 28, 32, and 33.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Net assets without donor restrictions</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Net assets with donor restrictions</td>
<td>28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations that do not follow FASB ASC 988, check here □</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and complete lines 29 through 33.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Capital stock or trust principal, or current funds</td>
<td>29</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Retained earnings, endowment, accumulated income, or other funds</td>
<td>228,699</td>
<td>31</td>
<td>497,737</td>
</tr>
<tr>
<td>32. Total net assets or fund balances</td>
<td>228,699</td>
<td>32</td>
<td>497,737</td>
</tr>
<tr>
<td>33. Total liabilities and net assets/fund balances</td>
<td>228,699</td>
<td>33</td>
<td>497,737</td>
</tr>
</tbody>
</table>
**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.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer Identification Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRIENDS OF THE FOREST PRESERVE DISTRICT OF WILL COUNTY</td>
<td>***-***3713</td>
</tr>
</tbody>
</table>

### 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.)

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state.

5. 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)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. 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)(v). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. An agricultural research organization described in section 170(b)(1)(A)(vii) 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.

10. 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.)


12. 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12a, 12b, and 12c.

   a. **X** 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.

   b. **X** 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.

   c. **X** 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.

   d. **X** 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.

   e. Check this box if the organization received a written determination from the IRS that it is a Type I, 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 supported organization(s).

<table>
<thead>
<tr>
<th>(A) Name of supported organization</th>
<th>(B) EIN</th>
<th>(C) Type of organization (described on lines 1–10 above (see instructions))</th>
<th>(D) Is the organization listed in your governing document?</th>
<th>(E) Amount of monetary support (see instructions)</th>
<th>(F) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) FOREST PRESERVE DISTRICT OF WILL COUNTY</td>
<td>**---***6668</td>
<td>X</td>
<td>Yes</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

(B)

(C)

(D)

(E)

Total 1 1
### Part XI: Reconciliation of Net Assets

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>346,781</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>77,743</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>269,038</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>228,699</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>497,737</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td>Cash</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>
### Part III
Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expanded on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Not income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First 5 years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Description</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))</td>
<td>15</td>
</tr>
<tr>
<td>16 Public support percentage from 2020 Schedule A, Part III, line 15</td>
<td>16</td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>Description</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))</td>
<td>17</td>
</tr>
<tr>
<td>18 Investment income percentage from 2020 Schedule A, Part III, line 17</td>
<td>18</td>
</tr>
<tr>
<td>19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
</tr>
<tr>
<td>b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
</tr>
<tr>
<td>20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990) 2021
### Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

| 14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 16 Public support percentage from 2020 Schedule A, Part II, line 14 | 16 | % |
| 16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |         |   |
| 16b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |         |   |
| 17a 10% facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization |         |   |
| 17b 10% facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization |         |   |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions |         |   |

Schedule A (Form 990) 2021
Part IV | 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

1. Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 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 on 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 of status 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, a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).

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 on 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 on 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.)
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>

#### Section B. Type I Supporting Organizations

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, 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. If 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>

#### Section C. Type II Supporting Organizations

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).

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. All Type III Supporting Organizations

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?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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).

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. By reason of the relationship described on 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section E. Type III Functionally Integrated Supporting Organizations

1. Check the box next to the method that the organization used to satisfy the Integral Test during the year (see Instructions).
   a. 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.
   c. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2. Activities Test. Answer lines 2a and 2b below.
   a. 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.
   b. Did the activities described on 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.

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.
   b. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
## Schedule A (Form 990) 2021

### FRIENDS OF THE FOREST PRESERVE

#### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1. 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.

<table>
<thead>
<tr>
<th>Section A - Adjusted Net Income</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Net short-term capital gain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Recoveries of prior-year distributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Other gross income (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Add lines 1 through 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Depreciation and depletion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Other expenses (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section B - Minimum Asset Amount</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Average monthly value of securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Average monthly cash balances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Fair market value of other non-exempt-use assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Total (add lines 1a, 1b, and 1c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Acquisition indebtedness applicable to non-exempt-use assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Subtract line 2 from line 1d.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Multiply line 5 by 0.035.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Recoveries of prior-year distributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Minimum Asset Amount (add line 7 to line 6)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th>Distributable Amount</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Adjusted net income for prior year (from Section A, line 8, column A)</td>
<td></td>
</tr>
<tr>
<td>2. Enter 0.85 of line 1.</td>
<td></td>
</tr>
<tr>
<td>3. Minimum asset amount for prior year (from Section B, line 8, column A)</td>
<td></td>
</tr>
<tr>
<td>4. Enter greater of line 2 or line 3.</td>
<td></td>
</tr>
<tr>
<td>5. Income tax imposed in prior year</td>
<td></td>
</tr>
<tr>
<td>6. Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td></td>
</tr>
</tbody>
</table>

7. Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

---

**Schedule A (Form 990) 2021**
**Schedule A (Form 990) 2021**

**Friends of the Forest Preserve**

**Part V**  
**Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**  
(continued)

<table>
<thead>
<tr>
<th>Section D – Distributions</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Amounts paid to supported organizations to accomplish exempt purposes</td>
<td></td>
</tr>
<tr>
<td>2. Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
<td></td>
</tr>
<tr>
<td>3. Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td></td>
</tr>
<tr>
<td>4. Amounts paid to acquire exempt-use assets</td>
<td></td>
</tr>
<tr>
<td>5. Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)</td>
<td></td>
</tr>
<tr>
<td>6. Other distributions (describe in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>7. Total annual distributions. Add lines 1 through 6.</td>
<td></td>
</tr>
<tr>
<td>8. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>9. Distributable amount for 2021 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>10. Line 8 amount divided by line 9 amount</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section E – Distribution Allocations (see instructions)</th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2021</th>
<th>(iii) Distributable Amount for 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Distributable amount for 2021 from Section C, line 6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Excess distributions carryover, if any, to 2021</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. From 2016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. From 2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. From 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. From 2019</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. From 2020</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Total of lines 3a through 3e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Applied to 2021 distributable amount</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Carryover from 2016 not applied (see instructions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Remainder. Subtract lines 3p, 3h, and 3i from line 3f.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Distributions for 2021 from Section D, line 7:</td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>a. Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Applied to 2021 distributable amount</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Remainder. Subtract lines 4a and 4b from line 4.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See Instructions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Excess distributions carryover to 2022. Add lines 3j and 4c.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Excess from 2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Excess from 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Excess from 2019</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Excess from 2020</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Excess from 2021</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990) 2021
Part VI  Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, 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 additional information. (See instructions.)
## Fundraising Activities

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

<table>
<thead>
<tr>
<th>Activity Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mail solicitations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internet and email solicitations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone solicitations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-person solicitations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solicitation of non-government grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solicitation of government grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special fundraising events</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part V) or entity in connection with professional fundraising services?

- [ ] Yes
- [ ] No

b. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(f) Name and address of individual or entity (fundraiser)</th>
<th>(g) Activity</th>
<th>(h) Did fundraiser have custody or control of contributions?</th>
<th>(i) Gross receipts from activity</th>
<th>(iv) Amount paid to (or retained by) fundraiser listed in col. (f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total:

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
### Part II

**Fundraising Events.** Complete if the organization answered “Yes” on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>PLANT SALE (event type)</td>
<td>None (total number)</td>
<td>71,199</td>
<td>71,199</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td>71,199</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>71,199</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Direct expense summary. Add lines 4 through 9 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income summary. Subtract line 10 from line 3, column (d)</td>
<td></td>
<td></td>
<td>71,199</td>
<td></td>
</tr>
</tbody>
</table>

### Part III

**Gaming.** Complete if the organization answered “Yes” on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tab/instant bongo/progressive bongo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col (a) through col (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>%</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities:
  a. Is the organization licensed to conduct gaming activities in each of these states?
  b. If "No," explain

10a Were any of the organization’s gaming licenses revoked, suspended, or terminated during the tax year?
  b. If "Yes," explain
Schedule G (Form 990) 2021

FRIENDS OF THE FOREST PRESERVE

11 Does the organization conduct gaming activities with nonmembers?  
☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  
☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:
   a The organization's facility  13a %
   b An outside facility  13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
   Name ▶
   Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  
☐ Yes ☐ No

   b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $.

   c If "Yes," enter name and address of the third party:
      Name ▶
      Address ▶

16 Gaming manager information:
   Name ▶
   Gaming manager compensation ▶ $
   Description of services provided ▶
   ☐ Director/Officer ☐ Employee ☐ Independent Contractor

17 Mandatory distributions:
   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  
☐ Yes ☐ No

   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $.

Part 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.
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
- Travel for companions
- Tax indemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (such as maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- Receive a severance payment or change-of-control payment?  
  4a X

- Participate in or receive payment from a supplemental nonqualified retirement plan?  
  4b X

- Participate in or receive payment from an equity-based compensation arrangement?  
  4c X

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- The organization?  
  5a X

- Any related organization?  
  5b X

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- The organization?  
  6a X

- Any related organization?  
  6b X

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4956-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4956-4(c)?

For Paperwork Reduction Act Notice, see the instructions for Form 990.
### Part II

**Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.**

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (a) and from related organizations, described in the instructions on row (a). Do not list any individuals that aren't listed on Form 990, Part VI.

Note: The sum of columns (f) for each listed individual must equal the total amount of Form 990, Part VI, Section A, line 1a, applicable column (d) and (e) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Total Compensation</th>
<th>(C) Stock and Stock Options Compensation</th>
<th>(D) Other Deferred Compensation</th>
<th>(E) Nonvested Benefits</th>
<th>(F) Total of columns (B) through (E)</th>
<th>(G) Compensation or column (F) reported as deferred in prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>RALPH SCHULTZ</td>
<td>156,998</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>26,052</td>
<td>185,050</td>
</tr>
<tr>
<td>EX OFFICIO DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PART I, LINE 3

ALL MEMBERS OF THE ORGANIZATION ARE VOLUNTEERS AND THEREFORE NO
COMPENSATION DETERMINATIONS HAVE BEEN MADE. ALL COMPENSATION IS PAID BY
THE RELATED ORGANIZATION.
Form 990, Part VI, Line 3 - Management Delegated


MATT CAMPBELL (ATTORNEY)- THIS INDIVIDUAL WORKS FOR THE LAW FIRM OF KGG LLC AND SERVES AS THE FOUNDATION'S ATTORNEY.


1a. The Board of Directors includes four Ex-Officio Directors that do not have voting rights as outlined in the Foundation's By-laws.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

FORM 990 IS PROVIDED TO THE FINANCE COMMITTEE WHICH IS LED BY THE FOUNDATION'S TREASURER, FOR REVIEW, PRIOR TO FILING. UPON FILING, THIS FORM IS PROVIDED TO ALL BOARD MEMBERS ON THE FOUNDATION'S BOARD MEMBER
PORTAL WHICH CONTAINS ALL PERTINENT FINANCIAL REPORTS AND DOCUMENTS, POLICIES, MEETING MINUTES AND AGENDAS. FORM 990 IS ALSO POSTED ON THE FOUNDATION'S WEBSITE, WILLCOUNTYNATURE.ORG FOR PUBLIC VIEWING.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

THE FOUNDATION HAS A CONFLICT OF INTEREST POLICY AND REQUIRES EACH BOARD MEMBER AND THE ED TO FILE AN ANNUAL DISCLOSURE OF CONFLICTS.

SECTION C DISCLOSURE, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE POSTED ON THE FOUNDATION'S WEBSITE AND ARE AVAILABLE BY REQUEST ANY TIME.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE POSTED ON THE FOUNDATION'S WEBSITE AND ARE AVAILABLE BY REQUEST AT ANY TIME.

Form 990, Part IX, Line 11g - Other Fees for Services

<table>
<thead>
<tr>
<th>Description</th>
<th>Tot/Prog Service</th>
<th>Mgt &amp; General</th>
<th>Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRACT LABOR</td>
<td>$ 7,799</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>OTHER DIRECT EXPENSES</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 12,000</td>
</tr>
<tr>
<td>MISCELLANEOUS COMMODITIES</td>
<td>$ 0</td>
<td>$ 0</td>
<td>$ 31,426</td>
</tr>
<tr>
<td>Name of the organization</td>
<td>Employer identification number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIENDS OF THE FOREST PRESERVE</td>
<td>3713</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$</th>
<th>$</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,716</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>11,515</td>
<td>0</td>
<td>43,426</td>
</tr>
</tbody>
</table>

Page 2 of 2

Schedule O (Form 990) 2021