Form SUU Under section 501(c), 527, of 447(a)(1) of the Internal Revenue Code (except private roundations) 20211 Destinating revenue Social Social yn unders on this form as it may be made public. So to www.irs.gov/Form990 for instructions and the latest Information. 2021 A Forthe 2021 calendar year, or tax year beginning JUL 1, 2021 and ending D Employer identification number B code.dc C Amere of cognitions B amere of cognitions 36 - 1256190 Desting LEAGUE OF WOMEN VOTERS OF ILLINOIS 36 - 1256190 B code.dc Data table D constructions, and 2P or foreign postal code G come sections 312 - 939 - 5935 City or town, state or province, country, and ZP or foreign postal code G come sections I 33, 758 F Name and address of principal officer. ALLYSON HAUT Hold is this a group return for statch a list. See instructions J Website:> WWI LWVIL. ORG L variat for matter sections Hold reserved instructions I Breft describe tabox Social code of the cognitication discontinue to soperations or disposed of more than 25% of this assets. 3 Number of volting ender of the governing body (Part VI, line 1a) I to the police comerning body (Part VI, line 1a) 1 Breft describe tabox I the organization discontinue to the governing body (Part VI, line 2a)	Form Wilder Dudter section 501(c), 527, or 3447(a)(1) of the Internal Revenue Code (accept private foundation) 2021 Determine > Do not enter social security numbers on this form and public. > Do not enter social security numbers on this form and public. > Determine 2022 A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022 > Determine		-	~~	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047			
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Circulture of officer					of officer	Data				
	Here ALLYSON HAUT, PRESIDENT	-		, -		Date				
Here ALLYSON HAUT, PRESIDENT	Type or print name and title	Her	е							

	Print/Type preparer's name Preparer's signature Date Check												
Paid	JESSICA FREIBURG	JESSICA FREIBURG		629387									
Preparer													
Use Only	Only Firm's address 2107 SWIFT DRIVE, SUITE 210												
	OAK BROOK, IL 60523 Phone no. (708												
May the IRS discuss this return with the preparer shown above? See instructions													
132001 12-0	132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2021)												

13200112-09-21LHAFor Paperwork Reduction Act Notice, see the separate instructions.SEESCHEDULEOFORORGANIZATIONMISSIONSTATEMENTCONTINUATION

	1 990 (2021) LEAGUE OF WOMEN VOTERS OF ILLINOIS	36-1256190	Page 2
Pa	rt 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:		
	THE PURPOSES OF THE LWVIL ARE TO PROMOTE POLITICAL RESPO	NSIBILITY	
	THROUGH INFORMED AND ACTIVE PARTICIPATION IN GOVERNMENT	AND TO ACT	ON
	SELECTED GOVERNMENTAL ISSUES. THE LEAGUE SHALL NOT SUPPO		
	ANY POLITICAL PARTY OR ANY CANDIDATE.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	prior Form 990 or 990-EZ?		s X No
	If "Yes," describe these new services on Schedule O.		
•			s X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		S A 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		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs, the total expenses,	and
	revenue, if any, for each program service reported.		
4a			,460.)
	THE ORGANIZATION HAD ITS ISSUES AND ADVOCACY PROGRAM AND	BIENNIAL	
	DELEGATE CONVENTION.		
4b	(Code:) (Expenses \$ including grants of \$) (Rever	nue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Reven	nue \$)
			,
4d	Other program services (Describe on Schedule O.)	-	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 30,156.		
		Form	1 990 (2021)
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	2		

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2021.05050 LEAGUE OF WOMEN VOTERS OF 6303___1

Form 990 (2					VOTERS	OF	ILLINOIS
Part IV	Che	ecklist of Required So	hedu	ıles			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(d), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_	v	
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	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 "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		v	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X
	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41-		v
46	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		X
15		45		х
40	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u></u>
16		10		Х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u></u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
10	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		<u>X</u>
18		10		х
10	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	18		<u></u>
19		40		х
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		- 23
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21		21		х
2000	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I. Parts I and II</i>		990 (
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Form 990 (OF	ILLINOIS							
Part IV	Part IV Checklist of Required Schedules (continued)													

			Yes	No
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 "Yes," complete Schedule I, Parts I and III	22		X X
23	Did the organization answer "Yes" 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 "Yes," complete			
	Schedule J	23		X
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 "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
U U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		OFh		x
06	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			1
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			~
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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 "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1 -
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
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	38	X	
Pa	t 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	<u></u> .		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
-	(gambling) winnings to prize winners?	1c	x	
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	4			、 · - · /

Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
		1 1		Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 2	,	
	filed for the calendar year ending with or within the year covered by this return			v
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	X
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instruction			
			3a	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	•		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a	
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 A		_	
			5a	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file form 2000 T2		5b	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5</u> c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		0	
			<u>6a</u>	
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	0	0	
7	were not tax deductible?		6b	
7	Organizations that may receive deductible contributions under section 170(c).	wing provided to the power	7-	
a L	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set		7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?	•	70	
4		1 1	7c	
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		70	
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contribution of the personal benefit contribution of the organization of the personal benefit contribution of the personal benefit		7e 7f	
t a			7g	
g b	If the organization received a contribution of qualified intellectual property, did the organization file For If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h	
h 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		- 11	
0		-	8	
9	Sponsoring organization mave excess business noticings at any time during the year?		0	
a			9a	
b			9b	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-	
11	Section 501(c)(12) organizations. Enter:		-	
а		11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	11b		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	
	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	13b		
с	Enter the amount of reserves on hand	13c		
			14a	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			
	excess parachute payment(s) during the year?		15	
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16	
	If "Yes," complete Form 4720, Schedule O.			
		2014	1	
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	•		
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?	•	17	

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a1			
	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 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
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 diversion 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
b	Are 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:			
а	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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
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	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
		12b	Х	
с	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	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $ ightarrow IL$			
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)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request 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, an	d finano	cial	
	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			
	THE ORGANIZATION - 312-939-5935			
	332 S MICHIGAN, 634, CHICAGO, IL 60604			
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LEAGUE OF WOMEN VOTERS OF ILLINOIS

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

Form 990 (2021)

36-1256190 Page **6**

Form 990 (2	2021)	LEAGUE	OF	WOMEN	VOTERS	OF	ILLINOIS	36-1256190
Part VII	Compensation	of Officers	s, Dir	rectors, T	rustees, K	ey Er	nployees, Highe	est Compensated

Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

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 the 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.

(A)	(B)	Ī			C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	itior	ן than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is both pr/trus	n an	compensation	compensation	amount of
	week	-		luau		1/11/11		from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	us te e	trus		ee	ubeu		1099-NEC)	1099-NEC)	and related
	below	dual tr	tiona		nploy	st cor	<u> </u>	10331120)		organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) AZISTI DEMBOWSKI	20.00	-	_		-	1-0				
EXECUTIVE DIRECTOR	20.00	1		х				42,180.	0.	21,090.
(2) ALLYSON HAUT	25.00									
PRESIDENT	25.00	X		х				0.	0.	0.
(3) CATE WILLIAMS	20.00									
SECRETARY	20.00	X		Х				0.	0.	0.
(4) MARIA PASQUESI	5.00									
TREASURER	1.00	X		Х				0.	0.	0.
(5) KATHY KENNY	5.00									
VP - VOTER SERVICE	35.00	X		х				0.	0.	0.
(6) LAURIE ROSE	2.00									
VP – GOVERNANCE	2.00	X		х				0.	0.	0.
(7) ROSEMARY HEILEMANN	5.00									
VP – ADVOCACY	1.00	X		Х				0.	0.	0.
(8) SARA KURENSKY	20.00	4								_
DIRECTOR	20.00	X						0.	0.	0.
(9) MELISSA LIEB	1.00									
DIRECTOR	5.00	X						0.	0.	0.
(10) JEAN PIERCE	39.00	- 							0	0
DIRECTOR	1.00	X						0.	0.	0.
		-								
		-								
		1								
		-								
		1								
		1								
			1		1					
		1								
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2021.05050 LEAGUE OF WOMEN VOTERS OF 6303 1

	990 (2021) LEAGUE OI	F WOMEN	VC	ΤE	RS	0	F	II	LINOIS	36-12	256	190	Pa	age 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	box	not c , unle:	ss per	nore son is recto	Highest compensated transformed to the standard transforme	an	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensatio from related organization (W-2/1099-MIS 1099-NEC)	on 1 s SC/	arr com fr orga and	(F) timate nount other pensa om the anizat d relate	of tion e ion ed	
			<u> </u>											
	Subtotal								42,180.		0.	2.	1,0	90.
	Subtotal Total from continuation sheets to Part VI								0.		0.		-	0.
	Total (add lines 1b and 1c)								42,180.		0.	22	1,0	90.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	9			0
	· · · ·										ſ		Yes	No
3	Did the organization list any former officer,											3		x
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su											3		
_	and related organizations greater than \$150											4		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes." corr	•							•	lual for services		5		х
Sec	ion B. Independent Contractors													
1	Complete this table for your five highest co the organization. Report compensation for	-									pensat	ion fro	m	
	(A)								(B)			(C		
	Name and business	address	NC	ONE	3			_	Description of s	ervices	С	omper	nsatio	n
2	Total number of independent contractors (i		nt lin	niter	1 + 0 +	thee		ted	above) who received m	ore than				
-	\$100,000 of compensation from the organi		Je ill		01	0		eu						
												Form	990 (2	2021)

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			2021) LEAGUE OF WON	IEN VOTERS	S OF ILLING	DIS	36-1256	190 Page 9
Pa	۲۱	/111	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin				
					(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
ი ი	1	2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b	108,737.				
<u>n</u> D			Fundraising events	100,101.				
Ar,								
ilar			Related organizations 1d					
Sins,			Government grants (contributions) 1e					
er (f	All other contributions, gifts, grants, and	12 520				
<u>e</u> ti			similar amounts not included above 1f	13,520.				
out		-	Noncash contributions included in lines 1a-1f		100 057			
<u>o</u> e		h	Total. Add lines 1a-1f		122,257.			
				Business Code	6 400	6 400		
e	2		SHARED SERVICE FEE	990099	6,499.	6,499.		ļ
ervi Ie			REGISTRATION	541900	4,961.	4,961.		l
Sc		С						
ev an		d						
Program Service Revenue		е						L
ē		f	All other program service revenue					L
		g	Total. Add lines 2a-2f	►	11,460.			
	3		Investment income (including dividends, inter	est, and				
			other similar amounts)		41.			41.
	4		Income from investment of tax-exempt bond	oroceeds 🕨 🕨				
	5		Royalties					L
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
e			and sales expenses 7b					
/en		с	Gain or (loss)					
Be			Net gain or (loss)	•				
Other Revenue	8	а	Gross income from fundraising events (not					
Ę			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8	b				
			Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Part IV, line 19					
		b	Less: direct expenses					
			Net income or (loss) from gaming activities					
	10		Gross sales of inventory, less returns					
			and allowances 10	a				
		b	Less: cost of goods sold 10					
			Net income or (loss) from sales of inventory					
		~		Business Code				
sno	11	а						
nec	••	b						
Miscellaneous Revenue		c						
Be			All other revenue					
Σ			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		133,758.	11,460.	0.	41.
132009						, 1000	, J.	Form 990 (2021)
13200	212	-09-	<u> </u>		٥			. 5111 (2021)

9 2021.05050 LEAGUE OF WOMEN VOTERS OF 6303___1

Form 990 (2021) LEAGUE OF WOMEN VOTERS OF ILLINOIS Part IX Statement of Functional Expenses

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	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
;	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
ŀ	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	21,090.		21,090.	
;	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
,	Other salaries and wages	29,860.	7,642.	22,218.	
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
)	Other employee benefits	2,598.	390.	2,208.	
	Payroll taxes	4,136.	620.	3,516.	
	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	8,488.		8,488.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion				
	Office expenses				
	Information technology				
5	Royalties	00 427	2.000	10 201	
	Occupancy	20,437.	3,066.	17,371.	
	Travel				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Payments to affiliates Depreciation, depletion, and amortization				
	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 0.)				
а	CONSULTING	15,271.	10,537.	4,734.	
b	INSURANCE	6,399.	2,368.	4,031.	
с	MEETINGS AND TRAVEL	3,377.	1,824.	1,553.	
d	TELEPHONE	3,214.	481.	2,733.	
е	All other expenses	10,453.	3,228.	7,225.	
	Total functional expenses. Add lines 1 through 24e	125,323.	30,156.	95,167.	
	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 958-720)				

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Form **990** (2021)

Form 990 (2021)

LEAGUE OF WOMEN VOTERS OF ILLINOIS

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Part X	Balance Sheet
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		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
· · ·	1	Cash - non-interest-bearing	198,396.	1	179,691.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	8,288.
	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		5	
	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)		6	
<u>ν</u>	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Š 9	9	Prepaid expenses and deferred charges		9	6,977.
1	0a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
1	1	Investments - publicly traded securities		11	
12	2	Investments - other securities. See Part IV, line 11		12	
1:		Investments - program-related. See Part IV, line 11		13	
14		Intangible assets		14	
1	5	Other assets. See Part IV, line 11		15	
1		Total assets. Add lines 1 through 15 (must equal line 33)		16	194,956.
1		Accounts payable and accrued expenses		17	<u>194,956.</u> 4,798.
18		Grants payable		18	,
19		Deferred revenue		19	
20		Tax-exempt bond liabilities		20	
2		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
		Loans and other payables to any current or former officer, director,			
Liabilities	-	trustee, key employee, creator or founder, substantial contributor, or 35%			
ili		controlled entity or family member of any of these persons		22	
<u>ا ت</u>	3	Secured mortgages and notes payable to unrelated third parties		23	
24		Unsecured notes and loans payable to unrelated third parties		24	
2		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	5,918.	25	5,459.
20	6	Total liabilities. Add lines 17 through 25	23,212.	26	10,257.
	•	Organizations that follow FASB ASC 958, check here X			
es		and complete lines 27, 28, 32, and 33.			
0 ue 2	7	Net assets without donor restrictions	176,264.	27	184,699.
		Net assets with donor restrictions		28	
	0	Organizations that do not follow FASB ASC 958, check here		20	
2		and complete lines 29 through 33.			
Net Assets or Fund Balances සු සු හූ හූ	9	Capital stock or trust principal, or current funds		29	
s 3		Paid-in or capital surplus, or land, building, or equipment fund		30	<u> </u>
A SS		Retained earnings, endowment, accumulated income, or other funds		31	L
Vet A		Total net assets or fund balances		32	184,699.
ž 3		Total liabilities and net assets/fund balances		33	194,956.
1.0	<u> </u>			00	Form 990 (2021)

Form 990 (2021)

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	990 (2021) LEAGUE OF WOMEN VOTERS OF ILLINOIS	36-1	.256190	Pa	_{ge} 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			58.
2	Total expenses (must equal Part IX, column (A), line 25)	2			23.
3	Revenue less expenses. Subtract line 2 from line 1	3			35.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	176	, 2	64.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		1.0		~ ~
De	column (B))	10	184	1,6	99.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		
_				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-		
_	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," 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:				
_	Separate basis Consolidated basis Both consolidated and separate basis			v	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			x	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Λ	
•	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	0			x
	Act and OMB Circular A-133?		<u>3a</u>		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2021)

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SCHEDULE C	Po	litical Campaign	and Lobbyin	g Activities		OMB No. 1545-0047	
(Form 990)	For Organizations Exempt From Income Tax Under section 501(c) and section 527						
	Complete						
Department of the Treasury Internal Revenue Service		to www.irs.gov/Form990 for				Open to Public Inspection	
-	-	Form 990, Part IV, line 3, or Fo		ne 46 (Political Campa	ign Acti	vities), then	
		plete Parts I-A and B. Do not co	•				
		11(c)(3)) organizations: Complete	Parts I-A and C below.	Do not complete Part	I-B.		
Section 527 organiza	-	•	000 F7 D 11/1 H	4- / / / / / / / / / /			
-		Form 990, Part IV, line 4, or Fon nave filed Form 5768 (election ur					
		nave NOT filed Form 5768 (election di		-	-		
		Form 990, Part IV, line 5 (Prox	•			•	
Tax) (See separate inst			,, (,	,	, ,	
• Section 501(c)(4), (5)	, or (6) organizat	ions: Complete Part III.					
Name of organization						r identification number	
		OF WOMEN VOTERS (36-1256190	
Part I-A Comple	ete if the org	anization is exempt und	er section 501(c) o	or is a section 52	7 orgar	nization.	
1 Provide a description	on of the organiz	ation's direct and indirect politic					
2 Political campaign a	, ,				▶\$		
3 Volunteer hours for	political campai	gn activities					
Part I-B Comple	ete if the org	anization is exempt und	er section 501(c)(3)			
		incurred by the organization und		-,-	▶ ¢		
	•	incurred by organization manage					
		n 4955 tax, did it file Form 4720				Yes No	
						Yes No	
b If "Yes," describe in							
Part I-C Comple	ete if the org	anization is exempt unde	er section 501(c),	except section 50	01(c)(3)		
1 Enter the amount d	irectly expended	l by the filing organization for sec	ction 527 exempt funct	ion activities	▶\$		
2 Enter the amount of	f the filing organ	ization's funds contributed to oth	her organizations for se	ection 527			
					▶\$		
		. Add lines 1 and 2. Enter here a	,				
						Yes No	
		1120-POL for this year?					
		tion listed, enter the amount paid	<i>,</i> .	•			
	-	omptly and directly delivered to a				-	
political action com	mittee (PAC). If a	additional space is needed, prov	ide information in Part	IV.			
(a) Name)	(b) Address	(c) EIN	(d) Amount paid fr	om	(e) Amount of political	
				filing organization		ontributions received and	
				funds. If none, ente		promptly and directly delivered to a separate	
						political organization.	
						If none, enter -0	
For Paperwork Reducti	on Act Notice,	see the Instructions for Form 9	90 or 990-EZ.		Sche	edule C (Form 990) 2021	
LHA							

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Schedule C (Form 990) 2021	EAGUI	E OF W	OMEN VOTERS	OF ILLINOIS	36-1	L256190 Page 2
Part II-A Complete if the orga	nizatio	n is exen	npt under sectior	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).						
A Check 🕨 🗌 if the filing organizati	on belong	gs to an affi	liated group (and list ir	Part IV each affiliated	group member's nam	ne, address, EIN,
expenses, and share	of exces	s lobbying e	expenditures).			
B Check 🕨 🔄 if the filing organizati	on check	ed box A ar	nd "limited control" pro	ovisions apply.		
Limite	s on Lobh	oying Expe	nditures		(a) Filing	(b) Affiliated group
			ints paid or incurred.)		organization's totals	totals
1a Total lobbying expenditures to influe	ence publ	ic opinion (grassroots lobbying)			
b Total lobbying expenditures to influe	ence a leg	islative boo	ly (direct lobbying)			
c Total lobbying expenditures (add lin	es 1a and	11b)				
d Other exempt purpose expenditures						
e Total exempt purpose expenditures						
f Lobbying nontaxable amount. Enter	•		,	h columns		
If the amount on line 1e, column (a) or			bying nontaxable am			
Not over \$500,000	(0) 13.		the amount on line 1e.			
Over \$500,000 but not over \$1,000,	000		00 plus 15% of the exc			
			•			
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	00,000		0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (ente						
h Subtract line 1g from line 1a. If zero	or less, e	nter -0				
i Subtract line 1f from line 1c. If zero	or less, er	nter -0				
j If there is an amount other than zero	o on eithe	r line 1h or	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this y	ear?					Yes No
			eraging Period Under	• • •		
(Some organizations the			.,	•	f the five columns b	elow.
		-	ate instructions for li			
	Lobb	oying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
0 - Labbuing partovable amount						
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
• Total John ing average diturca						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990) 2021

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Schedule C (Form 990) 2021

LEAGUE OF WOMEN VOTERS OF ILLINOIS

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5	i), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th				X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
	Carryover from last year				
	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2021

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(Form	SCHEDULE D Supplemental Financial Statements Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Pepartment of the Treasury Attach to Form 990.							
	Go to www.irs.gov/Form990 for instructions and the latest information.							
Nam	me of the organization Employer i							
		LEAGUE OF WOMEN VO			36-1256190			
Par		ations Maintaining Donor Advise		or Accounts.	Complete if the			
	organizatio	n answered "Yes" on Form 990, Part IV, lin						
			(a) Donor advised funds	(b) Funds a	and other accounts			
1	Total number at er	nd of year						
2	Aggregate value of	f contributions to (during year)						
3	Aggregate value of	f grants from (during year)						
4	Aggregate value at	t end of year						
5	Did the organizatio	on inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds				
	are the organizatio	on's property, subject to the organization's	exclusive legal control?		Yes No			
6	Did the organizatio	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	used only				
	for charitable purp	oses and not for the benefit of the donor o	r donor advisor, or for any other purpose o	onferring				
	impermissible priva				Yes No			
Par	t II Conserva	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.				
1	Purpose(s) of cons	servation easements held by the organization	on (check all that apply).					
	Preservation	n of land for public use (for example, recrea	tion or education) Preservation of	a historically imp	ortant land area			
	Protection o	f natural habitat	Preservation of	a certified histori	c structure			
	Preservation	n of open space						
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conservation	easement on the last			
	day of the tax year	r.		He	ld at the End of the Tax Year			
а	Total number of co	onservation easements		2a				
b	Total acreage restr	ricted by conservation easements		2b				
с	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	2c				
d		vation easements included in (c) acquired a						
	listed in the Nation	nal Register		2d				
3								
	year 🕨			-	-			
4	Number of states v	where property subject to conservation eas	ement is located					
5	Does the organizat	tion have a written policy regarding the per	iodic monitoring, inspection, handling of					
		orcement of the conservation easements it			Yes No			
6	Staff and voluntee	r hours devoted to monitoring, inspecting,						
7	Amount of expens	es incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	ion easements d	uring the year			
	▶\$							
8	Does each conserv	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(r	n)(4)(B)(i)				
	and section 170(h))(4)(B)(ii)?			Yes No			
9		be how the organization reports conservation						
	balance sheet, and	d include, if applicable, the text of the footn	ote to the organization's financial stateme	nts that describe	es the			
	organization's acco	ounting for conservation easements.						
Par	t III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Otl	her Similar A	ssets.			
	Complete if	f the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement ar	nd balance sheet	works			
	of art, historical tre	easures, or other similar assets held for pub	lic exhibition, education, or research in fu	therance of publ	ic			
	service, provide in	Part XIII the text of the footnote to its finan	icial statements that describes these items	S				
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	alance sheet wo	rks of			
	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,							
	provide the following amounts relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X							
2								
-	the following amounts required to be reported under FASB ASC 958 relating to these items:							
а	•	on Form 990, Part VIII, line 1	•	▶ \$				
		Form 990, Part X						
		eduction Act Notice, see the Instructions			nedule D (Form 990) 2021			
	10-28-21			501				
.5200			20					

	dule D (Form 990) 2021 LEAGUE	OF WOMEN VO	DTERS	<u> </u>	LLINOIS		36	-125619	<u>)0 г</u>	² age 2
Par	t III Organizations Maintaining C								tinued)	
3	Using the organization's acquisition, accession	on, and other record	s, check an	y of the	following that m	nake sign	ificant use	of its		
	collection items (check all that apply):									
а	Public exhibition	d	Loa	an or exc	change program	ı				
b	Scholarly research	e	e 🗌 Oth	ner						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	how they t	further tl	he organization	's exempt	t purpose ir	n Part XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, histor	ical trea	sures, or other	similar as	sets			
	to be sold to raise funds rather than to be ma									No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the org	ganizatio	on answered "Y	es" on Fo	orm 990, Pa	art IV, line 9, o	or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for con	tribution	is or other asset	ts not inc	luded			
	on Form 990, Part X?							🗌 Yes		No
b	If "Yes," explain the arrangement in Part XIII									
								Amou	int	
с	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for esci	row or c	ustodial accoun	nt liability	?	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation h	as been	provided on Pa	art XIII			L	
Par	t V Endowment Funds. Complete i	f the organization an	swered "Ye	s" on Fo	orm 990, Part IV	/, line 10.				
		(a) Current year	(b) Prior	' year	(c) Two years	back (d) Three years	s back 🛛 (e) Fo	our years	s back
1a	Beginning of year balance									
b										
	Grants or scholarships									
	Other expenditures for facilities									
-	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1 a co	olumn (a)) held as:					
2	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
		<u></u> /0 %								
U	The percentages on lines 2a, 2b, and 2c sho									
30	Are there endowment funds not in the posse		tion that ar	a hald a	nd administered	t for the c	organization	n		
ou	by:			e neia a			gamzation		Yes	No
	(i) Unrelated organizations							3a(i		+
	(ii) Related organizations								4	+
h	If "Yes" on line 3a(ii), are the related organizations	tions listed as requir	ed on Sche	dula R2						+
1	Describe in Part XIII the intended uses of the									<u> </u>
Par	t VI Land, Buildings, and Equipm			13.						
	Complete if the organization answered) Part IV lir	ne 11a S	See Form 990 F	Part X lin	e 10			
	Description of property	(a) Cost or o			t or other			(d) Pc	ok valu	
	Description of property	basis (investr		• •	(other)	• •	umulated eciation	(u) BC	OK Val	Je
10	Land			54515		acpre				
	Land									
	Buildings									
	Leasehold improvements									
	Equipment									
_	Other						•			
Total	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990. Part</u>	<u>X. column (</u>	<u>B), line 1</u>	<u>0c.)</u>)	<u> </u>		0.
							Sch	nedule D (Fo	m 990	1) 2021

Schedule D (Form 990) 2021 LEAGUE	E OF W	IOMEN	VOTERS	OF	ILLINOIS	36-1256190	Page 3
Part VII Investments - Other Secur	rities.						
Complete if the organization answ	ered "Yes"	on Form	990, Part IV, I	ine 11	b. See Form 990, Part X	, line 12.	
(a) Description of security or category (including name	e of security)	(b)	Book value		(c) Method of valuation	on: Cost or end-of-year market v	alue
(1) Financial derivatives							
(2) Closely held equity interests							
(3) Other							
(A)							
(B)							

(0)	
(D)	
(E)	
(F)	
(G)	
(H)	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

1 0	, , ,	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal (Col (b) must equal Form 990 Part X col (B) line 13)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description		(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
	N	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED RENT	5,459.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	Column (b) must equal Form 990, Part X, col. (B) line 25.)	5,459.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

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	dule D (Form 990) 2021 LEAGUE OF WOMEN VOTERS OF				.256190 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	•			
1	Total revenue, gains, and other support per audited financial statements			1	150,671.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	. 2b	16,913.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	16,913.
3	Subtract line 2e from line 1			3	133,758.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	133,758.
	Total revenue. Add lines of and te missings equal Form 990. Fait 1. line 12.1				
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F		
Ра	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F		142,236.
	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F	Return	
1	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	ents With	Expenses per F	Return	
1 2	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents With 	Expenses per F	Return	
1 2	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents With 	Expenses per F	Return	
1 2 a b	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents With 2a 2b 2c	Expenses per F	Return	142,236.
1 2 a b c	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	Expenses per F	Return	142,236.
1 2 a b c	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	16,913.	1	142,236.
1 2 b c d e	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	16,913.	Return	142,236.
1 2 b c d 3	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	16,913.	Return	142,236.
1 2 3 4	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	16,913.	Return	142,236.
1 2 a b c d e 3 4 a	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	16,913.	Return	<u>142,236.</u> <u>16,913.</u> <u>125,323.</u> 0.
1 2 d c 3 4 a b c 5	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d	Expenses per F	1 1 2e 3	142,236. 16,913. 125,323.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE LEAGUE OF WOMEN VOTERS OF ILLINOIS AND THE LEAGUE OF WOMEN VOTERS
ILLINOIS EDUCATION FUND ARE EXEMPT FROM FEDERAL INCOME TAX UNDER SECTIONS
501(C)(4) AND 501(C)(3) OF THE INTERNAL REVENUE CODE, RESPECTIVELY. THE
ORGANIZATION'S FORMS 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX
ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER
THEY WERE FILED. THE ORGANIZATION HAD NO UNRELATED BUSINESS INCOME AND
THERE WERE NO TAXES OWED FOR THE YEAR ENDED JUNE 30, 2022.

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Schedule D (Form 990) 2021

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2021.05050 LEAGUE OF WOMEN VOTERS OF 6303___1

SCHE	DU	LE	0
(Form	990)	

Department of the Treasury

Internal Revenue Service

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.

Name of the organization

LEAGUE OF WOMEN VOTERS OF ILLINOIS

Employer identification number 36-1256190

OMB No. 1545-0047

Open to Public

Inspection

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PARTICIPATION IN GOVERNMENT AND TO ACT ON SELECTED GOVERNMENTAL ISSUES.

THE LEAGUE SHALL NOT SUPPORT OR OPPOSE ANY POLITICAL PARTY OR ANY

CANDIDATE.

FORM 990, PART VI, SECTION A, LINE 8B:

FORMAL MINUTES ARE NOT REQUIRED FOR THE ORGANIZATIONS VOLUNTEER COMMITTEES.

KEY MATTERS ARE COMMUNICATED TO THE BOARD OF DIRECTORS.

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

ALL BOARD MEMBERS ARE PROVIDED WITH A COPY OF THE COMPLETE FORM 990 PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD COMPLIANCE IS MONITORED ANNUALLY BY THE BOARD OFFICERS.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS DETERMINES THE SALARY OF THE EXECUTIVE DIRECTOR

24

AFTER CONSIDERING MARKET CONDITIONS AND BUDGETARY LIMITS.

FORM 990, PART VI, SECTION C, LINE 18:

ALL FORMS ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

ALL DOCUMENTS ARE AVAILABLE UPON REQUEST.

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 202	21						Page 2
Name of the organization							Employer identification number
	LEAGUE	OF	WOMEN	VOTERS	OF	ILLINOIS	36-1256190

FORM 990, PART XII, LINE 2C

THERE WAS NO CHANGE IN THE OVERSIGHT FROM THE PRIOR YEAR.

Schedule O (Form 990) 2021

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25 2021.05050 LEAGUE OF WOMEN VOTERS OF 6303___1

09140301 707170 6303

)))]]]]]]]]]]]]]]]]]	_					10	OMB No. 1545-0047
(Form 990)	► Compl	► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.	Yes" on Form 990, Part IV, I	ine 33, 34, 35b, 36,	or 37.		2021
Department of the Treasury Internal Revenue Service		➤ Go to www.irs.gov/Form990 for instructions and the latest information.	Attach to Form 990. n990 for instructions and the lates	st information.		0	Open to Public Inspection
Name of the organization	LEAGUE OF	WOMEN VOTERS OF ILLINOIS	SI			Employer identification number 36-1256190	9 0
Part I Identificati	tities.	• if the organization answered "Yes"	on Form 990, Part IV, line 33	3.			
Name, add of	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	r Total income	e End-of-year assets		(f) Direct controlling entity
Part II Identificati organizatio	Identification of Related Tax-Exempt Organizations. organizations during the tax year.	ions. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	answered "Yes" on Form 990	ı, Part IV, line 34, be	cause it had one or i	more related tax-exer	npt
Nan of r	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501/c)(3))	(f) Direct controlling entity	ntroll
LEAGUE OF WOMEN VOTERS OF FUND - 36-1256190, 332 S 1	OTERS OF ILLINOIS EDUCATION , 332 S MICHIGAN , CHICAGO,						
06		CIVIL RIGHTS ORGANIZATION	ILLINOIS	501(C)(3) 5	501(C)(3)		X
For Paperwork Redu	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	for Form 990.				Schedule R (Schedule R (Form 990) 2021

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132101 11-17-21

Image: Substration of Federates as arrange of the organization answered Ver of Form 90, Part IV, Iers 3D, Part IV,														
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Identification of Fleited Organizations Taxable as a Partnership. Complete If the organization asswered "Ves" on Form 900, Part IV, line 34, because It had one or more related organization (b) (c) (d) (d) <td></td>														
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Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "vise" on Form 300, Part IV, line 34, because it had one or more related organization (i) (i) </td <td></td> <td></td> <td>Share of 9nd-of-year</td> <td></td> <td></td> <td>Type of entity (C corp, S corp</td> <td></td> <td></td> <td></td> <td>Prim</td> <td>2</td> <td>Name, address, and Ell of related organization</td>			Share of 9nd-of-year			Type of entity (C corp, S corp				Prim	2	Name, address, and Ell of related organization		
Identification of Related Organizations Traxelie as a Partnership. Complete if the organization answered "Yes" on Form 900, Part IV, line 34, because it had one or more related organization (a) (b) (c) (c) </td <td></td> <td>(h)</td> <td>(g)</td> <td>5</td> <td></td> <td>(e)</td> <td>(d)</td> <td>(c)</td> <td>(b)</td> <td></td> <td></td> <td>(a)</td>		(h)	(g)	5		(e)	(d)	(c)	(b)			(a)		
(dentification of Flateted Organizations treated as a partnership Complete if the organization answered "Ves" on Form 990, Part IV, line 34, because it had one or more related organization (a) (b) (c) (c) <th< th=""><th>more related</th><th>it had one or r</th><th>, because</th><th>⁹art IV, line 34</th><th>Form 990, F</th><th>rered "Yes" on I</th><th>organization answ</th><th>omplete if the</th><th></th><th>as a Corpo</th><th>anizations Taxable : poration or trust durin</th><th></th></th<>	more related	it had one or r	, because	⁹ art IV, line 34	Form 990, F	rered "Yes" on I	organization answ	omplete if the		as a Corpo	anizations Taxable : poration or trust durin			
Identification of Related Organizations Tracable as a Partnership. Complete if the organization answerd "Yes" on Form 990, Part IV, line 34, because it had one or more related organization (a) (b) (c) (
Identification of Related Organizations Taxable as a Partnership. Complete If the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organization (a) (b) (c) (c) <td></td>														
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Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (j)<	ownership	in box managii nedule partner	amount i	tions?	nd-of-year assets			(related, ur excluded from		domicile (state or foreign		of related organization		
	(k)			(h)	(g)			Predominan		د و ر (C)	(b) Primary activity	(a)		
										ix year.		organizations treated as a part		
	led	or more relati	it had one	e 34, because	, Part IV, lint	3" on Form 990,	tion answered "Yes	the organizat	rship. Complete if	זs a Partne עשפוי	anizations Taxable a			

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	reed "Yes" on Form	990, Part IV, line 34, 35b	, or 36.			
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				_	Yes N	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	with one or more rel	ated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				<u>a</u>		×
Gift, grant, or capital contribution to related organization(s)				1 b		X
Gift, grant, or capital contribution from related organization(s				1		×
Loans or loan guarantees to or for related organization(s)				1d		×
÷				1 e		×
f Dividends from related organization(s)				*		×
				2	_	×
g Gran Grandstar Grand Grandstar Grandstar (Grandstar)				- -	+	×
				=		: }
i Exchange of assets with related organization(s)				= :		×
				╞		×
k Lease of facilities, equipment, or other assets from related organization(s)				≠		×
I Performance of services or membership or fundraising solicitations for related organization(s)	-			≐		×
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	n(s)			1n	X	
o Sharing of paid employees with related organization(s)				5	×	
p Reimbursement paid to related organization(s) for expenses				₽		×
Reimbursement paid by related organization(s) for expenses				đ		×
 Other transfer of cash or property to related organization(s) 				+		×
s Other transfer of cash or property from related organization(s)				1s		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered	o must complete thi		relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	lved		
LEAGUE OF WOMEN VOTERS OF ILLINOIS (1) EDUCATION FUND	N	23,486.	COST			
LEAGUE OF WOMEN VOTERS OF ILLINOIS (2) EDUCATION FUND	0	59,922.	COST			
(4)						
(5)						

Schedule R (Form 990) 2021 LEAGUE OF WOMEN VOTERS OF ILLINOIS

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Schedule R (Form 990) 2021

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6

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					_	Provide that was
					(a) Name, address, and EIN of entity	Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.
					(b) Primary activity	entity taxed as a partnerst structions regarding exclu
					(c) Legal domicile (state or foreign country)	nip through which t sion for certain inve
					(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	he organization condu stment partnerships.
					e partners sec. 501(c)(3) der <u>ves No</u>	ucted more
					(f) Share of total income) than five percent
					(g) Share of end-of-year assets	of its activities (me
					(h) Dispropor- tionate allocations? Yes No	asurec
					z nev	1 by tc
Schedule					(I) (J) (J) Code V-UBI General or P amount in box 20 managing of Schedule K-1 partner? o (Form 1065) Yes No	vtal assets or g
R (For					(j) General or managing partner? Yes No	ross re
Schedule R (Form 990) 2021					(j) (k) General or Percentage managing partner? ownership Yes No	ivenue)

Schedule R (Form 990) 2021 LEAGUE OF WOMEN VOTERS OF ILLINOIS

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Schedule R	(Form 990) 2021	LEAGUE OF WON	IEN VOTERS OF	ILLINOIS		36-1256190	Page 5
Part VII							
	Provide additional info	formation for responses to ques	tions on Schedule R. See	e instructions.			
						.	
132165 11-17-2	21		30			Schedule R (Form	990) 2021
40301 '	707170 6303		2021.05050	LEAGUE OF	WOMEN	VOTERS OF	6303