## VILLAGE OF LOMBARD LOCAL TOURISM GRANT PROGRAM APPLICATION FORM

**GENERAL INFORMATION** 

Organization:	Lombard Historical Society	· · · · · · · · · · · · · · · · · · ·	
Name of event:	Sweet's Civil War Encampment		
Date of event:	7/25/2014	Event location:	Four Seasons Park,
			Lombard
Contact person:	Sarah Richardt	Title:	Event Coordinator
Business address:	23 W. Maple Street	City & Zip	Lombard, IL 60148
Telephone:	630-629-1885, 630-248-0180	Email:	info@lombardhistory.or
			g

### PROJECT OVERVIEW

Total cost of the project:	\$12,746
Cost of city services requested in this application (if any):	\$0
Total funding requested in this application:	\$6,000
Percent of total project cost being requested:	47%
Anticipated attendance:	5000-6000
Anticipated number of overnight hotel stays:	10+

Briefly describe the project for which are funds are being requested:

2014 will be our 4th Sweet's Civil War Encampment. The event started as a fall event that commemorated the 150th anniversary of the Civil War and highlighted Lombard's contribution through Colonel Benjamin Sweet. Col. Sweet lived in Babcock's Grove and was the commander of Camp Douglas, a Confederate prisoner camp located in Chicago. Our Civil War Encampment draws visitors and reenactors from many surrounding states. The event includes a Friday night movie in the park, four battles throughout the weekend, living history and a Civil War ball.

### **ORGANIZATION**

Number of years that the organization has been in existence:	43
Number of years that the project or event has been in existence:	4
Number of years the project has been supported by Village of Lombard funds:	2
How many years does the organization anticipate it will request grant funding?	2+

1) Describe the organization (include brief history, mission, and ability to carry out this project):

The Lombard Historical Society was formed after Lombard's centennial in 1969. The LHS mission is to preserve, promote, present and protect the history of Lombard. The society has one full-time Executive Director, two part-time program coordinators, and an archivist. For 2014, a Civil War event coordinator was hired to help plan the event. The Society has a small budget to help pay for the event, but most of the event relies on in-kind donations, grants and sponsors.

<ol> <li>Please describe the goals and objectives of the organization and how they are supported by this program</li> </ol>			
The goal of LHS is to present history in a fun and dynamic way. This encampment brings history alive and reaches a larger audience than we are generally able to do.			
3) What is the organization's plan to make the project self-sustaining?			
With continued sponsorship support we hope to gain more independence believe this is the perfect event to bring both tourism and hotel stays.	a. With that be	ing said, we do	
PROJECT DESCRIPTION Have you requested grant funding in the past?	⊠ Yes	□ No	
Is the event open to the general public?	⊠ Yes	□ No	
Do you intend to apply for a liquor license for this project?  Will any revenues from this event be returned to the community?	☐ Yes ☐ Yes	⊠ No ⊠ No	
1) Provide the details regarding the event or project including a full descrianticipated timeline.  Sweet's Civil War Encampment begins in the evening of Friday, July 25, and July 27.  Friday, July 25: The re-enactors arrive around 4pm to register and set up movie in the park on Friday night (hopefully the recent Oscar-winning moderate and Union of The Civil War hospital, blacksmith, pewter shop, live music, food trucks and A small skirmish occurs at 11am, followed by a large battle with pyrotech Lincoln will also be on site to interact with the public. A candlelight tour night.  Sunday, July 27: Similar schedule as Saturday, with the addition of Civil War to the public. The 2014 Sweet's Encampment closes at 4pm.	nd continues their camps. Wovie Lincoln). camps opening nd sutlers (veninics at 2pm. Pand a ball will but ar-era dance in	rough Sunday,  Ve plan to show a  to the public.  dors) also open.  resident and Mrs.  be held Saturday	
2) If your application is accepted, how will the tourism grant funds be use.  The grant funds will be used to cover entertainment, supplies and advert			
3) What modifications to the event or other steps will be taken to increase previous years (not applicable to first time events)? This year we hope to have WGN come and broadcast live. In 2013, WGN			
the event and we will schedule sooner to avoid a conflict. We will also be throughout Illinois and surrounding states.			

### **LOCATION**

Provide the location of the event or project. If a location has not been secured, list the venue(s) being proposed or considered.

Four Seasons Park at Main Street and 16th in Lombard, IL

### MILESTONES AND TIMETABLES

Describe the milestones that will mark the progress towards implementing the project and provide a timetable for the completion of each milestone.

Planning has already begun. We are currently contacting hotels to secure a block of rooms. A letter will be sent to the Lombard Park Board to get formal permission in December. Sponsorship meetings will happen in January — March. Entertainment will be secured in January and February and registration forms will also go out. Food trucks (including local food vendors) will be contacted by March.

### IMPACT

1) Please describe how the event or program will promote overnight stays and/or tourism within the Village of Lombard.

Many of the reenactors and vendors are from out of state. Many reenactors camp in the park, but some choose to stay in hotels. In 2013, local reenactors booked at least 4 rooms. The participants come from lowa, Indiana, Wisconsin, Kentucky and Tennessee.

2) Please describe the economic benefit to local businesses and the Lombard community. How will your event draw more people from outside the local market (50 miles or more) or attract a new visitor audience?

Besides booking local hotel rooms, we will also ask local food establishments to sell food at the event, specifically Cupcakes for Courage. The reenactors also shop locally for supplies. The participants eat at local restaurants for some of their meals. We will continue to advertise outside of the local markets in Rockford and Bloomington, and even into neighboring states.

3) Who is the target audience for your event or project? What is your anticipated attendance?

Sweet's Civil War Encampment appeals to a broad audience of anyone who enjoys history or festivals. We anticipate over 5000 people attending over the three days.

4) Please describe any collaborative arrangements developed with other organizations to fund or otherwise implement the project (include in-kind donations).

LHS works closely with the Lombard Park District and the Helen Plum Library. The Library co-sponsors the movie for Friday night. Local businesses such as TheCareofTrees and Waste Management have donated in the past and we will be looking for those donations again. Stanford's Mississippi Battery, a local reenacting unit, donates hundreds of hours of service as well as supplying a landscaper with ground restoration. They also supply the technical expertise for pyrotechnics and battle planning. Stanford's brings three cannons, and supplies all clean-up of the event as well. The 8th Volunteer Reserve Corps is another volunteer unit that provides volunteers and helps coordinate the living history.

5) Please describe your marketing plan. Detail the strategies your organization will use to promote the event or project (e.g., advertising, public relations, marketing, print materials, promotional pieces).

Our marketing plan includes both local and regional marketing. Locally, we will produce banners for the village as well as flyers for the schools. We will have a contest for school children to find Civil War cutouts placed around the village. Regionally we will be advertising in Rockford and Bloomington. We will also create a banner that will go to many events outside of the local market including Rockford, Indiana, and Wisconsin. The banner will also go nearby to Bartlett, Naperville, and Lake County. We will request WGN's Anna Bellavalle do a live remote broadcast from the park on July 25th to bring more people to the event. DuPage County CVB has already placed information in its print pieces.

FIN.	Αľ	N	CI	ES
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Click here to enter text.
Additional Notes, Comments or Explanations:
CHECKLIST  ☐ Completed Local Tourism Grant Program Application Form. ☐ Completed detailed budget form. ☐ Promotional materials from past events (not applicable to first time events). ☐ Post event summary from past event (not applicable to first time events). ☐ Copy of the most recently completed agency audit or explanation of why it is not available. ☐ Copy of the most recent Federal Form 990 for the agency or explanation of why it is not available.
Please include a detailed itemized budget for your entire event on the attached budget form (2 years of past actuals and estimates for upcoming event).  Attach a copy of the most recently completed agency audit and Federal Form 990. If these documents are not available, please explain why they are not available.

### CERTIFICATION

The undersigned certifies that to the best of his or her knowledge and belief that data in this application are true and correct, the application has been duly authorized by the organization and any funds received under this grant will be used for the purposes described in this application.

Name:	Savah RichardT	
Title or office held:	Swent Coordinatol	Date: /2/4/12
Signature:	hard	17/12

## LOCAL TOURISM GRANT PROGRAM DETAILED BUDGET

Event: Sweet's Civil War Encampment		Date:	July $25 - 27, 2014$
			•
Organization:	Lombard Historical Society		

**INCOME:** Include an itemized list of all actual (past 2 years) and estimated project revenues (entry fees, gate receipts, food/beverage sales, donations, sponsorships, booth rentals, souvenir sales, other revenues)

ITEMIZED REVENUES	ACTUAL	ACTUAL	ANTICIPATED
	2012_	2013	
Lombard Tourism Grant	\$4100	\$6000	\$6000
Ticket Sales and Donations	2209	2984	3500
Vendor/food truck fees	0	240	300
LHS funds	1400	580	1500
Sponsorships	200	0	2000
	, , , , , , , , , , , , , , , , , , ,		
Total Income	\$8209	\$9804	\$13300

**EXPENSES:** Include an itemized list of all actual and estimated project expenses (advertising, supplies, labor, rentals, insurance, materials, entertainment, other expenses)

ITEMIZED EXPENSES	ACTUAL 2012	ACTUAL 2013	ANTICIPATED
	\$	\$	\$
Entertainment	1770	1824	2043
Supplies	2790	3100	3150
Advertisement	1823	813	787
Logistics	2942	3689	5730
Total Expenses	\$8290	\$9426	\$12746

9426.38

<u>IN-KIND CONTRIBUTIONS</u>: Include an itemized list of all actual and estimated in-kind contributions. In-kind contributions are non-cash donations, contributions or gifts which can be given a cash value (include Village of Lombard in-kind services, where applicable)

	ACTUAL2011	ACTUAL2012	ANTICIPATED
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Estimated value of in-kind contributions (explain)

\$1550	\$590	2870
Supplies	supplies	Supplies (straw, wood, hay, printing,
		landscape repair)

### VILLAGE OF LOMBARD LOCAL TOURISM GRANT – POST EVENT SUMMARY

This post event summary must be completed within 90 days of the event completion. Failure to submit a post-event summary may affect the applicant's ability to receive future grant funds.

### **GENERAL INFORMATION**

Organization:	Lombard Historical Society	Name of event:	Sweets Civil War Encampment		
Date of event:	7/26/2028	Event location:	Four Seasons Park		
Contact person:	Sarah Richardt	Title:	Event Coordinator		
Business address:	23 W. Maple Street	City & Zip:	Lombard, IL 60148		
Telephone:	630-629-1885	E-mail address:	info@lombardhistory.org		
Estimated attendance:	5000	Estimated hotel stays: 10+			
Method for estimating attendance: Actual number counts at various times of the day, including the battle					

1) Please summarize the advertising and marketing placed to promote the event. Please attach examples of event marketing pieces and advertisements.

Newspaper ads in Rockford paper as well as Bloomington, local paper ads, 8 cut-outs were place around Lombard as signage. Banners were placed at Wilson and Main as well as the Sheldon Peck Homestead. The 8th VRC was also in the Lilac Parade advertising the event. Posters and flyers were also given out

2) Provide a general assessment of the event. What were the successes of the event? Are there any concerns or recommendations of changes for future events?

The event was an overall success. The Park District was happy with the condition the park was left. The reenactors generally believe this is the best event of the season. We would not want the event to get too much larger as we will run out of parking with more than 6000 people.

3) How did the actual outcomes of the program or event compare to your original expectations?

We anticipated a great event and that is what we had. We work very hard to plan this and work out the small details.

Describe your organization's long term plans for funding this project or event.

We will continue to find sponsors and grants for this event.

### SUBMISSION INSTRUCTIONS

Please submit completed form and associated application documents on or before December 15, 2013 to
Nicole Aranas, Assistant Village Manger, by e-mailing aranasn@villageoflombard.org or by using the
submit button below.

Submit \*Please note that the applicant must save the completed form and have Microsoft Outlook to use the submit button above.

If you do not receive a confirmation receipt of your completed application, please contact Nicole Aranas at 630-620-3085 or <a href="mailto:aranasn@villageoflombard.org">aranasn@villageoflombard.org</a> to confirm.

Selden Fox, LTD.

CERTIFIED PUBLIC ACCOUNTANTS
619 Enterprise Drive
Oak Brook, Illinois 60523-8835

630-954-1400 630-954-1327 FAX

email@seldenfox.com www.seldenfox.com

### INDEPENDENT AUDITOR'S REPORT

Board of Management Lombard Historical Society, Inc. Lombard, Illinois

We have audited the accompanying statement of assets, liabilities and net assets – modified cash basis of the **Lombard Historical Society**, **Inc.** (Organization) at May 31, 2012 and 2011, and the related statement of revenues, expenses and changes in net assets – modified cash basis and statement of cash flows – modified cash basis for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As described in Note 1, the Organization's policy is to prepare its financial statements on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

In our opinion, the financial statements referred to above present fairly, in all material respects, the assets, liabilities and net assets of the Lombard Historical Society, Inc. as of May 31, 2012 and 2011, and the results of its revenues, expenses and changes in net assets and cash flows for the years then ended, on the basis of accounting described in Note 1.

February 28, 2013

Selden Fox, Ltd.

### Lombard Historical Society, Inc. Statement of Assets, Liabilities and Net Assets - Modified Cash Basis May 31,

	* *	
	2012	2011
Assets		, ,
Cash	\$ 91,393	\$ 77,170
Investments:		
Mutual fund, at fair value	10,565	•
Certificates of deposit	57,934	73,899
	-	
Total assets	\$ 159,892	\$ 151,069
Net Assets		1
Net assets:		
Unrestricted	\$ 141,677	\$ 151,069
Temporarily restricted	18,215	-
Total net assets	\$ 159,892	\$ 151,069

## Lombard Historical Society, Inc. Statement of Revenues, Expenses and Changes in Net Assets - Modified Cash Basis For the Year Ended May 31,

		2012 Temporarily		2011
	Unrestricted	Restricted	Total	Total
		**		
Revenues, gains and other support: Government reimbursements Donations and contributions Memberships	\$ 109,460 28,172 4,130	\$ - 31,434	\$ 109,460 59,606 4,130	\$ 112,546 37,238 3,585
Investment income  Net assets released from restrictions	1,316 13,219	- (13,219)	1,316	2,113
7100 000000		*	15 <u>-</u>	
Total revenues, gains and other support	156,297	18,215	174,512	155,482
Expenses:	.440 544	•	118,541	115,882
Reimbursed expenses Historical Society	118,541 44,106	· · · · -	44,106	21,110
Peck House Miscellaneous	3,042 -	<u>-</u>	3,042	115
Total expenses	165,689		165,689	137,203
Change in net assets	(9,392)	18,215	8,823	18,279
Net assets:	151,069		151,069	132,790
Beginning of the year	141,677	18,215		151,069
End of the year	141,077			·

## Lombard Historical Society, Inc. Statement of Cash Flows - Modified Cash Basis For the Year Ended May 31,

	2012	2011
Cash flows from operating activities: Change in net assets Adjustments to reconcile change in net assets to net cash from operating activities: Reinvested dividends Unrealized gain on mutual funds	\$ 8,823 (1,101) (202)	\$ 18,279 -
Net cash from operating activities	7,520	18,279
Cash flows from investing activities: Purchase of investments Proceeds from maturity of certificates of deposit	(10,000) 16,703	1,340
Net cash from investing activities	6,703	1,340
Net increase in cash	14,223	19,619
Cash, beginning of the year	77,170	57,551
Cash, end of the year	\$ 91,393	\$ 77,170

## Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

Form 990-EZ (2012)

Department of the Treasury Internal Revenue Service

Α		the 2012 calendar year, or tax year beginning Jun 1 , 2012, and ending Dec 31	, 2012
뭐	Chec		mployer identification number
-	4		23-7114585
-	╡	Market and the Lorentz and the Control of the Contr	elephone number
-	<b>≔</b>		(630) 629-1885
	Amer	ded return City or town, state or country, and ZIP + 4	<del></del>
	Applic	Lombard II. 60148   F G	roup Exemption lumber
G			if the organization is not
1	Web		attach Schedule B
J	Tax-e	exempt status (check only one) — X 501(c)(3) 501(c) ( ) √(insert no.) 4947(a)(1) or 527 (Form 990,	990-EZ, or 990-PF).
K	Che	$\mathbb{R} \succ \square$ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization ally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-post	nd its gross receipts are
	instr	uctions). But if the organization chooses to file a return, be sure to file a complete return.	card) may be required (see
L	Add asse	lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if totats (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	al ►\$ 118,821.
R	TILL.	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction	ons for Part I)
		Check if the organization used Schedule O to respond to any question in this Part I	X
	1	Contributions, gifts, grants, and similar amounts received	1 116,039.
	2	Program service revenue including government fees and contracts,	2
	3	Membership dues and assessments	3 1,832.
	4	Investment income	4 950.
		Gross amount from sale of assets other than inventory	
	l E	Less: cost or other basis and sales expenses	
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
_	6	Gaming and fundraising events	
E		Gross income from gaming (attach Schedule G if greater than \$15,000) 6 a	
Ē	b	Gross income from fundraising events (not including\$ of contributions	
REVENUE		from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	
Ε.	٥	Less: direct expenses from gaming and fundraising events 6c	
	ŀ	Net income or (loss) from gaming and fundraising events (add lines 6a and	
•		6b and subtract line 6c)	6 d
	1	Gross sales of inventory, less returns and allowances	
		Less: cost of goods sold	
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a).	7 c
	8	Other revenue (describe in Schedule O)	8
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 118,821.
	10	Grants and similar amounts paid (list in Schedule O)	10
	11	Benefits paid to or for members	11
E	12	Salaries, other compensation, and employee benefits	12 46,836.
P	13	Professional fees and other payments to independent contractors	13 3,191.
N S	14	Occupancy, rent, utilities, and maintenance	14 9,603.
EXPENSES	15	Printing, publications, postage, and shipping	15 1,187.
-	16	Other expenses (describe in Schedule O). SeeForm990-EZ,PartI,Line 16Other Expense	16 30,627.
	17	Total expenses.Add lines 10 through 16	17 91,444.
Λ	18	Excess or (deficit) for the year (Subtract line 17 from line 9).	18 27,377.
A SSET	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	
ĘĘ		ngaro reported our prior year a retainy	19 159,892.
S	20	Other changes in net assets or fund balances (explain in Schedule O)	20
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21 187,269.
BA	A Fo	Paperwork Reduction Act Notice, see the separate instructions.	Form 990-EZ (2012)

al Society		23	<u>-71</u>	.14585 Page 2
actions for Part II.)				
ule O to respond to any que		4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u>L</u>
	· <u>                                     </u>	(A) Beginning of ye		(B) End of year
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		159,892		
lumn (B)must agree with lin	he 21)	750 000		
		-159,892	2	7 187,269. Expenses
<b>implishments (see the instra</b> edule O to respond to any q			(Re	quired for section 501
torical Education			l (c)(	3) and 501(c)(4)
omplishments for each of its manner, describe the service	s three largest progra	m services, as	org	anizations and section 7(a)(1) trusts; optional
manner, describe the servic ch program title.	es provided, the num	ber of persons		others.)
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ustees, and Key Emplo edule O to respond to any c	ustestion in this Part I'	even ir not compensated. V	, (see	the instructions for Part IV.)
		40.41.10.1.5	s,	
(b) Average hours per week devoted to	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	contributions to empl benefit plans, and de	oyee	(e) Estimated amount of other compensation
position	(If not paid, enter-0-)	compensation		
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### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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. See separate instructions.

Lombard Historical Society						23-7	11458	5		
Pattile Reason for Public Charity Status (All o	rganizations (	must c	omplet	e this	part.)	See in:	structio	ns.		
The organization is not a private foundation because it is:	(For lines 1 thro	ough 11,	check d	only one	box.)					
1 A church, convention of churches or association			section	170(b)(	(1)(A)(1).	•				
2 A school described in section 170(b)(1)(A)(ii). (Att										
3 A hospital or a cooperative hospital service organ										
4 A medical research organization operated in conj	junction with a h	nospital o	describe	ed insect	ion 170	(b)(1)(A)	(iii) Ente	er the hosp	ital's	
name, city, and state:								,		
二 I/U(b)(T)(A)(IV). (Complete Part II.)										
A federal, state, or local government or government										
7 An organization that normally receives a substanti in section 170(b)(1)(A)(i). (Complete Part II.)				/ernmen	tal unit	or from	the gene	eral public	describ	ed
8 A community trust described in section 170(b)(1)										
9 An organization that normally receives: (1) more than a related to its exempt functions — subject to certain exunrelated business taxable income (less section 511 to (Complete Part III.)	xceptions, and (2 ax) from business	?) no mor ses acqui	e than 3 red by th	3-1/3% e e organi	of its sur zation at	port from ter June	and gross n gross ir 30, 1975.	receipts fro nvestment i See sectio	m activ ncome n 509(a	/ities and a)(2).
10 An organization organized and operated exclusive										
An organization organized and operated exclusively for supported organizations described in section 509(a) supporting organization and complete lines 11e to	(1) or section 50: hrough 11h.	9(a)(2).	See sec	ctions of tion 509	, or carry (a)(3). C	out the pheck the	ourposes box that	of one or m t describes	ore put the typ	blicly be of
	oe III — Function							inctionally		ated
<ul> <li>By checking this box, I certify that the organization other than foundation managers and other than o section 509(a)(2).</li> </ul>	on is not controli one or more pub	led dired licly sup	tly or ir ported	idirectly organiza	by one tions de	or more escribed	disquali in sectio	ified person on 509(a)(1	ns I) or	
f If the organization received a written determination check this box	on from the IRS	that is a	Type I	, Type I	or Typ	e III sup	porting o	organizatio	n, 	
g Since August 17, 2006, has the organization acce	epted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	?		
									Yes	No
<ul> <li>(i) A person who directly or indirectly controls, below, the governing body of the supported</li> </ul>								11g (i)		
(ii) A family member of a person described in (	-							11 g (ii)	i	
(iii) A 35% controlled entity of a person describe								11g (iii)		
h Provide the following information about the suppo	orted organizatio	n(s).						3 ()	!	
(i) Name of supported (ii) EIN (iii) Ty organization (descr abov (se	pe of organization ibed on lines 1-9 e or IRC section e instructions)	(iv) is organiza column (i) your gov docum	ition in listed in reming	(v) Did you the organiz column (i) supp	tation in of your	(vi) la organiza colum organized U.S	ation in in (i) I in the	(vii) Amoun sup	t of mon port	etary
		Yes	No	Yes	No	Yes	No			
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(E)										
Total							. 35° 24"			- · · -

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							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	( <b>c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	128,109.	137,061.	167,724.	173,197.	117,871.	723,962.
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	128,109.	137,061.	167,724.	173,197.	117,871.	723,962.
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)						
	Public support. Subtract line 5 from line 4.					,	723,962.
	tion B. Total Support						
begin	ndar year (or fiscal year nning in)►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	128,109.	137,061.	167,724.	173,197.	117,871.	723,962.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,050.	2,578.	1,714.	1,316.	950.	12,608.
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 IV.)						
11	Total support. Add lines 7 through 10						736,570.
12	Gross receipts from related activ	rities, etc (see ins	tructions)			12	<u> </u>
13	First five years. If the Form 990 organization, check this box and	stop here			r fifth tax year as		3)
Sec	tion C. Computation of Pub	lic Support Pe	rcentage				<del></del>
14	Public support percentage for 20	12 (line 6, colum	n (f) divided by lir	ne 11, column (f))			98.29%
15	Public support percentage from						97.14%
16a 33-1/3% support test— 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
b	b 33-1/3% support test— 2011. 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.						
æ	17a 10%-facts-and-circumstances test— 2012. 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 to here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization						
	b 10%-facts-and-circumstances test— 2011. 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 top here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization						
		Lauon did not che	TOK A DOX ON HINE	10, 10a, 100, 17a		·	
BAA	•				So	medule A (Form 9	90 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Lombard Historical Society 23-7114585 Page 3

[Parkill Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Sec	tion A. Public Support	·					
Cale	ndar year (or fiscal yr beginning in)►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	. <b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
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	,					
3	Gross receipts from activities that are not an unrelated trade or business under section 513.					-	
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
ŀ	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			·			
•	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						-
Calen	dar year (or fiscal yr beginning in) 🗠 🦠	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
_	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses						
_	acquired after June 30, 1975 Add lines 10a and 10b			· · · · · · · · · · · · · · · · · · ·			
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				•		
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add ins 9, 10c, 11, and 12.)		<u> </u>	<u>                                     </u>	<u> </u>	, <u>F</u>	1
14	First five years. If the Form 990 i organization, check this box and	is for the organizations	ation's first, secon	id, third, fourth, o	r titth tax year as	a section 501(c)(	<sup>3)</sup> ► 🗍
	tion C. Computation of Pub						
15	Public support percentage for 20	12 (line 8, colum	n (f) divided by lir	ne 13, column (f))	)	15	ક્ર
16	Public support percentage from:	2011 Schedule A,	Part III, line 15.			16	ક
Sec	tion D. Computation of Inve	stment Incom	e Percentage				
	Investment income percentage f		• •				ક
	Investment income percentage f						용
	i 33-1/3% support tests— 2012. If is not more than 33-1/3%, check	this box andstop	here. The organi	zation qualifies a	s a publicly suppo	orted organization	
	33-1/3% support tests— 2011. If line 18 is not more than 33-1/3%						
20 BAA	Private foundation. If the organi	Zation did not che	TEEA0403				990 or 990-EZ) 2012
CAA			IEEAU4U3	U01U911Z	51	caequie A. Irorm S	990 OF 9905E /1 2012

Schedule A	(Form 990 or 990-E∠)	2012 Lombard	l Historical	. Society	23-7114585	Page 4
PartiV	Supplemental Info Part II, line 17a o (See instructions)	ormation. Comp r 17b; and Part II	lete this part to I, Iine 12. Also	provide the expla complete this par	nations required by Part II, line t for any additional information.	10;
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### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Employer identification number

2012

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 990-EZ.

Quanto Public Inspection

Lombard Historica	23-7114585	
16	Collections and Exhibits	· 
16	Office Expenses	
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the instructions for Part V) Check if the organization used S	chedule O to respond to any question in this Part V	<u></u>		<u>.                                    </u>
33 Did the organization engage in any activity not previously reports provide a detailed description of each activity in Schedule O	ed to the IRS? If 'Yes,'	-	Yes	No
34 Were any significant changes made to the organizing or governing documents? If 'Y	Yes,' attach a conformed copy of the amended documents if they reflec	33		X
a change to the organization's name. Otherwise, explain the change on Schedule 0 35 a Did the organization have unrelated business gross income of \$1		34	<u>.                                    </u>	х
(such as those reported on lines 2, 6a, and 7a, among others)?.		35 a		х
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for t		35b		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) reporting, and proxy tax requirements during the year? If 'Yes,' or	complete Schedule C, Part III	35 c		х
36 Did the organization undergo a liquidation, dissolution, terminated disposition of net assets during the year? If 'Yes,' complete appl		36		х
37 a Enter amount of political expenditures, direct or indirect, as desc	cribed in the instructions 37a 0			
b Did the organization file Form 1120-POL for this year?	cer, director, trustee, or key employecor were	37b	- A.S.	X
any such loans made in a prior year and still outstanding at the a bif 'Yes,' complete Schedule L, Part II and enter the total	end of the tax year covered by this return?	38a		Х
amount involved		_		, i
39 Section 501(c)(7) organizations. Enter:	20			
a Initiation fees and capital contributions included on line 9	<del> </del>			
b Gross receipts, included on line 9, for public use of club facilities		-		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed or section 4911 ►; section 4912 ►	; section 4955 ►	1		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization transaction during the year or did it engage in an excess benefit on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Sche	transaction in a prior year that has not been reported	40 b		X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of t managers or disqualified persons during the year under sections				
	tax on line 40c reimbursed			
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of to by the organization	· · · · · · · · · · · · · · · · · · ·	13年後期間	٠	1000000
by the organization	ization a party to a prohibited tax	40 e		Х
by the organization	nization a party to a prohibited tax	40 e		х
by the organization	nization a party to a prohibited tax	40 e		Х
by the organization	nization a party to a prohibited tax	40 e		X
by the organization		<u> </u>	-02	
by the organization	ization a party to a prohibited tax  Telephone no. ► (847  Elk Grove Village IL ZIP+4► 6000	)_439	-02	
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. ► (847 Elk Grove Village IL ZIP+4► 6000	)_439	-02 Yes	50
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. ► (847 Elk Grove Village IL ZIP+4► 6000	)_439		50
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. ► (847 Elk Grove Village IL ZIP+4► 6000	)_439		50
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. ► (847 Elk Grove Village IL ZIP+4► 6000	)_439		50
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village IL ZIP+4 6000  an interest in or a signature or other authority over a securities account, or other financial account)?	)_439		50
by the organization.  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village IL ZIP + 6000  an interest in or a signature or other authority over a securities account, or other financial account)?	) 439 7 42b		50 No X
by the organization  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village II. ZIP + 4 6000  an interest in or a signature or other authority over a securities account, or other financial account)?	)_439		50
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e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village IL ZIP + 6000  an interest in or a signature or other authority over a securities account, or other financial account)?  Report of Foreign Bank and Financial Accounts.  Example and Financial Accounts.  Example 1 in 1041 — Check here.  In diduring the tax year.  In a year? If 'Yes,' Form 990 must be completed instead	) 439 7 42b 42c	Yes	50 X
by the organization.  e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no.  (847  Elk Grove Village IL ZIP + 6000  an interest in or a signature or other authority over a securities account, or other financial account)?	)_439 7	Yes	No X
e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no.  (847  Elk Grove Village IL ZIP + 4 6000  an interest in or a signature or other authority over a securities account, or other financial account)?	)_439 7	Yes	No X
e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no.   (847  Elk Grove Village IL ZIP + 4 6000  an interest in or a signature or other authority over a securities account, or other financial account)?  Report of Foreign Bank and Financial Accounts.  Ez in lieu oForm 1041 — Check here  d during the tax year.   Late year? If 'Yes,' Form 990 must be completed instead ing the year? If 'Yes,' Form 990 must be completed ervices during the year?	)_439 7 42b 42c 44a 44b 44c	Yes	No X
e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village IL ZIP+4 6000  an interest in or a signature or other authority over a securities account, or other financial account)?  Report of Foreign Bank and Financial Accounts.  ain an office outside of the U.S.?  EZ in lieu oForm 1041 — Check here  d during the tax year. 43    ne year? If 'Yes,' Form 990 must be completed instead  ing the year? If 'Yes,' Form 990 must be completed  ervices during the year?  ort these payments?	1 439 7 42b 42c 42c	Yes	No X
e All organizations. At any time during the tax year, was the organ shelter transaction? If 'Yes,' complete Form 8886-T	Telephone no. (847  Elk Grove Village II ZIP + 4 6000 an interest in or a signature or other authority over a securities account, or other financial account)?	1 439 7 42b 42c 42c	Yes	No X

a.				•			
Form 99	0-EZ (2012) Lombard Historical	Society	•	23-71	14585	Pa	age 4
						Yes	No
46 Dic	the organization engage, directly or indirendidates for public office? If 'Yes,' complete	ectly, in political campa e Schedule C. Part I	ign activities on behalf o	of or in opposition to	46		X
PareW	Section 501(c)(3) organizations All section 501(c)(3) organizatio for lines 50 and 51.	only				<u>r</u>	<u>                                     </u>
	Check if the organization used Schedu	le O to respond to any	question in this Part VI				П
47 Did	I the organization engage in lobbying activi					Yes	No
con	nplete Schedule C, Part II				47		х
	the organization a school as described in s						Х
	the organization make any transfers to an						X
50 Cor	Yes,' was the related organization a sectior mplete this table for the organization's five ployees) who each received more than \$10	highest compensated	employees (other than o	officers, directors, trusto	ees and kev		
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other comp		
None	· · · · · · · · · · · · · · · · · · ·						
		-					
					,		
					•		
f Tota	al number of other employees paid over \$1	100,000	<u>-i</u>			-	
51 Con	nplete this table for the organization's five opensation from the organization. If there i	highest compensated	independent contractors	who each received mo	ore than \$10	0,000	of
	) Name and address of each independent contractor paid		(b) Type	of service	(c) Comp	ensation	1
None	<del> </del>			·			
10110			-				
			-	·			
d Tota	al number of other independent contractors	s each receiving over	100,000	<del>.</del>	·		
cha	the organization complete Schedule A? No ritable trusts must attach a completed Sch	edule A			► X Yes		No
Under penalt true, correct,	ties of perjury, I declare that I have examined this return, , and complete. Declaration of preparer (other than office	, including accompanying sche r) is based on all information	dules and statements, and to the of which preparer has any know	e best of my knowledge and be edge.	elief, it is		
-1	Signature of officer			Date .			
Sign Here		- 11					
11010	Richard W. Gallicchio Type or print name and title.	orall /		Treasurer			<del></del>
	Print/Type preparer's name	Preparer's signature	Date	T IF	TIN		

TEEA0812 03/14/13

May the IRS discuss this return with the preparer shown above? See instructions.....

Paid Preparer Use Only .

Firm's name ► Firm's address ► Check if self-employed

Firm's EIN Phone no.

► Yes

No

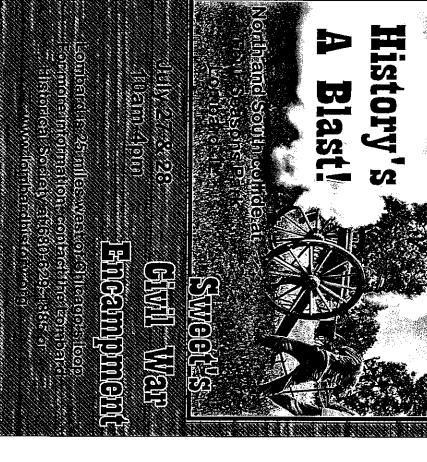
Form 990-EZ (2012)

'Lombard Historical Society	23-7114585		. 1
Schedule O (Form 990 or 990-E Form 990-EZ, Part I, Line 16 Otl		ion to Form 990 or 990-EZ	
Other expenses (describe in Sci			
Collections and Exhib	its	18,912.	
Office Expenses		11,715.	

30,627.

c

Total











**Lombard Historical Society** May 22, 2012

Add a description

Tag Photo Add Location Edit

Like · Comment · Share · Edit

Diane Piccluolo and Patti Clower like this.



Write a conment...

Parade panner





Lombard Historical Society May 22, 2012

### Add a description

Tag Photo	Add Location	Edit

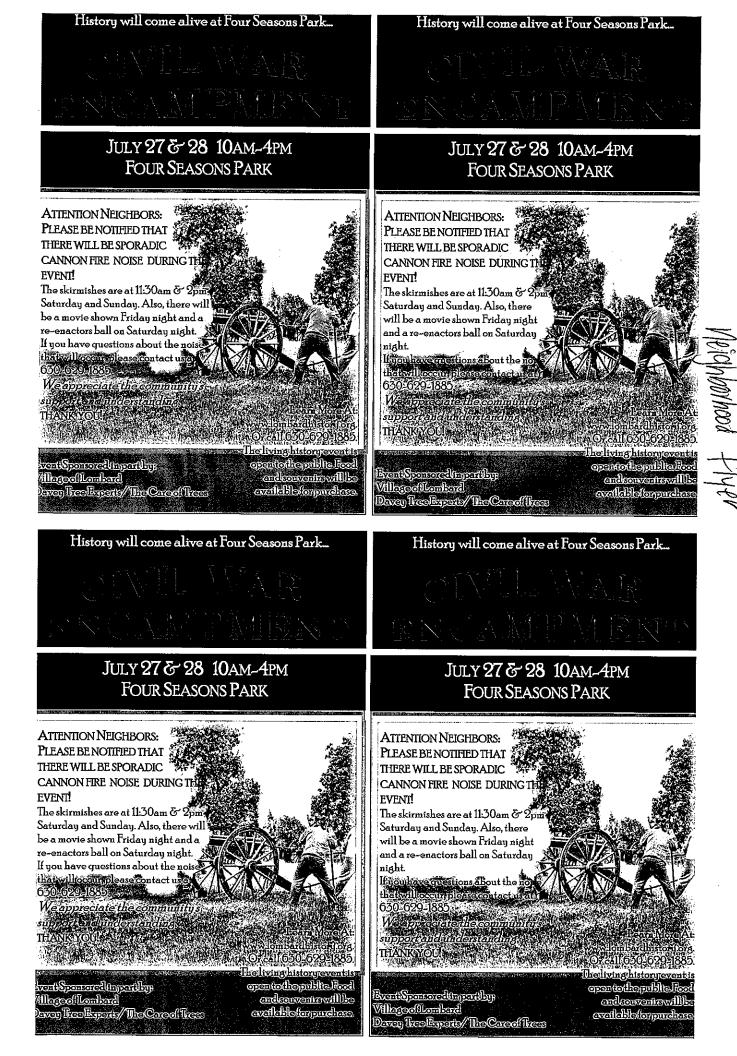
Like · Comment · Share · Edit



Lilac Parade 2012 7 of 18

Tag Photo Options Promotion Unavailable Share Like

Januar James



Welcome to the 3rd annual Sweet's

# CAMPMENT ALWIL WAR

Hosted by:



Stanford's Battery

8th Veteran Reserve Corps

HISHORICAN SISTEMBA

Sponsored by #



necareoffrees. DAVEY & company

Speatell themks to the Lombard Park Distrilet

for the use of Four Sessons Perlk

Perficipating Units

Stemlord's Beltleny (Inost)  $\mathcal{E}^{p}$  Vet Reserve (Nost)

 $\mathscr{G}^n$  Viligitalei Geliversy

 $\ell(\mathcal{EL}^{D}$  Senior Termessee गिल्टिन्ट्यून्टि डिन्सिन्ग्र

Infantry

Austin's Battellon 3rdi Irann- ഭേഷണ്യ ीडरे गिनिक मिटि

404th Illinois

ीत्रको दन्ताञ्च मिद्धा त्रीत्रकृ

## Schedule of Activities

## Friday July 26, 2013

Reenactor Registration 2:00-8:00pm

Officers Call 8:30pm Dusk

Movie in the Park: Gettysburg (open to the public) The movie is co-sponsored by the Helen Plum Library. Admission is free and popcorn will be available for purchase.

# Saturday July 27, 2013

Reenactor Registration 9:00-10:00am

Event opens to the public 10:00am-4:00pm 10:00am

Visit the Military Camps Civil War Surgeon 10:00am-4:00pm

Civil War Embalmer 10:00am-4:00pm

Music Provided by Plank Road Folk Music 11:00am-4:00pm

Skirmish 11:30am

12:30pm

Presentations by the Generals in the Main Tent

Pre-Battle Activities & Safety Inspections 2:00pm

2:30pm

Post Battle Announcements 3:00pm

Public viewing of camps closes 4:00pm

Reenactor Dinner (private) 5:00-6:30pm

Dance in Main Tent (public welcome as spectators) Candle Light Camp Tour (ticketed event) 8:30-10:00pm 7:00-9:30pm

Sign up at the Country Store-Tickets are \$5 for adults

and \$3 for children.

## Sunday July 29, 2012

Church Call 9:00am

Event opens to the public Visit the Military Camps 10:00am-4:00pm 10:00am

Civil War Embalmer Civil War Surgeon 10:00am-4:00pm 10:00am-4:00pm

Plank Road Folk Music **Battalion Formation** 11:00am-4:00pm 10:30am

11:30am

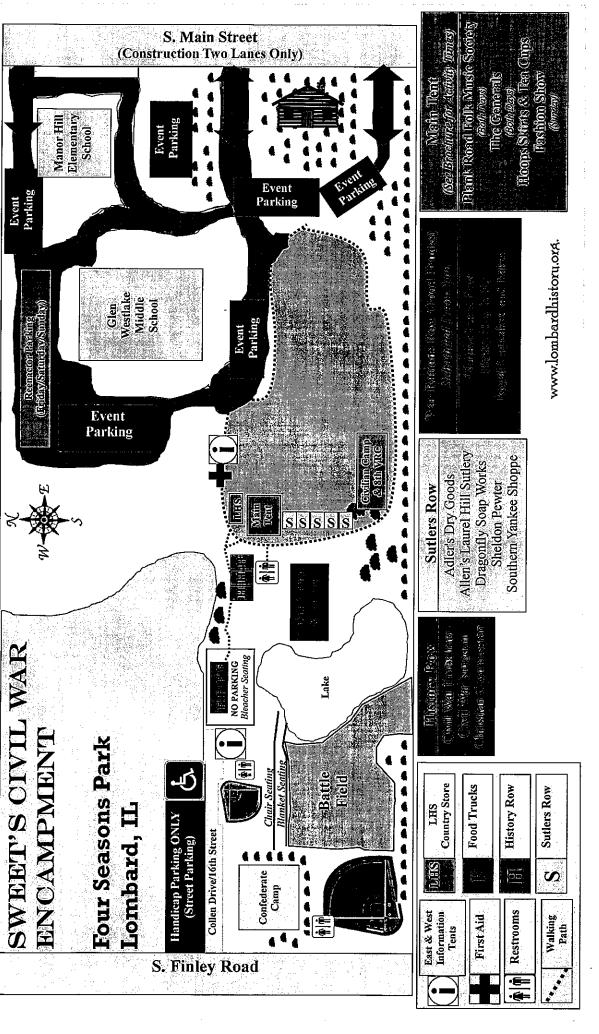
event) Please join us for Tea and a Civil War inspired fashion Show. Tickets Hoop Skirts and Tea Cups Fashion Show (ticketed Noon-1:00pm

are \$5 for adults and \$3 for children. Please sign up at the Country Store. Presentations by the Generals in the Main Tent Pre-Battle Activities & Safety Inspections 2:00pm 1:30pm

Cash Raffle Announcement Battle 2:15pm

2:30pm

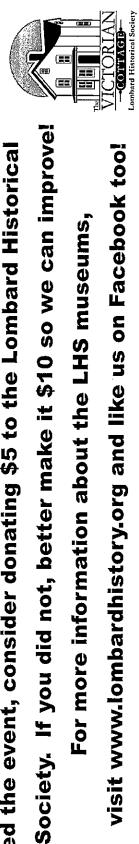
Post Battle Announcements Camps Close 4:00pm 2:45pm



If you liked the event, consider donating \$5 to the Lombard Historical

visit www.lombardhistory.org and like us on Facebook too! For more information about the LHS museums,

> Lombard Historical Society HOMESTEAD



Confederate Unit of Southern East weited as a southern East weited and a southern East with the southern East weiter.

Levely soon at Four Seasons Fark

Stop the attack on Lombard!



As over to the fortest fished south and approved by the village of fortest

## History will come alive at Four Seasons Park...

## JULY 27 & 28 10 AM-4PM FOUR SEASONS PARK

### See...

Civil War re-enactors encamped at Four Seasons Park. The Lombard Historical Society and Stanford's Battery play host to the following units:

- 17th Corps Field Hospital
- · Battery G, 2nd IL Light Artillary
- 17th MS Co. D
- 2nd KY Calvary, Co. D
- 3rd TNCo.D
- . 1st MI Engineers & Mechanics
- 104th IL
- 154th TN Infantry

### Try...

loimaginewhatitweslik

### Experience.

The camon five the drama of coulding and life parts 1800.

Event Spansared lags
Village of Lombard
Davey Tree Espans/The Care of Trees



Four Seasons Park in Lombard is located between Main and Finley south of Roosevelt Road at 10th Street.

wheliving history event is open to the publicanda \$5

suggested denotion will benefit the Lombard literated Scotety, Reed and souvents will be available for purchase.