

**VILLAGE OF LOMBARD  
LOCAL TOURISM GRANT PROGRAM APPLICATION FORM**

**GENERAL INFORMATION**

Organization:	Lombard Area Chamber of Commerce and Industry		
Name of event:	Lilac Time Art and Craft Fair		
Date of event:	5/1/2016	Event location:	Downtown Lombard
Contact person:	Yvonne Invergo	Title:	Executive Director
Business address:	10 Lilac Lane	City & Zip	Lombard 60148
Telephone:	630-627-5040	Email:	yvonne@lombardchamber.com

**PROJECT OVERVIEW**

Total cost of the project:	\$3700.00
Cost of city services requested in this application (if any):	\$3000.00
Total funding requested in this application:	\$3000.00
Percent of total project cost being requested:	%
Anticipated attendance:	2000
Anticipated number of overnight hotel stays:	Unknown – see below

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

100+ artisans and crafters set up along St. Charles Rd. between Main St. and Elizabeth Rd. Additionally there are food vendors, sponsors, a free Kid Zone and entertainment. Barricades, Electric hook-ups from Public Works, Police presence during the event and Fire Dept. to inspect weighted tents is needed for this event.

**ORGANIZATION**

Number of years that the organization has been in existence:	63 Years
Number of years that the project or event has been in existence:	20
Number of years the project has been supported by Village of Lombard funds:	20
How many years does the organization anticipate it will request grant funding?	10

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

The Lombard Area Chamber of Commerce and Industry is committed to promote positive development of our community and industries and to enhance the business climate for its members and to stimulate economic growth ; to encourage retail, professional service, industrial, cultural and civic growth within the Lombard area. Over the past 20 years, this event has grown in both popularity and size. The process is tweaked each year as needed, and is smooth running and organized. Crafters say that it is the best run show that they are involved with. Each year it brings thousands into our downtown area and Lilacia Park. An excellent committee of dedicated volunteers is credited with helping this event to run smoothly each year.

3) What is the organization's plan to make the project self-sustaining?

This event will always need the cooperation and services of the Village of Lombard. We don't believe that this event could be self sustaining – the Lombard Chamber cannot afford to put in the extensive time and effort of staff, without grant assistance from the Village. Planning for this event begins in December, and many staff and volunteer hours are put in from December thru the day of the event.

**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?  Yes  No  
Will any revenues from this event be returned to the community?  Yes  No

1) Provide a full detailed description of the proposed project or event.

Street to be barricaded by 5:00 AM with chalking of the street to begin at that time. 100+ crafters, 5+ food vendors, 5+ independent home party sales and 10+ Kid Zone sponsors, each with their own weighted tents, tables, chairs are set up in the chalked in spaces on St. Charles and Park. Ave. Vendor cars line up on N. Park from Grove to Orchard Terrace. Staggered set up times begin at 6:30 AM. LCPAAA assist with arrival & tear down traffic control. Event opens at 10 AM and ends at 4 PM. The Fun Ones are contracted for arcade games and climbing wall for Kid Zone. Food vendors are located at intersection of Park & St Charles Rd. with spider electric access boxes provided by Public Works. Requests for electric from crafters – provided within the tree vaults with access provided by Public Works. Police personnel on hand for during the day patrol of the event, and Fire Dept. on call for any emergencies that may arise.

2) If your application is accepted, how will the tourism grant funds be used?

To pay for the costs of Public Works, Fire Dept. and Police Department

3) What modifications to the event or other steps will be taken to increase event attendance over previous years (not applicable to first time events)?

Additional social media advertising Twitter and Facebook– boosted posts (\$\$) on Facebook. Postings in major craft publications and online sources (Midwest Art Fairs and FestivalNet.com) Full page ad in the Lombardian Newspaper – Press releases in Lombardian, Daily Herald and Suburban Life. Calendar posting on Chicago Tribune, and listing in the Lombard Park District Lilac Time brochure. This event increases each year based on word-of-mouth advertising. With the addition of the pedestrian underpass, we believe that there will be more foot traffic between Lilacia Park and the craft fair this year. Website information will be available on all of the Lilac Time activities in Lombard.

4) **LOCATION**

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

St. Charles Rd. and Park Ave. between Main and Elizabeth, Grove and Michael McGuire Dr.

### **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.

Crafter, food and Vendor applications available on our website beginning in Dec. 2015 – mass mailing in January 2016. Applications accepted thru the end of April. Mapping and assignment of booths is done mid-April with final mailing of instructions to crafters, food and vendors at that time.

### **IMPACT**

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

We plan to cross promote both the craft fair and visiting Lilacia Park for visitors. This will be on our website and in all Social Media postings, as a part of the 2 weeks of Lilac Time events.

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?

Local businesses that plan to be open that day will have an opportunity to attract attendees into their stores and restaurants. We plan to share the event information by email to other chambers of commerce in Illinois, and on a professional chamber of commerce Facebook page, as well as the Lilac Time Craft Fair FB page.

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

Males and Females ages 0 – 100+. There is something for everyone at this event. Entertainment & music, Kid Zone, crafts, food and downtown businesses.

4) Please identify and detail the cost of any Village of Lombard services anticipated as part of the event (e.g., Police, Public Works, etc.) and whether such costs will be reimbursed or funded under this grant. Please describe any collaborative arrangements developed or anticipated with other organizations to fund or otherwise implement the project (including in-kind donations).

Requesting \$3000 in grant funds to cover the costs of Public Works, Police and Fire. These costs are based on prior years Village costs and yearly increases for this event. LCPAAA will assist with traffic control, Tri-Town YMCA will assist with Kid Zone and another organization with garbage control. All will be receiving funds in exchange for their volunteerism.

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).

Social media advertising Twitter and Facebook– boosted posts (\$\$) on Facebook. You tube video from previous years. Advertising in the Lombardian Newspaper – Press releases in Lombardian, Daily Herald and Suburban Life. Chamber website information will be available on all of the Lilac Time activities in Lombard. We believe that “boosting” posts on Facebook will reach a greater audience for both adding crafters and enticing attendees.

**FINANCES**

- 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.

**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.

Additional Notes, Comments or Explanations:

AUDIT: The Lombard Chamber of Commerce does not do a formal yearly audit. Our yearly taxes are done by an outside agency, and our in-house financials are overseen by the board Treasurer. All of our checks require 2 signatures.

**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:	Yvonne M. Invergo		
Title or office held:	Executive Director	Date:	11/20/2015

Signature: \_\_\_\_\_

**LOCAL TOURISM GRANT PROGRAM  
DETAILED BUDGET**

Event: Lilac Time Art and Craft Fair

Date: May 1, 2016

Organization: Lombard Chamber of Commerce

**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 2014	ACTUAL 2015	ANTICIPATED
Lombard Tourism Grant	\$ 2487.99	\$ 2,795.33	\$ 3,000.00
Kid Zone Sponsors	2250.00	\$ 2,500.00	2,500.00
Entertainment Sponsor	~0~	\$ 300.00	300.00
Crafters Booth Sales	9500.00	\$ 10,700.00	11,000.00
Vendor Booths	700.00	\$ 1,100.00	1,100.00
Food Vendors	750.00	\$ 1,000.00	1,000.00
Late Fees	375.00	\$ 615.00	625.00
Electric	~0~	70.00	70.00
<b>Total Income</b>	<b>\$16,062.99</b>	<b>\$ 19,080.33</b>	<b>\$ 19,595.00</b>

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

ITEMIZED EXPENSES	ACTUAL 2014	ACTUAL 2015	ANTICIPATED
Postage	\$ 98.00	\$ 196.20	\$ 200.00
The Fun Ones	1158.00	1,425.00	1500.00
Music Entertainment	200.00	250.00	500.00
Tri Town YMCA - donation	500.00	500.00	500.00
Community Group - donation	500.00	500.00	750.00
LCPAAA - donation	750.00	750.00	750.00
Printing	50.00	50.00	50.00
Advertising	~0~	35.00	100.00
<b>Total Expenses</b>	<b>\$3256.00</b>	<b>\$ 3706.20</b>	<b>\$4350.00</b>

**IN-KIND CONTRIBUTIONS:** 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)

	ACTUAL 2014	ACTUAL 2015	ANTICIPATED
Community Group Donations	\$ 0	\$ 0	0
Village of Lombard	2487.99	2795.33	3000.00

**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 Chamber	Name of event:	Lilac Time Craft Fair
Date of event:	5/3/2015	Event location:	Downtown Lombard
Contact person:	Yvonne Invergo	Title:	Executive Director
Business address:	10 Lilac Lane	City & Zip:	Lombard, IL 60148
Telephone:	630-627-5040	E-mail address:	yvonne@lombardchamber.com
Estimated attendance:	2000	Estimated hotel stays:	Unknown, however, based on the assumption that Lilac Time events always bring overnight visitors to Lombard, we believe this popular event contributes as well.
Method for estimating attendance:		Based on past year attendance and unscientific counts (clicker)	

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

Lombardian full page ad. Midwest Art Fairs – paid listing of event, FestivalNet.com, Facebook, Twitter, Chamber website, Chicago Tribune Calendar and Daily Herald calendar submissions

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

Event went very well – record number of crafters and sponsors. Many new crafters this year, as well as crafters that return on a yearly basis. Load-in and load-out becomes more streamlined each year. Changing free electric to paid reduced the need for additional hook-ups by Public Works. Need to find a reliable group to take care of set-up and tear-down of tables and chairs as well as trash abatement during and after the event. This has always been a challenge each year. We are considering having the Lombard Town Centre handle this portion, especially since this event is being held in the downtown Lombard, we feel it is a way for us to give back.

- 4) Summarize how the program performed from a budgetary standpoint and describe how the program and any proceeds from the event were supportive of the organization, other local groups, initiatives or the community at large.

Event stayed on budget as far as postage costs and staff time. Record number of sponsors allowed us to fully fund the Kid Zone.

\$1750 of the proceeds benefited several Lombard Organizations: Tri-Town YMCA, LCPAAA and the Lombard Parade Committee.

## SUBMISSION INSTRUCTIONS

First-time applicants - Please submit completed form and associated application documents on or before **December 17, 2016** to Nicole Aranas, Assistant Village Manger, by e-mailing [aranasn@villageoflombard.org](mailto: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 [aranasn@villageoflombard.org](mailto:aranasn@villageoflombard.org) to confirm.

**Short Form  
Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except private foundations)

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public  
Inspection

**A** For the 2014 calendar year, or tax year beginning 2014, and ending 2014

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>LOMBARD AREA CHAMBER OF COMMERCE</b> Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <b>10 LILAC LANE</b> City or town, state or province, country, and ZIP or foreign postal code <b>LOMBARD IL 60148</b>	<b>D</b> Employer identification number <b>23-7192831</b> <b>E</b> Telephone number <b>(630) 627-5040</b> <b>F</b> Group Exemption Number . . . . . ▶
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**G** Accounting Method:  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**I** Website: ▶ N/A **H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J** Tax-exempt status (check only one) —  501(c)(3)  501(c) ( 6 ) (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other \_\_\_\_\_

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. . . . . ▶ \$ 142,927.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
Check if the organization used Schedule O to respond to any question in this Part I . . . . .

	1 Contributions, gifts, grants, and similar amounts received . . . . .	1	
	2 Program service revenue including government fees and contracts . . . . .	2	26,608.
	3 Membership dues and assessments . . . . .	3	55,300.
	4 Investment income . . . . .	4	101.
	5 a Gross amount from sale of assets other than inventory . . . . . 5 a		
	b Less: cost or other basis and sales expenses . . . . . 5 b		
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . . 5 c		
	6 Gaming and fundraising events		
REVENUE	a Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . . 6 a		
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . . 6 b	60,918.	
	c Less: direct expenses from gaming and fundraising events . . . . . 6 c	21,111.	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . . 6 d	39,807.	
	7 a Gross sales of inventory, less returns and allowances . . . . . 7 a		
	b Less: cost of goods sold . . . . . 7 b		
	c 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	121,816.	
EXPENSES	10 Grants and similar amounts paid (list in Schedule O) . . . . . See L-10 Stmt	10	1,500.
	11 Benefits paid to or for members . . . . . 11		
	12 Salaries, other compensation, and employee benefits . . . . . 12	83,263.	
	13 Professional fees and other payments to independent contractors . . . . . 13	1,628.	
	14 Occupancy, rent, utilities, and maintenance . . . . . 14	15,871.	
	15 Printing, publications, postage, and shipping . . . . . 15	907.	
	16 Other expenses (describe in Schedule O) . . . . . See Form 990-EZ, Part I, Line 16 Other Expenses	31,654.	
17 Total expenses. Add lines 10 through 16 . . . . . ▶ 17	134,823.		
	18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . . 18	-13,007.	
ASSETS	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) . . . . . 19	95,866.	
	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	82,859.	



**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	51,771.	40,351.
23 Land and buildings	44,676.	43,202.
24 Other assets (describe in Schedule O) See L-24 Stmt	1,127.	1,592.
25 Total assets	97,574.	85,145.
26 Total liabilities (describe in Schedule O) See L-26 Stmt	1,708.	2,286.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	95,866.	82,859.

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Organization's Primary Exempt Purpose		Expenses
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)
28	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28 a
29	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29 a
30	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30 a
31	Other program services (describe in Schedule O) (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31 a
32	Total program service expenses (add lines 28a through 31a)	32

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
WHITNEY CIMAGLIA PRESIDENT	5.00	0.	0.	0.
PAUL CORD VICE PRESIDENT	5.00	0.	0.	0.
JAMES HOGAN TREASURER	5.00	0.	0.	0.
JOE ORSOLINI PAST PRESIDENT	5.00	0.	0.	0.
DAN WHITTINGTON VICE PRESIDENT	5.00	0.	0.	0.
VIC DUNBAR DIRECTOR	0.00	0.	0.	0.
JULIE GLAZIER DIRECTOR	0.00	0.	0.	0.
MIKE KENNEDY DIRECTOR	0.00	0.	0.	0.
BARB KRUSER DIRECTOR	0.00	0.	0.	0.
PAM LOHMAN DIRECTOR	0.00	0.	0.	0.
GREG LUDWIG DIRECTOR	0.00	0.	0.	0.
KATHY VOLPE DIRECTOR	0.00	0.	0.	0.
MARK BENNECKE DIRECTOR	0.00	0.	0.	0.
YVONNE INVERGO EXECUTIVE DIRECTOR	40.00	45,410.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS?
34 Were any significant changes made to the organizing or governing documents?
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities?
35b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year?
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If 'Yes,' complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed

42a The organization's books are in care of JAMES HOGAN Telephone no. (630) 627-5040
Located at 10 LILAC LANE LOMBARD IL ZIP + 4 60148
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
42b If 'Yes,' enter the name of the foreign country:
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
c At any time during the calendar year, did the organization maintain an office outside the U.S.?
42c If 'Yes,' enter the name of the foreign country:

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I . . . . . 

	Yes	No
46		X

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . .

47 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 . . . . . 

	Yes	No
47		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E . . . . . 

	Yes	No
48		

49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . . 

	Yes	No
49 a		

b If 'Yes,' was the related organization a section 527 organization? . . . . . 

	Yes	No
49 b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and title of each employee	(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 amount of other compensation

f Total number of other employees paid over \$100,000 . . . . . ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 . . . . . ▶

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations must attach a completed Schedule A . . . . .  Yes  No

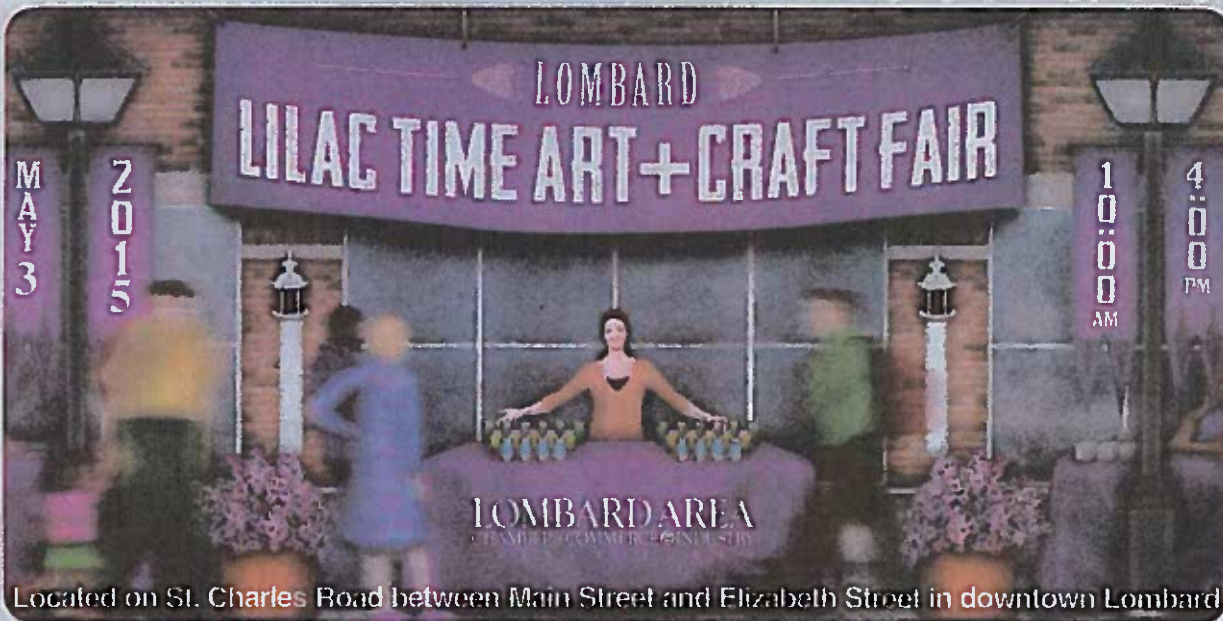
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** Signature of officer: WHITNEY CIMAGLIA Date: \_\_\_\_\_  
 Type or print name and title: PRESIDENT

**Paid Preparer Use Only** Print/Type preparer's name: WAYNE E. PARSONS Preparer's signature: WAYNE E. PARSONS Date: 09/21/15 Check  if self-employed PTIN: P01445634  
 Firm's name ▶ WAYNE E. PARSONS, CPA Firm's EIN ▶ \_\_\_\_\_  
 Firm's address ▶ 931 SOUTH EUCLID AVENUE Phone no. (630) 782-5902  
VILLA PARK IL 60181-3330

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  Yes  No

Event	2013		2014		2015 (as of 10-9-15)		Average
	Grant Cost	Village Cost	Grant Cost	Village Cost	Grant Cost	Village Cost	
Art & Craft Fair	\$ -	\$ 2,193.10	\$ -	\$ 2,487.99	\$ -	\$ 2,795.33	\$ 2,492.14
		Total	Total	Total	Total	Total	
		\$ 2,193.10	\$ 2,487.99	\$ 2,487.99	\$ 2,795.33	\$ 2,795.33	



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## Lilac Time Art and Craft Fair

**Dates of Event:** May 3, 2015  
**Hours:** 10 am - 4 pm  
**Place:** Downtown Lombard, St. Charles Rd. between Main St. and Elizabeth St., Lombard, IL  
**Admission:** Free  
**Deadline:** April 17, 2015 - \$25 late fee  
**Entry Fee:** \$100 - additional \$25 for electric access  
**Number of Exhibitors:** 140 maximum  
**Conditions:** 12 x 12 outdoor street booth space - crafters provide properly weighted tent, tables, chairs. Limited electric hook-ups available for an additional fee.  
**Media:** Hand-made items only - no Buy/Sell  
**Attendance:** 1000

The Lilac Time Art and Craft Fair is an outdoor event that kicks off beautiful Lilac Time in Lombard. Held the first Sunday each May, it features a great number of crafters and artisans with hand-made items as well as entertainment, food and a FREE Kid Zone. The fair is held just a short walk from the historic Lilacia Park that features approximately 200 varieties of lilacs and 50 varieties of tulips, as well as perennials, annuals, trees and shrubs and an herb garden, all on 6 acres.

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**Upcoming Events**

- November 19 - 22, 2015**  
Holiday Fair  
La Crosse, WI
- November 19 - 22, 2015**  
Autumn Festival-Art & Crafts Affair-33rd Annual Tour  
Villa Park, IL
- November 20 - 22, 2015**  
Holiday Art Fair  
Madison, WI
- November 20 - 22, 2015**  
Callahan Promotions, Inc. Arts & Crafts Show  
Des Moines, IA
- November 21, 2015**  
Fall Craft Show 2015  
Albertville, MN