

VILLAGE OF LOMBARD
REQUEST FOR BOARD OF TRUSTEES ACTION
For Inclusion on Board Agenda

Resolution or Ordinance (Blue) _____ *Waiver of First Requested*
 X Recommendations of Boards, Commissions & Committees (Green)
Other Business (Pink)

TO: PRESIDENT AND BOARD OF TRUSTEES

FROM: Scott Niehaus, Village Manager

DATE: February 10, 2016 (B of T) Date: February 18, 2016

TITLE: Local Tourism Grant Recommendation
Lombard Chamber of Commerce– Lilac Time Art and Craft Fair

SUBMITTED BY: Nicole Aranas, Assistant Village Manager

BACKGROUND/POLICY IMPLICATIONS:

Attached please find information regarding a recommendation from the Community Promotion and Tourism Committee for approval of funding to the Lombard Area Chamber of Commerce and Industry towards the 2016 Lilac Time Art and Craft Fair. The Committee is recommending approval of a grant of up to \$3,700 through the Local Tourism grant program.

Please place this item on the agenda for separate action at the February 18, 2016 Board of Trustees meeting.

Review (as necessary):

Village Attorney X _____ Date _____
Finance Director X _____ Date _____
Village Manager X _____ Date _____

NOTE: All materials must be submitted to and approved by the Village Manager's Office by 12:00 noon, Wednesday, prior to the Agenda Distribution.



Memorandum

TO: Scott Niehaus
Village Manager

FROM: Nicole P. Aranas
Assistant Village Manager

DATE: February 10, 2016

SUBJECT: Community Promotion & Tourism Committee Recommendation
Lilac Time Art and Craft Fair

The following is a recommendation for funding through the Local Tourism Grant Program for the Lombard Chamber of Commerce in the amount of \$3,700 towards expenses related to the Lilac Time Art & Craft Fair.

Grant Request: \$3,700

The Lombard Chamber of Commerce has requested a grant in the amount of \$3,700 to be used toward costs associated with their annual Lilac Time Art and Craft Fair event, held annually in downtown Lombard. The funding will be used to offset costs including, but not limited to, barricades, public works, fire and police overtime.

The event is currently scheduled to take place on May 1, 2016. The grant request from Lombard Chamber of Commerce and event budget are attached for your review.

RECOMMENDATION:

The Community Promotion & Tourism Committee recommended a grant in an amount up to \$3,700 to the Lombard Chamber of Commerce, to be used towards the reimbursement of expenses relating to the 2016 Lilac Time Art & Craft Fair.

Please place this item on the agenda for the February 18, 2016 agenda of the Board of Trustees. If you have any questions, please feel free to contact me. Thank you.

Attachment

**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
Total Income	\$16,062.99	\$ 19,080.33	\$ 19,595.00

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
Total Expenses	\$3256.00	\$ 3706.20	\$4350.00

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 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 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)

DMS No. 1545-1150

2014

Open to Public Inspection

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.

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

B Check if applicable:
 Address change
 Name change
 Initial return
 Final information return
 Amended return
 Application pending

C Name of organization
LOMBARD AREA CHAMBER OF COMMERCE
 Number and street (or P.O. box, if mail is not delivered to street address) _____
 Room/suite _____
10 LILAC LANE
 City or town, state or province, country, and ZIP or foreign postal code
LOMBARD IL 60148

D Employer identification number
23-7192831

E Telephone number
(630) 627-5040

F Group Exemption Number _____

G Accounting Method: Cash Accrual Other (specify) _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: **N/A**

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

LINE NUMBER	DESCRIPTION	AMOUNT
1	Contributions, gifts, grants, and similar amounts received	
2	Program service revenue including government fees and contracts	26,608.
3	Membership dues and assessments	55,300.
4	Investment income	101.
5a	Gross amount from sale of assets other than inventory	
5b	Less: cost or other basis and sales expenses	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	
6	Gaming and fundraising events	
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	
6b	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)	60,918.
6c	Less: direct expenses from gaming and fundraising events	21,111.
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	39,807.
7a	Gross sales of inventory, less returns and allowances	
7b	Less: cost of goods sold	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	
8	Other revenue (describe in Schedule O)	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	121,816.
10	Grants and similar amounts paid (list in Schedule O)	See L-10, Stmt
10		1,500.
11	Benefits paid to or for members	
12	Salaries, other compensation, and employee benefits	83,263.
13	Professional fees and other payments to independent contractors	1,628.
14	Occupancy, rent, utilities, and maintenance	15,871.
15	Printing, publications, postage, and shipping	907.
16	Other expenses (describe in Schedule O)	See Form 990-EZ, Part I, Line 16, Other Expenses
16		31,654.
17	Total expenses. Add lines 10 through 16	134,823.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	-13,007.
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)	95,866.
20	Other changes in net assets or fund balances (explain in Schedule O)	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	82,859.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2014)

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

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

	(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

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose? See Organization's Primary Exempt Purpose

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.

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-2/990-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NHITNEY 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 KENNECKY 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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O		
c 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? If 'Yes,' complete Schedule C, Part III		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions	37 a	0
b Did the organization file Form 1120-POL for this year?	37 b	X
38 a 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?	38 a	X
b If 'Yes,' complete Schedule L, Part III and enter the total amount involved	38 b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39 a	
b Gross receipts, included on line 8, for public use of club facilities	39 b	
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> ; section 4912 <input type="checkbox"/> ; section 4955 <input type="checkbox"/>		
b 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? If 'Yes,' complete Schedule L, Part I	40 b	
c 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		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8888-T	40 e	X
41 List the states with which a copy of this return is filed		

42 a 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

	Yes	No
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)? If 'Yes,' enter the name of the foreign country:	42 b	X
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.? If 'Yes,' enter the name of the foreign country:	42 c	X

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 43

	Yes	No
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a	X
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 b	X
c Did the organization receive any payments for indoor tanning services during the year?	44 c	X
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	44 d	
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45 a	
b 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)	45 b	X

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

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. 48

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

b If 'Yes,' was the related organization a section 527 organization? 49b

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 (Form 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

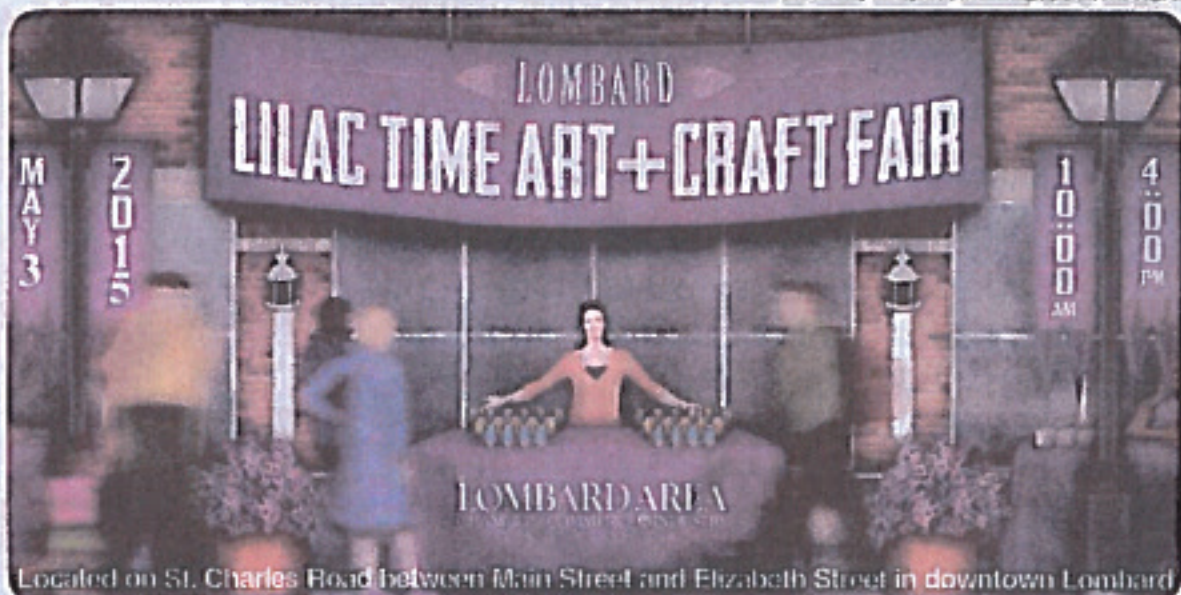
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

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
 PIN: P01445634
 Firm's name: WAYNE E. PARSONS, CPA
 Firm's address: 931 SOUTH EUCLID AVENUE
VILLA PARK IL 60181-3330
 Firm's EIN: _____
 Phone no.: (630) 782-5902

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
		\$ 2,193.10		\$ 2,487.99		\$ 2,795.33	\$ 2,492.14
		Total		Total		Total	



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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
Admissions: 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
Attendances: 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.

Upcoming Events

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

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