

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

GENERAL INFORMATION

Organization:	Lombard Historical Society		
Name of event:	Peckapalooza: 175th Peck Homestead Anniversary Event		
Date of event:	September 2014	Event location:	Peck Homestead
Contact person:	Nicole Louis	Title:	Peck Homestead Coordinator
Business address:	23 W. Maple St.	City & Zip	Lombard 60148
Telephone:	630-629-1885	Email:	Nicole.louis@att.net

PROJECT OVERVIEW

Total cost of the project:	\$ 2775
Cost of city services requested in this application (if any):	\$ 0
Total funding requested in this application:	\$ 1387
Percent of total project cost being requested:	50%
Anticipated attendance:	300
Anticipated number of overnight hotel stays:	50

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

2014 marks the 175th anniversary of the Peck Homestead. While we are planning many activities throughout the year, the "grand finale" will be a weekend long 'Peckapalooza' featuring new exhibits, speakers, food, and music. Additionally, we will be hosting a Peck family reunion, bringing together Peck descendants from across the country.

ORGANIZATION

Number of years that the organization has been in existence:	43
Number of years that the project or event has been in existence:	0
Number of years the project has been supported by Village of Lombard funds:	0
How many years does the organization anticipate it will request grant funding?	1

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

Founded in 1970, the Lombard Historical Society is a 501(c)(3) not-for-profit membership-based organization. The mission of the Society is to collect, preserve, interpret, and promote the history of Lombard and to advocate for our community's heritage. We operate two historic house museums and maintain an archive and artifact collection for research and interpretation. The LHS is governed by the Board of Management and operated by staff which includes one full-time director, three part-time employees, and dozens of regular volunteers and docents.

2) Please describe the goals and objectives of the organization and how they are supported by this program:

As the stewards of Lombard's heritage, we make the past meaningful in order to impact our community's present and future. By highlighting the 175th anniversary of the Peck Homestead, we are able to educate the public on the multifaceted history of the house, including the role it played as part of the Underground Railroad, as the home of a nationally-known artist, as the first school in the area, and as the oldest home in Lombard. With the addition of new exhibits and technology, we will be bringing the history of the Peck Homestead into the 21st century. This event will allow us to highlight the fascinating history of the Peck Homestead on a grand scale.

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

This event is a one-time anniversary celebration. However, we may be seeking funds in 2039 to celebrate the 200th anniversary – we'll keep you posted.

PROJECT DESCRIPTION

- | | | |
|---|---|--|
| Have you requested grant funding in the past? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Is the event open to the general public? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you intend to apply for a liquor license for this project? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will any revenues from this event be returned to the community? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

1) Provide the details regarding the event or project including a full description of the project and the anticipated timeline.

To commemorate the 175th anniversary of the Peck Homestead we are planning a year-long slate of activities and programs. To cap off the year we are planning a weekend-long celebration dubbed 'Peckapalooza.' During this event we will have entertainment, food, music, speakers, etc. We will also be inviting members of the Peck family from around the country to join us for a Peck family reunion, adding a personal dimension to the proceedings.

Currently, the bulk of events are being planned for a Saturday afternoon. To accommodate and encourage overnight guests (particularly Peck family members traveling from out-of-town/out-of-state) we will also host an exhibit preview reception on Friday evening and speakers/programs on Sunday. Because we are anticipating a large number of out-of-town guests, we will be providing each of them with a list of things to see/do while in Lombard so that they may make the most of their free time.

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

The funds will be used to advertise and produce the event.

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)?

One time event; not applicable.

LOCATION

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

Sheldon Peck Homestead, 355 East Parkside Drive
Lombard Community Building, 433 East Saint Charles Road

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.

December 2013 – January 2014: General planning, confirm dates, design 175th logo, obtain Peck family contacts, produce 175th merchandise
February 2014: Beginning of 175th activities (coincides with Black History Month)
March 2014: Confirm food, music, entertainment, hotels; send out invites to Peck family
April – June 2014: Create/design banner, ads
July – August 2014: Send out reminders; confirm rentals/vendors; purchase supplies; begin ad campaign
September 2014: Continue ad campaign; in-house printing; purchase supplies and food

IMPACT

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

As a weekend-long event, guests will be encouraged to spend the night so as to attend all the programs being offered. Peck family members visiting from out-of-town/out-of-state will be making use of local hotels/motels as well as exploring the village and dining out during their free time.

- 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?

Because the subjects covered at the Peck Homestead are so multifaceted – Civil War history, African-American history, art, pioneer life – we routinely draw visitors from outside the local market. Our internal tracking shows that the majority of visitors to the Peck Homestead are from outside the Village of Lombard.

Additionally, as with all of our events, we will contract with local businesses and individuals as much as possible to support our local community.

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

The target audience for our event is as follows:

1. Lombard residents, supporting their local historic landmark
2. People with an interest in Civil War history, African-American history, art, pioneer life, etc.
3. Peck descendants, their families and friends

Other anniversary-type events at the Peck Homestead have drawn upwards of 200 visitors; because the 175th event is of a larger scale, we can reasonably anticipate a larger audience. We are also inviting members of the Peck family (many of whom live out-of-town/out-of-state) to join us for a family reunion.

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

We are working with the Lombard Park District to secure use of the Lombard Community Building, the rental fee for which has been generously waived. Other collaborative arrangements will be pursued once event details are confirmed.

- 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).

We will be promoting the event through our membership newsletter, website, Facebook page, and Twitter account. We will also be adding our event to calendars for museums/cultural sites and promoting in local newspapers. We will have a banner on-site to advertise the event in the weeks leading up to the weekend.

Because this is a year-long commemoration, we will be promoting Peckapalooza at all of the associated Peck events that occur February through September. Additionally, we will be reaching out to Peck family members across the country and encouraging them to be a part of the Peck family reunion.

FINANCES

- X 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).
- X 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

- X Completed Local Tourism Grant Program Application Form.
- X Completed detailed budget form.
- X Promotional materials from past events (not applicable to first time events).
- X Post event summary from past event (not applicable to first time events).
- X Copy of the most recently completed agency audit or explanation of why it is not available.
- X Copy of the most recent Federal Form 990 for the agency or explanation of why it is not available.

Additional Notes, Comments or Explanations:

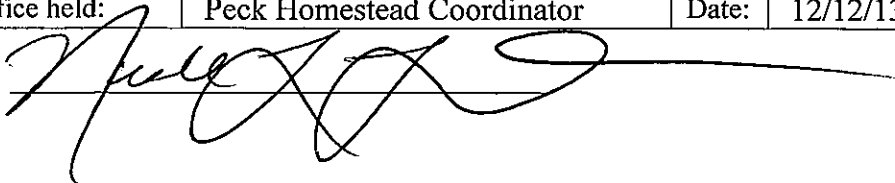
While we are still in the planning stages for this first-time event, we believe that highlighting the 175th anniversary of the Sheldon Peck Homestead will place a well-deserved spotlight on the Village of Lombard, commemorating its rich past while celebrating its bright future. The requested grant funds will ensure that we are able to reach out to a wide variety of potential visitors – local, state, and national – and provide them with a truly memorable experience. We thank you very much for your consideration.

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:	Nicole Louis		
Title or office held:	Peck Homestead Coordinator	Date:	12/12/13

Signature:



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	ACTUAL	ANTICIPATED
Estimated value of in-kind	\$	\$	\$200 (waved rental fees for Lombard Community Building)
contributions (explain)			

**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:		Name of event:	
Date of event:		Event location:	
Contact person:		Title:	
Business address:		City & Zip:	
Telephone:		E-mail address:	
Estimated attendance:		Estimated hotel stays:	
Method for estimating attendance:			

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

Click here to enter text.

- 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?

Click here to enter text.

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

Click here to enter text.

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

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2012 calendar year, or tax year beginning Jun 1, 2012, and ending Dec 31, 2012

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

C Name of organization Lombard Historical Society
 Number and street (or P.O. box, if mail is not delivered to street address) 23 West Maple Street
 City or town, state or country, and ZIP + 4 Lombard IL 60148

D Employer identification number 23-7114585

E Telephone number (630) 629-1885

F Group Exemption Number

G Accounting Method: Cash Accrual Other (specify) _____

I Website: LOMBARDHISTORY@ATT.NET

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

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

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 118,821.

Part II 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

REVENUE	EXPENSES	ASSETS	Line	Amount
1			1	116,039.
2			2	
3			3	1,832.
4			4	950.
5a			5a	
5b			5b	
5c			5c	
6				
6a			6a	
6b			6b	
6c			6c	
6d			6d	
7a			7a	
7b			7b	
7c			7c	
8			8	
9			9	118,821.
10			10	
11			11	
12			12	46,836.
13			13	3,191.
14			14	9,603.
15			15	1,187.
16			16	30,627.
17			17	91,444.
18			18	27,377.
19			19	159,892.
20			20	
21			21	187,269.

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

Form 990-EZ (2012)

Public Charity Status and Public Support

2012

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.

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

Name of the organization

Employer identification number

Lombard Historical Society

23-7114585

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III — Functionally integrated d Type III — Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box _____
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g (i)		
11g (ii)		
11g (iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part III 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

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 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)...						
6 Public support. Subtract line 5 from line 4						723,962.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 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 activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	98.29%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	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.	<input checked="" type="checkbox"/>	
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.	<input type="checkbox"/>	
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 stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
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 stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ...	<input type="checkbox"/>	

Part III 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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 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.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5 ...						
7 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ..						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lns 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19 a 33-1/3% support tests— 2012. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33-1/3% support tests— 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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.

Open to Public
Inspection

Name of the organization

Lombard Historical Society

Employer identification number

23-7114585

16 Collections and Exhibits

16 Office Expenses

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 activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O.
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.
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)?
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.
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.
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions.
b Did the organization file Form 1120-POL for this year?
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?
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved.
39 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on line 9.
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 on the organization during the year under: section 4911; section 4912; section 4955.
b Section 501(c)(3) and 501(c)(4) 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.
c Section 501(c)(3) and 501(c)(4) 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) and 501(c)(4) 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 8886-T.
41 List the states with which a copy of this return is filed Illinois

42 a The organization's books are in care of Richard W. Gallicchio Telephone no. (847) 439-0250
Located at 100 Turner Avenue Elk Grove Village IL ZIP + 4 60007

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.
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
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. 43

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.
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.
c Did the organization receive any payments for indoor tanning services during the year?
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.
45 a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?
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).

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 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 amount of other compensation
None				

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 address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

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 and 4947(a)(1) nonexempt charitable trusts 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		Date		
	Richard W. Gallicchio <small>Type or print name and title.</small>		Treasurer		
Paid Preparer Use Only.	Print/type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Self-Prepared			Firm's EIN ▶
	Firm's address ▶				Phone no.

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

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990-EZ, Part I, Line 16 Other Expenses

Other expenses (describe in Schedule O)

<u>Collections and Exhibits</u>	<u>18,912.</u>
<u>Office Expenses</u>	<u>11,715.</u>
Total	<u><u>30,627.</u></u>

Selden Fox, LTD.

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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.

Selden Fox, Ltd.

February 28, 2013

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

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

See accompanying notes and independent auditor's report.

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

	2012			2011 Total
	Unrestricted	Temporarily Restricted	Total	
Revenues, gains and other support:				
Government reimbursements	\$ 109,460	\$ -	\$ 109,460	\$ 112,546
Donations and contributions	28,172	31,434	59,606	37,238
Memberships	4,130	-	4,130	3,585
Investment income	1,316	-	1,316	2,113
Net assets released from restrictions	13,219	(13,219)	-	-
Total revenues, gains and other support	156,297	18,215	174,512	155,482
Expenses:				
Reimbursed expenses	118,541	-	118,541	115,882
Historical Society	44,106	-	44,106	21,110
Peck House	3,042	-	3,042	96
Miscellaneous	-	-	-	115
Total expenses	165,689	-	165,689	137,203
Change in net assets	(9,392)	18,215	8,823	18,279
Net assets:				
Beginning of the year	151,069	-	151,069	132,790
End of the year	141,677	18,215	159,892	151,069

See accompanying notes and independent auditor's report.

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

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

See accompanying notes and independent auditor's report.

Lombard Historical Society, Inc.
Notes to the Financial Statements

1. Summary of Significant Accounting Policies

Organization and Purpose – Lombard Historical Society, Inc. (Organization), a not-for-profit, was formed in 1971 with a mission to educate, preserve, study, and conserve the history of Lombard, and maintain and operate historical sites and buildings located in Lombard and the surrounding vicinity.

Basis of Accounting – The accompanying financial statements are presented primarily on a cash basis, with revenues recognized upon receipt and expenses recognized upon payment of a liability. This policy is an acceptable comprehensive basis of accounting, but differs from accounting principles generally accepted in the United States of America, which require that financial statements be prepared on an accrual basis. A modification to the cash basis of accounting includes recording mutual funds at fair value.

These financial statements have been prepared to focus on the Organization as a whole, to present balances and transactions according to the existence or absence of donor imposed restrictions. This has been accomplished by classification of net assets and transactions into three classes of net assets: permanently restricted, temporarily restricted, or unrestricted.

Permanently Restricted Net Assets – Net assets subject to donor imposed stipulations that they be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on related investments for general or specific purposes. The Organization did not have any permanently restricted net assets for the year ended May 31, 2012 or 2011.

Temporarily Restricted Net Assets – Net assets subject to donor imposed stipulations that may or will be met by actions of the Organization or the passage of time. The Organization had temporarily restricted net assets of \$18,215 in 2012 (none in 2011).

Unrestricted Net Assets – Net assets not subject to donor imposed stipulations.

Revenues are reported as increases in unrestricted net assets, unless use of the related assets is limited by donor imposed restrictions. Expenses are reported as decreases in unrestricted net assets. Gains and losses on investments and other assets or liabilities are reported as increases or decreases in unrestricted net assets, unless their use is restricted by explicit donor stipulation or by law. Expiration of temporary restrictions on net assets (i.e., the donor imposed stipulated purpose has been fulfilled or the stipulated time period has elapsed) is reported as reclassifications between the applicable classes of net assets. Contributions received with donor imposed restrictions that are met in the same year as received are reported as revenues of the temporarily restricted net asset class, and a reclassification to unrestricted net assets is made to reflect the expiration of such restrictions.

Lombard Historical Society, Inc.
Notes to the Financial Statements (cont'd)

1. Summary of Significant Accounting Policies (cont'd)

Use of Estimates – The preparation of financial statements in conformity with the cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and disclosure of contingent assets and liabilities, at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Certificates of Deposit – The Organization's certificates of deposit are carried at cost, which includes accrued interest.

Fair Value and Mutual Funds – The Organization's certificates of deposit are carried at cost, which includes accrued interest. The Organization's mutual funds are accounted for at fair value with unrealized gains and losses reported in the Statement of Revenue, Expenses, and Changes in Net Assets.

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurement is broken down into a three-level valuation hierarchy based on the reliability of observable and unobservable inputs as follows:

Level 1 – Valuations are based on quoted prices in active markets for identical assets or liabilities that the Association has the ability to access at the measurement date.

Level 2 – Valuations are based on quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in markets that are not active; and model-derived valuations whose significant inputs are observable.

Level 3 – Valuations are based on unobservable inputs for the asset or liability that reflect the reporting entity's own data and assumptions that market participants would use in pricing the asset or liability.

Following is a description of the valuation methodologies used for investments measured at fair value, as well as the general classification of such investments pursuant to the valuation hierarchy.

Mutual funds are valued using quoted market prices. Accordingly, these assets are categorized in Level 1 of the fair value hierarchy.