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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
KREIDER ALLIANCE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 366

City or town, state or province, country, and ZIP or foreign postal code
DIXON, IL 61021

D Employer identification number

51-0156572

E Telephone number

(815) 288-6691

G Gross receipts \$ 327,437

F Name and address of principal officer:
BETSY ADAMS
PO BOX 366
DIXON, IL 61021

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1952

M State of legal domicile: IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO PROMOTE SERVICES TO THE DEVELOPMENTALLY DISABLED.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3 15

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 0

6 Total number of volunteers (estimate if necessary) 6 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0

7b Net unrelated business taxable income from Form 990-T, line 39 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 6,095 3,555

9 Program service revenue (Part VIII, line 2g) 298,305 298,305

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 777 -4,004

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 7,371 -1,900

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 312,548 295,956

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 209,565 391,550

14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 0

16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0

16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 83,158 49,119

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 292,723 440,669

19 Revenue less expenses. Subtract line 18 from line 12 19,825 -144,713

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 1,023,701 889,364

21 Total liabilities (Part X, line 26) 0 0

22 Net assets or fund balances. Subtract line 21 from line 20 1,023,701 889,364

Part II Signature Block

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
BETSY ADAMS PRESIDENT
Date
2020-12-18

Paid Preparer Use Only

Print/Type preparer's name
Firm's name ▶ WIPFLI LLP
Firm's address ▶ 215 E FIRST STREET SUITE 200
DIXON, IL 61021
Preparer's signature
Date 2020-12-11
Check ☐ if self-employed
PTIN P00957048
Firm's EIN ▶ 39-0758449
Phone no. (815) 315-0854

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)