### Illinois NFP Audit & Tax, LLP 564 W. Randolph Street, Suite #200 Chicago, Illinois 60661 Phone: (312) 998-5500 | Fax: (312) 262-2857

April 9, 2021

Interfaith Community for Detained Immigrants 10024 S. Central Park Ave. Chicago, IL 60655-3132

Dear Ed:

Enclosed is your Illinois Charitable Organization Annual Report. The original should be signed at the bottom of page two. Two distinct officials of the organization must sign. Make your \$115 check for the annual filing fee plus the late report filing fee payable to the "Illinois Charity Bureau Fund". Mail the report on or before May 14, 2021 to:

OFFICE OF THE ATTORNEY GENERAL CHARITABLE TRUST BUREAU ATTN: ANNUAL REPORT SECTION 100 WEST RANDOLPH STREET, 11TH FLOOR CHICAGO, IL 60601-3175



### INTERFAITH COMMUNITY FOR DETAINED IMMIGRANTS

10024 S. CENTRAL PARK AVENUE CHICAGO, IL 60655 872-267-1945

DATE 04/13/2021

PAY TO THE ORDER OF

Illinois Charity Bureau Fund

\$ \*\*\*115.00

One Hundred Fifteen and 00/100 \*

\*\*\*\*\*\* DOLLARS

Illinois Charity Bureau Fund 100 W Randolph Street, 11<sup>th</sup> Floor Chicago, IL 60601-3175

AUTHORIZED SIGNATURE

МЕМО

Form 990 fee + late fee 46-1374353

## INTERFAITH COMMUNITY FOR DETAINED IMMIGRANTS

29477

Illinois Charity Bureau Fund \$115.00 for IL Form 990 fee + late fee for 46-1374353 04/13/2021

INTERFAITH COMMUNITY FOR DETAINED IMMIGRANTS

29477

	ffice Use Only	IIIAI DEDOD	т	Form AG990-IL
PMT	* ILLINOIS CHARITABLE ORGANIZATION AND Attorney General KWAME RAOUL State Charitable Trust Bureau, 100 West R	of Illinois	l	Revised 1/19 ID: 2BN
	Charitable Trust Bureau, 100 West Range 11th Floor, Chicago, Illinois 606	andolph		ILVA0212L 11/05/19
AMT	Trui Floor, Chicago, illinois 606	CO	0 ± 0 0	
	Report for the Fiscal Period:	X		litems attached: RS Return
	'	Make Checks Pavable to	Audited Fina	incial Statements
INIT	Beginning _7/01/19	the Illinois X	Copy of F \$15.00 Annu	orm IFC al Report Filing Fee
	& Ending 6/30/20	Bureau Fund	\$100.00 Late	Report Filing Fee
	eral ID # <u>46-1374353</u> contributions to the organization tax deductible? X Yes No	ate Organization w	as created:	MO DAY YR 10/24/2012
7 0		Year-end		
	LEGAL INTERFAITH COMMUNITY FOR DETAINED NAME IMMIGRANTS	amounts		
	MAIL	A ASSETS	<b>A</b> \$	479,244.
	DDRESS 10024 S. CENTRAL PARK AVE.	<b>B</b> LIABILITIES	<b>B</b> \$	78,812.
	/,STATE UP CODE CHICAGO, IL 60655-3132	C NET ASSETS	С\$	400,432.
I	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE		AMOUNT
	D PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	99.99%	D \$	1,000,142.
	E GOVERNMENT GRANTS & MEMBERSHIP DUES	%	E \$	
	F OTHER REVENUES SEE STATEMENT 1	0.01%	F \$	140.
	G TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100%	G\$	1,000,282.
II	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	74.04%	н \$	F10 047
	H OPERATING CHARITABLE PROGRAM EXPENSE	74.04%	-	510,947.
	I EDUCATION PROGRAM SERVICE EXPENSE	00	Ι\$	
	J TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	74.04%	J \$	510,947.
	J1 JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$			
	K GRANTS TO OTHER CHARITABLE ORGANIZATIONS	0/0	к\$	
	L TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	74.04%	L \$	510,947.
	M MANAGEMENT AND GENERAL EXPENSE	13.37%	м \$	92,299.
	N FUNDRAISING EXPENSE	12.59%	N \$	86,895.
	O TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100%	<b>o</b> \$	690,141.
Ш	SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:			
	(Attach Attorney General Report of Individual Fundraising Campaign — Form IFC. One for each PFR.)  PROFESSIONAL FUNDRAISERS:			
	P TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100%	<b>P</b> \$	0.
	Q TOTAL FUNDRAISERS FEES AND EXPENSES	%	<b>Q</b> \$	0.
	R NET RECEIVED BY THE CHARITY (P MINUS Q=R)	olo	<b>R</b> \$	0.
	PROFESSIONAL FUNDRAISING CONSULTANTS:  \$ TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		<b>s</b> \$	0.
IV	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YE	AR:		
	T NAME, TITLE: MELANIE SCHIKORE, EXEC. DIRECTOR		т \$	77,439.
	U NAME, TITLE: EDWARD PRATT, DEVELOP. DIR.		υ\$	69,434.
	V NAME, TITLE: RYAN SMITH, CASE MANAGER		<b>v</b> \$	40,368.
			List on b	ack side of instructions
<b>V</b>	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) COL	DE CATEGORIES	w #	CODE 126
	W DESCRIPTION: POST-DETENTION SERVICES			
	X DESCRIPTION: DETAINED IMMIGRANTS		X #	021
1	Y DESCRIPTION:		Υ #	

IF 1	IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:									
1	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?									
2	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?									
3	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID									
	ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3		Х						
4	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?	4		Х						
5	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?	5		X						
6	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC )	6		Х						
7a	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7		Х						
7b	IF 'YES', ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$									
8	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8		X						
9	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION									
	SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?	9		Х						
10	WAS THERE OF BO VOLUME AND VANOUM EDGE OF ANY WORLD ON PRIPE OF ANY THEFT DEFAUGATION									
10	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10		Х						
11	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:  SEE STATEMENT 2									
12	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: ED PRATT 708 297-4065									

#### ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT — SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

#### BE SURE TO INCLUDE ALL FEES DUE:

- 1 REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.

  2 FOR FEES DUE SEE INSTRUCTIONS.

REPORTS THAT ARE LATE OR
INCOMPLETE ARE SUBJECT TO A
\$100.00 PENALTY.

	X	Fyame Johland	X	04/13/202
PRESIDENT or TRUSTEE (PRINT NAME)		SIGNATURE		DATE
Rodolfo Medina	X		X	04/13/21
TREASURER or TRUSTEE (PRINT NAME)		SIGNATURE		DATE
ABDULLAH KHAN, CPA		1 Khm, CPA		4/9/21
PREPARER (PRINT NAME)	•	SIGNATURE		DATE

2019

4/09/21

**CLIENT ICDI** 

### **ILLINOIS STATEMENTS**

PAGE 1

## INTERFAITH COMMUNITY FOR DETAINED IMMIGRANTS

**46-1374353** 

STATEMENT 1 FORM AG990-IL, PAGE 1, LINE F

OTHER REVENUES

STATEMENT 2 FORM AG990-IL, PAGE 2, QUESTION 11 NAME AND ADDRESS OF INSTITUTIONS HOLDING THREE LARGEST ACCOUNTS

JP MORGAN CHASE

10 S. DEARBORN, CHICAGO, ILLINOIS 60603

JP MORGAN CHASE

10 S. DEARBORN, CHICAGO, ILLINOIS 60603

SECOND FEDERAL CREDIT UNION 2504 TENAYA DRIVE MODESTO, CA 95354

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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.

OMB No. 1545-0047

**Open to Public** Inspection

, 2019, and ending For the 2019 calendar year, or tax year beginning , 2020 Check if applicable: D Employer identification number Address change INTERFAITH COMMUNITY FOR DETAINED 46-1374353 **IMMIGRANTS** Telephone number Name change 10024 S. CENTRAL PARK AVE. (773) 779-6011 Initial return CHICAGO, IL 60655-3132 Final return/terminated **G** Gross receipts \$ Amended return 000,282 F Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Yes ED PRATT **H(b)** Are all subordinates included? If "No," attach a list. (see instructions) SAME AS C ABOVE Yes No Tax-exempt status: X 501(c)(3) 4947(a)(1) or 527 501(c) ( ) ◀ (insert no.) Website: ► WWW.ICDICHICAGO.ORG **H(c)** Group exemption number ▶ Κ Form of organization: X Corporation Trust 2012 M State of legal domicile: Other > L Year of formation: Summary Briefly describe the organization's mission or most significant activities: RESPONDS ACTIVELY AND PUBLICLY TO THE SUFFERING OF ALL INDIVIDUALS AND COMMUNITIES AFFECTED BY IMMIGRATION DETENTION, DEPORTATION, AND POST-DETENTION THROUGH PASTORAL CARE, ADVOCACY, PUBLIC WITNESS AND OTHER ACTIVITIES. Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of independent voting members of the governing body (Part VI, line 1b)..... 6 5 Total number of volunteers (estimate if necessary)..... 6 350 7a Total unrelated business revenue from Part VIII, column (C), line 12..... 0. **b** Net unrelated business taxable income from Form 990-T, line 39..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 763,915 958,342. Program service revenue (Part VIII, line 2g)..... 41,800. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 53 140. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 47,183 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 12 811,151 000,282. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 124,000 54,229. Benefits paid to or for members (Part IX, column (A), line 4)..... 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . 496,114 387,970. **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 213,036. 247,969. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 833,150. 690,168. Revenue less expenses. Subtract line 18 from line 12..... -21,999. 310,114. **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16)..... 479,244. 100,686. 21 Total liabilities (Part X, line 26)..... 10,368. 78,812. Net assets or fund balances. Subtract line 21 from line 20..... 22 90,318. 400,432. 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. Signature of officer Date Sign Here ED PRATT EXECUTIVE DIR. Type or print name and title Print/Type preparer's name Preparer's signature ABDULLAH KHAN, CPA ABDULLAH KHAN, CPA self-employed P01524581 **Paid** Preparer IL NFP AUDIT AND TAX, LLP Firm's EIN ► 47-4152589 Use Only Firm's address 564 W. RANDOLPH STREET, SUITE #200

CHICAGO, IL 60661 May the IRS discuss this return with the preparer shown above? (see instructions)....

Nο

312-998-5500

X Yes

Form **990** (2019)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	Section 501(c)(3) organizations. 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	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
k	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
C	I Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х

# Form 990 (2019) INTERFAITH COMMUNITY FOR DETAINED Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ļ	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
i	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Χ
•	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, 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,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
RA/			990 (	2010

Form 990 (2019) INTERFAITH COMMUNITY FOR DETAINED

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 12			
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 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)?	4 a		Х
ŀ	o If 'Yes,' enter the name of the foreign country ►			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		Х
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 a 5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		Λ
		30		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
â	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	Χ	
ŀ	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
,	I If 'Yes,' indicate the number of Forms 8282 filed during the year	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	<i>,</i>		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10 -		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Ì	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	.00		
ł	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If 'Yes,' complete Form 4720, Schedule O.	16		X

Form 990 (2019) INTERFAITH COMMUNITY FOR DETAINED 46-1374353 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent.... 6 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ...... Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official.. SEE . SCHEDULE..Q...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed >  $_{
m IL}$ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Another's website Other (explain on Schedule O) SEE SCH. O Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

CHICAGO IL 60655-3132 (773) 779-6011

CENTRAL PARK AVE.

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII.....

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

	theck this box if neither the organization nor any relate	ed organiz	ation	con	nper	ısate	ed any	/ cu	rrent officer, direct	or, or trustee.	
					(C)	)					
	(A) Name and title	(B) Average hours	Pos thar is	s both	n an c	ot che unles officer /truste	eck moss s perso and a ee)	re on	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)	MELANIE SCHIKORE	40									
	EXECUTIVE DIR.	0			Χ				78,375.	0.	0.
(2)	SUZANNE AKHRAS	2									
	PRESIDENT	0	Χ		Χ				0.	0.	0.
(3)	PETE ERICKSON	2									
	DIRECTOR	0	Х						0.	0.	0.
(4)	RUDY MEDINA	2									
	TREASURER	0	Х		Χ				0.	0.	0.
(5)	PAT MOTTO	2									
	DIRECTOR	0	Х						0.	0.	0.
(6)	MARTHA PIERCE	2									
	SECRETARY	0	Х		Χ				0.	0.	0.
(7)	DUANE SIGELKO	2									
	DIRECTOR	0	Х						0.	0.	0.
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											

Part VII   Section A. Officers, Directors, 110	(B)	ney		1 <u>1</u> 1(0		es,	anc	a riignest Corr	ipensated Empi	oyees	(cont	inuea)
				•	•			<b>(D)</b>	<b>(F)</b>		<b>(</b> E)	
(A) Name and title	Average hours per	s box, unless person is both an		(D) (E) Reportable Reportable		Estim:	<b>(F)</b> ated am	ount				
	week (list any		_					compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	compe	of other nsation	from
	hours for	Individual or director	stitut	Officer	Key employee	ghesi nploy	Former	(W-2/1099-WIGC)	(W-2/1099-WII3C)	an	rganiza d relate	d
	related organiza - tions	ctor	onal	_	nploy	ee t com	۲			orga	anizatio	115
	below dotted	Individual trustee or director	nstitutional trustee		ee	Highest compensated employee						
	line)		99			ated						
(15)												
(16)	<b> </b>											
(17)												
(18)												
(19)												
(20)												
	1											
(21)	1											
(22)												
(23)												
		•										
(24)												
(25)												
(23)	<del> </del>											
1 b Subtotal							<b>&gt;</b>	78,375.	0.			0.
c Total from continuation sheets to Part VII, Secti							<b>&gt;</b>	0.	0.			0.
d Total (add lines 1b and 1c)							vod.	78,375.	0.	oncatio		0.
from the organization • 0	i to those i	isteu	abo	ve) v	WHO	recer	veu	more than \$100,00	o or reportable comp	ensano	1	
											Yes	No
3 Did the organization list any former officer, direct	tor, truste	e, ke	еу ег	mplo	oyee	e, or	high	nest compensated	employee			
on line 1a? If 'Yes,' complete Schedule J for suc										. 3		X
4 For any individual listed on line 1a, is the sum o the organization and related organizations greate	f reportab er than \$1	le co 50,0	mpe 00?	ensa If '}	ition ∕ <i>es.</i> '	and com	oth <i>ple</i>	er compensation to the schedule J for	from			
such individual										. 4		X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	satio	n fr	om Iule	any <i>J fo</i>	unre	late	d organization or	individual	. 5		Х
Section B. Independent Contractors										•	l	
1 Complete this table for your five highest compen compensation from the organization. Report comper	sated indessation for	epen the c	dent alen	t cor dar	ntrad vear	ctors endii	tha ng v	t received more the treceived more the tree to the tree to the tree tree tree tree tree tree tree	nan \$100,000 of ganization's tax vear			
(A) Name and business add					,		-9	(B)		((	C)	
Name and business add	ress							Description of	of services	Compe	nsatio	on
2 Total number of independent contractors (including l		ited to	o the	se Ī	isted	d abo	ve)	who received more	than			
\$100,000 of compensation from the organization	<b>-</b> 0											

		Check if Schedule O contains a response or note to any	y line in this Part V	III		
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
್ಟ್ ಜ	h	Total. Add lines 1a-1f	958,342.			
Пe	_	Business Code				
Program Service Revenue	2a b c	PROGRAM FEES 624100	41,800.	41,800.		
Serv	d					
a	е					
.og		All other program service revenue				
ā	g	Total. Add lines 2a-2f	41,800.			
	3	Investment income (including dividends, interest, and other similar amounts)	140.			140.
	5	Royalties				
	6 a	Gross rents				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
		Net rental income or (loss)				
	7 a	Gross amount from (i) Securities (ii) Other				
	-	sales of assets				
	b	other than inventory Less: cost or other basis and sales expenses 7b				
	r	Gain or (loss) 7c				
		Net gain or (loss)				
<u>o</u>		Gross income from fundraising events				
Other Revenu		(not including \$ of contributions reported on line 1c).				
3eV		See Part IV, line 18				
er	b	Less: direct expenses 8b				
듄		Net income or (loss) from fundraising events				
•		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities ▶				
		Gross sales of inventory, less				
		Less: cost of goods sold 10b				
10	С	Net income or (loss) from sales of inventory   Business Code				
	11 a					
ᇍ	b					
	11 a b c d					
Miscellaneous Revenue						
		Total. Add lines 11a-11d				
	12	<b>Total revenue.</b> See instructions	1.000.282	41.800.	0	140.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re	esponse or note to any (A)	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	54,229.	54,229.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	78,375.	66,619.	7,837.	3,919.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	282,508.	240,132.	28,251.	14,125.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	202,300.	240,132.	20,231.	14,123.
9	Other employee benefits				
10	Payroll taxes	27,087.	23,024.	2,709.	1,354.
11	Fees for services (nonemployees):				
á	Management				
ŀ	Legal				
(	: Accounting				
(	Lobbying				
•	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)  Advertising and promotion				
13	Office expenses	7,038.		7,038.	
14	Information technology	7,030.		7,030.	
15	Royalties.				
16	Occupancy	59,015.	50,623.	5,595.	2,797.
17	Travel	4,072.	4,072.	3,333.	2,131.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,0,2.	1,0,12.		
19	Conferences, conventions, and meetings	3,030.	1,300.	1,730.	
20	Interest	1,855.	1,500.	1,855.	
21	Payments to affiliates	,		,	
22	Depreciation, depletion, and amortization	4,200.	3,570.	420.	210.
23	Insurance	33,216.	28,233.	3,322.	1,661.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
á	PROFESSIONAL FEES	50,727.	5,145.	19,971.	25,611.
	SUPPLIES & MATERIALS	48,862.	18,534.		30,328.
	HOTLINE	13,329.	13,329.		
	PRINTING AND PUBLICATIONS	9,828.	95.	4,343.	5,390.
	All other expenses	12,797.	2,069.	9,228.	1,500.
25	Total functional expenses. Add lines 1 through 24e	690,168.	510,974.	92,299.	86,895.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

## Part X Balance Sheet

		Check if Schedule O contains a response or note to	any li	ne in this Part X					
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year		
	1	Cash — non-interest-bearing			22,111.	1	176,658.		
	2	Savings and temporary cash investments				2	202,711.		
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net			29,000.	4	54,500.		
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er offic I contri rsons .	cer, director, butor, or 35%		5			
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), and persons described in section				6			
	7	Notes and loans receivable, net	•	/ · / · /		7			
G	8	Inventories for sale or use		<u> </u>		8			
set	9	Prepaid expenses and deferred charges		-		9			
Assets	-		1 1			9			
·	iua	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	68,910.					
	b	Less: accumulated depreciation	10 b	23,535.	49,575.	10 c	45,375.		
	11	Investments — publicly traded securities				11			
	12	Investments – other securities. See Part IV, line 11				12			
	13	Investments – program-related. See Part IV, line 11.				13			
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11		15					
	16	Total assets. Add lines 1 through 15 (must equal line	100,686.	16	479,244.				
	17	Accounts payable and accrued expenses		10,368.	17				
	18	Grants payable		<u> </u> _		18			
	19	Deferred revenue		19					
	20	Tax-exempt bond liabilities		_		20			
ie s	21	Escrow or custodial account liability. Complete Part I		L.		21			
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	utor. or	35%		22			
-	23	Secured mortgages and notes payable to unrelated th		<u> </u> _		23			
	24	Unsecured notes and loans payable to unrelated third	l partie	s		24	78,812.		
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to re plete F	elated third parties, Part X of Schedule D.		25	,		
	26	Total liabilities. Add lines 17 through 25			10,368.	26	78,812.		
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	<b>&gt;</b>	X					
a	27	-			90,318.	27	400,432.		
Ва	28	Net assets with donor restrictions		_	30,310.	28	100, 102.		
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck her	e ►					
占	29		Capital stock or trust principal, or current funds						
ফ	30	Paid-in or capital surplus, or land, building, or equipm				29 30			
8	31	Retained earnings, endowment, accumulated income,		_		31			
Ϋ́	32	Total net assets or fund balances		<u> </u>	90,318.	32	400,432.		
Ş.	33	Total liabilities and net assets/fund balances		_	100,686.	33	479,244.		
_					100,000.		417,444.		

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,0	00,2	282.	
2	Total expenses (must equal Part IX, column (A), line 25)	2			L68.	
3	Revenue less expenses. Subtract line 2 from line 1	3			L14.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			318.	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.	
10						
	column (B))	10	4	00,4	<u> 132.</u>	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	ed on a				
	<b>b</b> Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa					
	basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
	c If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3	<b>a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		Х	
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	it				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
3A/	TEEA0112L 01/21/20		Form	990	(2019)	

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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.

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

OMB No. 1545-0047

**20**19

Open to Public Inspection

Name	of the	e organization	INTERFAITH	COMMUNITY FOR	R DETAINED			Employer identific	
		-	IMMIGRANTS					46-137435	
Par					ganizations must of				tions.
	rga		•	`	For lines 1 through 12,		-	•	
1	L	4			nurches described in sect			(i).	
2									
3			·	•				• • •	
4		1	-	ition operated in conju	unction with a hospital of	describe	d in <b>sec</b>	ction 170(b)(1)(A)(iii). E	Inter 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		<b>-</b>	state, or local gov	ernment or governme	ental unit described in s	ection 1	<b>70(b)(</b> 1)	)(A)(v).	
7	Χ	An organization	ation that normally ( 170(b)(1)(A)(vi). (	receives a substantial p (Complete Part II.)	eart of its support from a	governm	ental un	it or from the general pu	blic described
8		A commun	nity trust described	l in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9		An agricultu	ural research organ	ization described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant colle	ege
		or university:		nt college of agriculture	e (see instructions). Enter	the nan	ne, city,	and state of the college	or
10		An organiza	ation that normally	receives: (1) more than	33-1/3% of its support fr	om cont	ributions	. membership fees, and	aross receipts
		from activi	ties related to its of the time.	exempt functions-sul	oject to certain exception in the community of the commun	ons, and	(2) no i	more than 33-1/3% of i	its support from gross
11				,,,,,	elv to test for public safe	etv. See	section	ı 509(a)(4).	
12		An organiz	zation organized a	nd operated exclusive	ely for the benefit of, to	nerform	the fun	actions of or to carry o	ut the nurnoses of one
		or more pu	ublicly supported o	organizations describe	d in <b>section 509(a)(1)</b> oupporting organization	r section	n 509(a	)(2). See section 509(a	(3). Check the box in
а		organization	upporting organizati n(s) the power to re <b>Part IV, Sections</b> <i>I</i>	egularly appoint or elect	d, or controlled by its sup a majority of the directo	ported or rs or trus	rganizat stees of t	ion(s), typically by giving the supporting organizati	g the supported on. <b>You must</b>
b		Type II. A manageme	supporting organizent of the supporting	zation supervised or o	ontrolled in connection the same persons that c	with its	support manage	ted organization(s), by the supported organizat	having control or ion(s). <b>You</b>
		must com	plete Part IV, Sect	ions A and C.	·			,,	
С		Type III fun	ctionally integrated	. A supporting organizations.	ion operated in connection lete Part IV, Sections	n with, a	nd function	onally integrated with, its	supported
d		ו	` ' `	· ·	anization operated in cor			supported organization(s	) that is not
		functionally	v integrated. The o	organization generally	must satisfy a distribus A and D, and Part V.	tion req	uiremen	t and an attentiveness	requirement (see
e		integrated,	, or Type III non-fu	unctionally integrated	en determination from t supporting organization	١.			-
f				organizations					
_			ed organization		(iii) Type of organization	C A I	- 41	(v) Amount of monetary	(vi) Amount of other
	,i) ivo	arrie or supporte	su organization	(ii) Eiiv	(described on lines 1-10 above (see instructions))	organizat	s the tion listed overning ment?	support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
(A)									
(B)									
(C)									
(D)									
<u>(E)</u>									
Total									

### Part II 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							
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	865,690.	479,103.	867,244.	763,915.	958,342.	3,934,294.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	865,690.	479,103.	867,244.	763,915.	958,342.	3,934,294.
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)						0.
6	<b>Public support.</b> Subtract line 5 from line 4						3,934,294.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	<b>(f)</b> Total
7	Amounts from line 4	865,690.	479,103.	867,244.	763,915.	958,342.	3,934,294.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	120.	41.	2.	53.	140.	356.
9	Net income from unrelated business activities, whether or not the business is regularly carried on			-			0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI			63.	3,378.		3,441.
11	Total support. Add lines 7 through 10						3,938,091.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	468,628.
13	First five years. If the Form 990 is organization, check this box and						▶ □
Sec	tion C. Computation of Pu						
	Public support percentage for 20	•	``				99.90%
15	Public support percentage from	2018 Schedule A,	Part II, line 14			15	99.90%
16a	<b>33-1/3% support test—2019.</b> If t and <b>stop here.</b> The organization	he organization di qualifies as a pub	d not check the bolicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	3% or more, check	this box X
b	<b>33-1/3% support test—2018.</b> If the and <b>stop here.</b> The organization	ne organization did n qualifies as a pul	d not check a box blicly supported o	on line 13 or 16arganization	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	and-circumstances test. The organiza	s' test, check this ition qualifies as a	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Part ed organization.	VI how the▶
18	Private foundation. If the organi	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check thi	is box and see ins	structions ►

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			,			
Calend	dar year (or fiscal year beginning in) >	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
	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						
	<b>Total.</b> Add lines 1 through 5 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.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🟲	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
	Amounts from line 6						
	similar sources						
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						•
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)	)
	tion C. Computation of Pul					1	
	Public support percentage for 20	•	•		•		%
	Public support percentage from 2					16	%
Sec	tion D. Computation of Inv	estment Inco	ne Percentage	•			
17	Investment income percentage for	•	• • •	-			%
18	Investment income percentage for						%
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check 33 1/3% support tests—2019. If t	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies	as a publicly supp	orted organization.	
b	<b>33-1/3% support tests—2018.</b> If the line 18 is not more than 33-1/3%						
20	Private foundation. If the organiz	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	see instructions	▶ 🗍 .

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	<b>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
С	: Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	t IV	Supporting Organizations (continued)			
	المماا	he averagination accorded a gift or contribution from any of the following mayons 2		Yes	No
		he organization accepted a gift or contribution from any of the following persons?  son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
-	gover	rning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
'	or ele <b>Part</b> I If the direct	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
•		ed to such powers during the tax year.	1		
2	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	tion (	C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how rganization maintained a close and continuous working relationship with the supported organization(s).	2		
	trie oi	rganization maintained a close and continuous working relationship with the supported organization(s).			
3	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played			
		s regard.	3		
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	Т	he organization satisfied the Activities Test. Complete line 2 below.			
b	Т	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.		Yes	No
а	suppo organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		antially all of its activities.	2a		
b	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
	organ	nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		be organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Sche	edule A (Form 990 or 990-EZ) 2019 INTERFAITH COMMUNITY FOR DETAI	NED	46-13	374353	Page (
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganizat	ions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization	ust on No ions mus	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). <b>See</b> through E.	
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
_ 7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sec	tion B – Minimum Asset Amount	(A) Prior Year	(B) Current (optiona		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for shortax year or assets held for part of year):	t			
á	Average monthly value of securities	1a			
ŀ	Average monthly cash balances	1b			
(	Fair market value of other non-exempt-use assets	1c			
	d Total (add lines 1a, 1b, and 1c)	1d			
•	Discount claimed for blockage or other factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035.	6			
_ 7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C — Distributable Amount			Current Y	'ear
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			· · · · · · · · · · · · · · · · · · ·
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990 or 990-EZ) 2019

10 Line 8 amount divided by line 9 amount

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
<b>b</b> Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			
DAA		Schodulo A (Fo	rm 990 or 990 E7) 2019

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Schedule A (Form 990 or 990-EZ) 2019

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 2, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

#### **PART II, LINE 10 - OTHER INCOME**

NATURE AND SOURCE		2019	 2018	 2017	 2016	 2015
MISCELLANEOUS			\$ 3,378.	\$ 63.		
	TOTAL	\$ 0.	\$ 3,378.	\$ 63.	\$ 0.	\$ 0.

#### ADDITIONAL SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S SCHEDULE A WAS COMPLETED INCORRECTLY BY THE PRIOR ACCOUNTING FIRM. TAX YEARS 2013 THROUGH 2016 HAVE BEEN RESTATED ON THE 2018 990.

# SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

INTERFAITH COMMUNITY FOR DETAINED

	IMMIGRANTS			46-13	74353	
Par	t   Organizations Maintaining Dono	r Advised Funds or Other	Similar Fund	s or Accounts.		
	Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line 6	•		
		(a) Donor advised fun	ıds	(b) Funds and	other acco	ounts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and don are the organization's property, subject to the	or advisors in writing that the as organization's exclusive legal co	sets held in dond	or advised funds	Yes	No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit	rs, and donor advisors in writing of the donor or donor advisor, o	that grant funds r for any other po	can be used only urpose conferring	_ 	
_	impermissible private benefit?				Yes	No
Par			5 - of 1) / 15 - 7			
	Complete if the organization answ			•		
1	Purpose(s) of conservation easements held by					-l
	Preservation of land for public use (for examp	ile, recreation or education)		of a historically imp		
	Protection of natural habitat		Preservation	of a certified histor	ic structure	,
2	Preservation of open space					_
2	Complete lines 2a through 2d if the organization h last day of the tax year.	eid a qualified conservation contrib	ution in the form (	of a conservation eas	ement on th	ıe
	,			Held at the	End of the	e Tax Year
a	Total number of conservation easements			. 2a		
Ł	Total acreage restricted by conservation easer	nents		. 2b		
c	Number of conservation easements on a certif	ied historic structure included in	(a)	. 2c		
C	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 7/25/06, and	not on a historic	. 2d		
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or	terminated by the	organization during the	ne	
4	Number of states where property subject to conse	rvation easement is located ►				
5	Does the organization have a written policy regard enforcement of the conservation easemen				Yes	□No
6	Staff and volunteer hours devoted to monitoring, in					
	<b>&gt;</b>	, ,	3		3 ,	
7	Amount of expenses incurred in monitoring, inspe ▶\$	cting, handling of violations, and er	nforcing conservat	tion easements during	the year	
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requ	irements of secti	on 170(h)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization reprinclude, if applicable, the text of the footnote to	orts conservation easements in i o the organization's financial sta	ts revenue and e tements that des	expense statement a scribes the organizat	ind balance ion's accou	sheet, and unting for
Р.	conservation easements. t   Organizations Maintaining Collec	ctions of Art Historiaal Tu	OSCUROS OF O	thor Cimilar Ass	cotc	
Par	Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line 8			
1 a	If the organization elected, as permitted under historical treasures, or other similar assets hel Part XIII the text of the footnote to its financial	d for public exhibition, education	i, or research in t	ement and balance furtherance of public	sheet work s service, p	s of art, provide in
t	If the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items:	r public exhibition, education, or re	search in furthera	nce of public service,	provide the	art,
	(i) Revenue included on Form 990, Part VIII,					
	(ii) Assets included in Form 990, Part X $\dots$					
	If the organization received or held works of art, h amounts required to be reported under FASB $\mu$	ASC 958 relating to these items:				
a	Revenue included on Form 990, Part VIII, line	1				

Part III Organizations Maintaining	Collections of Art, Histo	orical Treasures, o	r Other Similar Ass	sets (contin	ued)			
3 Using the organization's acquisition, access items (check all that apply):	sion, and other records, check a	ny of the following that m	nake significant use of its	collection				
a Public exhibition	<b>d</b> Loan	or exchange program						
<b>b</b> Scholarly research	e Other							
c Preservation for future generations	_							
4 Provide a description of the organization's of Part XIII.	collections and explain how they	further the organization	's exempt purpose in					
5 During the year, did the organization sol to be sold to raise funds rather than to be	be maintained as part of the o	rganization's collection	?	Yes	No			
Part IV Escrow and Custodial Arra	<b>ngements.</b> Complete if t nt on Form 990, Part X,	he organization an Iine 21.	swered 'Yes' on Fo	orm 990, Pa	rt IV,			
1 a Is the organization an agent, trustee, cu on Form 990, Part X?	stodian or other intermediary	for contributions or oth	er assets not included	Yes	□No			
<b>b</b> If 'Yes,' explain the arrangement in Part								
				Amount				
c Beginning balance			1с					
<b>d</b> Additions during the year			1 d					
e Distributions during the year			1 e					
f Ending balance								
2a Did the organization include an amount	on Form 990, Part X, line 21,	for escrow or custodial	account liability?	Yes	No			
<b>b</b> If 'Yes,' explain the arrangement in Part	XIII. Check here if the explar	nation has been provide	ed on Part XIII					
Part V Endowment Funds. Comple								
	Current year (b) Prior year	(c) Two years back	k (d) Three years back	(e) Four yea	rs back			
1 a Beginning of year balance								
<b>b</b> Contributions								
c Net investment earnings, gains,								
and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage of the	current year end balance (lin	e 1g, column (a)) held	as:					
a Board designated or quasi-endowment ►	<u> </u>							
<b>b</b> Permanent endowment ►	<del></del> %							
c Term endowment ►	•							
The percentages on lines 2a, 2b, and 2c sh	iouid equal 100%.							
<b>3 a</b> Are there endowment funds not in the poss organization by:	ession of the organization that a	are held and administered	d for the	Yes	No			
(i) Unrelated organizations				. 3a(i)				
(ii) Related organizations				3a(ii)				
<b>b</b> If 'Yes' on line 3a(ii), are the related org	•			. 3b				
4 Describe in Part XIII the intended uses of	of the organization's endowme	ent funds.						
Part VI Land, Buildings, and Equip	ment.							
Complete if the organization	answered 'Yes' on Forr	n 990, Part IV, line	e 11a. See Form 99	90, Part X, I	ine 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue			
<b>1 a</b> Land		• •						
<b>b</b> Buildings								
c Leasehold improvements	c Leasehold improvements							
<b>d</b> Equipment		13,036.	10,846.		2,190.			
<b>e</b> Other		,	,		<u> </u>			
Total. Add lines 1a through 1e. (Column (d) m	nust equal Form 990, Part X, o	column (B), line 10c.)		45	3,375.			
DΛΛ				Jula D (Farm 90				

Schedule D (Form 990) 2019

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
A)			
B)			
C)	-		
D)			
E)			
(F)	-		
(G) H)	-		
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) •	•		
Part VIII Investments — Program Related.		N/A	
Complete if the organization answered	d 'Yes' on Form 99	0, Part IV, line 11c. See F	orm 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(9) (10)			
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •			
(9) (10)	N/A		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) De	N/A		orm 990, Part X, line 19
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets. Complete if the organization answered (a) De	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered  (a) December 13.1	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered  (a) December (1) (2) (3)	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered  (a) December (1) (2) (3) (4)	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered  (a) December (1) (2) (3)	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7)	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8)	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December 13.	N/I d 'Yes' on Form 99		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/Ad 'Yes' on Form 99	0, Part IV, line 11d. See F	(b) Book value
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •  Part IX Other Assets.  Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Fotal. (Column (b) must equal Form 990, Part X, column (b) must equal Form 990, Part X, column (column (colum	N/Ad 'Yes' on Form 99	0, Part IV, line 11d. See F	(b) Book value
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.	M/Ad 'Yes' on Form 99 escription	0, Part IV, line 11d. See F	(b) Book value
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) • Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) • Part X Other Liabilities. Complete if the organization answered 'Yes' on the complete if the organization answered 'Yes' on the column (b) must equal Form 990, Part X, column (Complete if the organization answered 'Yes' on the column (Column (	M/Ad 'Yes' on Form 99 escription	0, Part IV, line 11d. See F	(b) Book value
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (Part X) Other Liabilities. Complete if the organization answered 'Yes' on the complete if the organization answered 'Yes' on the column (b) must equal Form 990, Part X, column (Complete if the organization answered 'Yes' on the complete if the organization answered 'Yes' on the column (Column (Col	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) Fotal. (Column	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (Part X) Complete if the organization answered 'Yes' on It. (1) Federal income taxes (2) (3)	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (Part X) Complete if the organization answered 'Yes' on It. (1) Federal income taxes (2) (3) (4)	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December 2  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on It. (1) Federal income taxes (2) (3) (4) (5)	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on It. (1) Federal income taxes (2) (3) (4) (5) (6)	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (Part X) Other Liabilities. Complete if the organization answered 'Yes' on I. (a) Descential (Column (b) Must equal Form 990, Part X) (1) Federal income taxes (2) (3) (4) (5) (6) (7)	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) Fotal. (Column (Colum	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on the image of the organization answered in th	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on the image of the image	M/Ad 'Yes' on Form 99 escription  (B) line 15.)	0, Part IV, line 11d. See F	(b) Book value ▶ line 25.

Schedule D (Form 990) 2019

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,000,282.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1.	3	1,000,282.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	1,000,282.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	690,168.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) 2 d		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1.	3	690,168.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines <b>4a</b> and <b>4b</b>	4 c	690,168.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### **PART X - FASB ASC 740 FOOTNOTE**

Part XIII Supplemental Information.

BAA

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501C3 OF THE INTERNAL REVENUE CODE, THEREFORE, THE FINANCIAL STATEMENTS DO NOT INCLUDE A PROVISION FOR INCOME TAXES. THE ORGANIZATION REVIEWS INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS TO DETERMINE IF THERE ARE ANY INCOME TAX UNCERTAINTIES. THIS INCLUDES POSITIONS THAT THE ENTITY IS EXEMPT FROM INCOME TAXES OR NOT SUBJECT TO INCOME TAXES ON UNRELATED BUSINESS INCOME. THE ORGANIZATION

RECOGNIZES TAX BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN

TEEA3304L 8/22/19

Part XIII | Supplemental Information (continued)

#### PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES,
BASED ON THE TECHNICAL MERITS OF THE POSITIONS. THE ORGANIZATION HAS IDENTIFIED NO
SIGNIFICANT INCOME TAX UNCERTAINTIES. THE ORGANIZATION FILES INFORMATION RETURNS AS
A TAX-EXEMPT ORGANIZATION. SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, ALL YEARS
SINCE INCEPTION COULD BE SUBJECT TO REVIEW BY THE IRS.

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization INTERFAITH CO.	MMUNITY FOR D	ETAINED				Employer identific	ation number
IMMIGRANTS						46-137435	3
Part I   General Information on G	rants and Assist	ance					
1 Does the organization maintain records the selection criteria used to award the	to substantiate the am he grants or assistan	ount of the grants of ce?	r assistance, the grantees	' eligibility for the grants			X Yes No
2 Describe in Part IV the organization's pr		•				ART IV	
Form 990, Part IV, line 21							
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of gran or assistance
(1)							
(2)							
(3)							
<u>(4)</u>							
(5)							
(6)							
(7)							
(0)							
(8)							
<ul><li>2 Enter total number of section 501(c)(</li><li>3 Enter total number of other organizat</li></ul>							

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Page 11.	art III
	can be duplicated if additional space is needed.	

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 ASSISTANCE TO OTHERS	3,000	54,229.			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

#### PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

THE ORGANIZATION'S MANAGEMENT AND BOARD APPROVE ASSISTANCE TO OTHERS. ALL ASSISTANCE TO OTHERS RELATES TO PROGRAM SERVICES.

#### **SCHEDULE O** (Form 990 or 990-EZ)

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

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

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERFAITH COMMUNITY FOR DETAINED **IMMIGRANTS** 

Employer identification number

46-1374353

#### FORM 990. PART III. LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

DEPORTATION ACCOMPANIMENT - THE ORGANIZATION PROVIDES PRAYER VIGIL AT BROADVIEW, PRAYER ON THE BUSES AND PASTORAL CARE TO SUPPORT DEPORTATION VICTIMS. 1 PRAYER VIGIL AT BROADVIEW - COMPRISES OF PEOPLE OF FAITH JOINING TOGETHER IN A PRAYER VIGIL EVERY FRIDAY MORNING AT 7:15 AM, AT BROADVIEW IMMIGRATION PROCESSING CENTER, TO PROVIDE PUBLIC WITNESS TO THE INJUSTICES OF THE U.S. IMMIGRATION SYSTEM. AN INTERFAITH PRAYER SERVICE IS HELD ON THE FIRST FRIDAY OF EVERY MONTH. THE ROSARY IS PRAYED ON THE REMAINING FRIDAYS. 2 PRAYER ON THE BUSES - EACH FRIDAY MORNING, BUSES FILLED WITH MEN AND WOMEN SHACKLED BY THEIR HANDS, FEET, AND WAISTS LEAVE FOR LOCAL AIRPORTS TO BE DEPORTED. CLERGY, LAY LEADERS AND PEOPLE OF FAITH OFFER PRAYERS ON THE BUSES TO ACCOMPANY THEM IN THEIR DIFFICULT JOURNEY AND TO LET THEM KNOW THAT PEOPLE OF FAITH STAND WITH THEM AND ARE WORKING TO CHANGE THESE UNJUST POLICIES. 3 PASTORAL CARE -VOLUNTEERS SUPPORT FAMILIES AS THEY COME TO SAY GOODBYE TO THEIR LOVED ONES.

COURT WATCH - STUDENTS, RELIGIOUS LEADERS, AND PEOPLE OF FAITH SERVE AS A PRESENCE IN THE IMMIGRATION COURT TO LET THOSE INVOLVED IN THE COURT SYSTEM KNOW THAT PEOPLE ARE WATCHING AND CARE ABOUT WHAT HAPPENS TO THEIR IMMIGRANT SISTERS AND BROTHERS. IT IS THE ORGANIZATIONS GOAL THAT THROUGH MONITORING AND DOCUMENTING THE ORGANIZATION CAN BRING TRANSPARENCY TO THIS BROKEN SYSTEM AND SUPPORT THE URGENT NEED FOR MORE JUST IMMIGRATION POLICIES. COURT WATCH IS ALSO A MINISTRY OF PRESENCE. PEOPLE IN DETENTION ARE NOT PHYSICALLY PRESENT IN COURT. THEY HEAR THE PROCEEDING AND COMMUNICATE WITH THE JUDGE VIA VIDEO CAMERA. THEY ARE COMFORTED KNOWING THAT THERE ARE COURT WATCH VOLUNTEERS PRESENT. COURT WATCH VOLUNTEERS ARE PRESENT AT HEARINGS MORNING AND AFTERNOON, MONDAY THROUGH THURSDAY.

Employer identification number 46-1374353

#### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

IN 2008, VOLUNTEERS HAVE BEEN PROVIDING PASTORAL CARE TO PEOPLE IN DETENTION. TEAMS OF VOLUNTEERS VISIT PEOPLE WEEKLY IN IMMIGRANT DETENTION AT FOUR DIFFERENT LOCATIONS. ANNUALLY THE ORGANIZATIONS VOLUNTEERS VISIT OVER 1,200 DETAINED IMMIGRANTS. WEEKLY THE ORGANIZATION PLACES \$10 INTO COMMISSARY ACCOUNTS OF INDIVIDUALS AS THEIR ACCOUNTS BECOME DEPLETED. PEOPLE IN DETENTION USE THIS MONEY FOR BASIC DAILY NEEDS. THE COST OF THIS PROGRAM FOR BOTH JAILS CAN BE OVER \$1,000 A WEEK. VISITS OCCUR DURING DAYTIME HOURS ON SPECIFIC DAYS IN MCHENRY COUNTY JAIL, KENOSHA COUNTY DETENTION CENTER, DODGE COUNTY DETENTION CENTER, AND JEROME COMBS DETENTION CENTER IN KANKAKEE.

POST-DETENTION - THE ORGANIZATION OFFERS A HOTLINE AND HOSPITALITY SERVICES FOR INDIVIDUALS RELEASED FROM DETENTION. 1 HOTLINE - FOR PEOPLE RELEASED FROM ICE CUSTODY, THE ORGANIZATION HAS A HOTLINE THEY CAN CALL FOR ASSISTANCE. VOLUNTEERS RESPOND TO HOTLINE CALLS AND PROVIDE WEATHER APPROPRIATE CLOTHING AND SHOES, MEALS, SHORT-TERM STAYS, BUS TICKETS, A BACKPACK WITH ESSENTIAL ITEMS, AND OTHER NEEDS. THE ORGANIZATION HELPS PEOPLE GET BACK TO FAMILY OR FRIENDS WHO ARE OFTEN IN OTHER STATES. 2 HOSPITALITY - FOR PEOPLE WHO HAVE NOWHERE TO LIVE UPON RELEASE, THE ORGANIZATION PROVIDES TRANSITIONAL SHELTER WHILE THEY WAIT FOR FUTURE COURT DATES OR WORK PERMITS. THE MARIE JOSEPH HOUSE OF HOSPITALITY PROVIDES FOOD AND SHELTER FOR MEN, WOMEN, AND FAMILIES WITH CHILDREN. A CASE MANAGER CONNECTS PEOPLE TO EDUCATIONAL, ESL, RELIGIOUS, HEALTH, AND LEGAL SERVICES. LIVING IN A SUPPORTIVE AND CARING ENVIRONMENT HELPS PEOPLE HEAL AND ADJUST TO LIFE IN THE UNITED STATES. THIS TRAUMA-INFORMED CARE MODEL IS WHAT THE ORGANIZATION BELIEVES PEOPLE ENTERING THE U.S. AND SEEKING ASYLUM SHOULD RECEIVE.

UNACCOMPANIED CHILDREN - THE ORGANIZATION PROVIDE PASTORAL CARE TO MIGRANT CHILDREN FROM AROUND THE WORLD. THE ORGANIZATION ACCOMPANIES CHILDREN WHO ARE DIVERSE IN

#### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

ALMOST EVERY WAY IMAGINABLE, REPRESENTING DIFFERENT COUNTRIES, LANGUAGE GROUPS, RELIGIONS, SOCIO-ECONOMIC BACKGROUNDS, AND AGES. THE ORGANIZATION FACILITATES A CONNECTION WITH THE SACRED DURING A VERY CRITICAL PERIOD IN THEIR LIFE JOURNEYS.

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE BOARD REVIEWS THE 990 PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

CONFLICTS OF INTEREST ARE DISCLOSED AS THEY ARISE.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT COMPENSATION LEVELS FOR ALL EMPLOYEES REVIEWED BY THE BOARD.

FORM 990, PART VI, LINE 18 - EXPLANATION OF OTHER MEANS FORMS AVAILABLE FOR PUBLIC INSPECTION
THE 990 CAN BE ACQUIRED THROUGH THE IL ATTORNEY GENERAL AND GUIDESTAR.ORG WEBSITES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

AVAILABLE UPON REQUEST

# Interfaith Community for Detained Immigrants



# Financial Statements

For the Year Ended June 30, 2020



### **Interfaith Community for Detained Immigrants**

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#### **Independent Auditor's Report**

To the Board of Directors Interfaith Community for Detained Immigrants Chicago, Illinois

#### **Report on the Financial Statements**

We have audited the accompanying financial statements of Interfaith Community for Detained Immigrants, which comprise the statement of financial position as of June 30, 2020, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Interfaith Community for Detained Immigrants as of June 30, 2020, and the changes in its net assets and its cash flows for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

IL NFP Audit & Tax, LLP

Chicago, Illinois March 29, 2021

# Interfaith Community for Detained Immigrants Statement of Financial Position June 30, 2020

		hout Donor estrictions	With l Restri		Total
	A	Assets			
<b>Current Assets</b>					
Cash	\$	379,369	\$	0	\$ 379,369
Accounts Receivable		54,500		0	54,500
<b>Total Current Assets</b>		433,869		0	433,869
Fixed Assets					
Leasehold Improvements		55,874		0	55,874
Equipment		13,036		0	13,036
Total Fixed Assets Cost		68,910		0	68,910
Less - Accumulated Depreciation and					
Amortization		23,535	_	0	23,535
<b>Total Fixed Assets</b>		45,375		0	45,375
<b>Total Assets</b>	\$	479,244	\$	0	\$ 479,244
Lia	abilities	and Net Asset	S		
Non-Current Liabilities					
Note Payable	\$	78,812	\$	0	\$ 78,812
<b>Total Non-Current Liabilities</b>		78,812		0	78,812
<b>Total Liabilities</b>		78,812		0	78,812
<b>Total Net Assets</b>		400,432		0	400,432
<b>Total Liabilities and Net Assets</b>	\$	479,244	\$	0	\$ 479,244

# Interfaith Community for Detained Immigrants Statement of Activities For the Year Ended June 30, 2020

	hout Donor estrictions	· <u></u>	With Donor Restrictions	Total
Revenue, Support and Gains				
Grants and Contributions	\$ 958,342	\$	0	\$ 958,342
Program Fees	41,800		0	41,800
Interest Income	140		0	140
Net Assets Released from Restrictions:				
Satisfaction of Program Restriction	0		0	0
<b>Expiration of Time Restrictions</b>	 0		0	 0
<b>Total Revenue, Support and Gains</b>	 1,000,282		0	 1,000,282
<b>Functional Expenses</b>				
Program Services	510,974		0	510,974
Management and General	92,299		0	92,299
Fundraising	86,895		0	86,895
<b>Total Functional Expenses</b>	 690,168		0	 690,168
<b>Change in Net Assets</b>	310,114		0	310,114
Net Assets,				
Beginning of Year	90,318		0	90,318
End of Year	\$ 400,432	\$	0	\$ 400,432

### Interfaith Community for Detained Immigrants Statement of Functional Expenses For the Year Ended June 30, 2020

	Program Services		Management and General Fundraising		undraising	Total
<b>Functional Expenses</b>						
Personnel						
Salaries	\$	306,751	\$ 36,088	\$	18,044	\$ 360,883
Payroll Taxes		23,024	2,709		1,354	27,087
Total Personnel		329,775	38,797		19,398	387,970
Assistance to Others		54,229	 0	•	0	54,229
Bank Fees		0	2,021		0	2,021
Depreciation		3,570	420		210	4,200
Dues and Subscriptions		0	886		0	886
Hotline		13,329	0		0	13,329
Insurance		28,233	3,322		1,661	33,216
Interest Expense		0	1,855		0	1,855
Licenses and Fees		0	295		0	295
Meetings and Conferences		1,300	1,730		0	3,030
Miscellaneous		0	1,797		0	1,797
Occupancy		50,623	5,595		2,797	59,015
Office		0	7,038		0	7,038
Postage		39	1,835		1,500	3,374
Printing		95	4,343		5,390	9,828
Professional Fees		5,145	19,971		25,611	50,727
Staff Development		747	1,574		0	2,321
Supplies and Materials		18,534	0		30,328	48,862
Telephone		1,283	820		0	2,103
Travel		4,072	 0		0	4,072
<b>Total Functional Expenses</b>	\$	510,974	\$ 92,299	\$	86,895	\$ 690,168

# Interfaith Community for Detained Immigrants Statement of Cash Flows For the Year Ended June 30, 2020

Cash Flows from Operating Activities	
Received from Supporters and Other Sources	\$ 974,642
Interest Received	140
Paid to Vendors and Employees	(694,481)
Interest Paid	(1,855)
Income Taxes Paid	 0
<b>Net Cash Provided by Operating Activities</b>	 278,446
Cash Flows from Financing Activities	
Proceeds from Issuance of Note Payable	 78,812
Net Cash Provided by Financing Activities	 78,812
Net Increase in Cash	357,258
Cash	
Beginning of Year	 22,111
End of Year	\$ 379,369
Reconciliation of Change in Net Assets to Net Cash Provided by Operating Activities	
Change in Net Assets	\$ 310,114
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities:	
Depreciation and Amortization	4,200
Changes in Certain Assets and Liabilities:	
Accounts Receivable	(25,500)
Accounts Payable	 (10,368)
Total Adjustments	 (31,668)
<b>Net Cash Provided by Operating Activities</b>	\$ 278,446

#### **Note 1 - Principal Activity and Significant Accounting Policies**

#### Organization and Nature of Activities

Interfaith Community for Detained Immigrants (the "Organization") is a not-for-profit corporation incorporated in 2012. The Organization is a faith-based organization of staff and volunteers called to respond actively and publicly to the suffering of all individuals and communities affected by immigration detention, deportation, and post-detention through pastoral care, advocacy, public witness and other activities.

The Organization is a prophetic voice for just and humane treatment of immigrants caught in the immigration detention process. The Organization upholds the dignity and basic human rights of each individual as it stands in solidarity with its immigrant sisters and brothers as a powerful collective voice to minimize the use of detention and to seek justice. The Organization believes that everyone, regardless of national origin, has basic human rights, including livelihood, family unity, and physical and emotional safety. The Organization also seeks to provide national leadership and models for detention work and general interfaith collaboration. The Organization provides the following programs to help achieve its mission:

<u>Deportation Accompaniment</u> - The Organization provides Prayer Vigil at Broadview, Prayer on the Buses and Pastoral Care to support deportation victims.

*Prayer Vigil at Broadview* - Comprises of people of faith joining together in a prayer vigil every Friday morning at 7:15 AM, at Broadview Immigration Processing Center, to provide public witness to the injustices of the U.S. immigration system. An interfaith prayer service is held on the first Friday of every month. The Rosary is prayed on the remaining Fridays.

*Prayer on the Buses* - Each Friday morning, buses filled with men and women shackled by their hands, feet, and waists leave for local airports to be deported. Clergy, lay leaders and people of faith offer prayers on the buses to accompany them in their difficult journey and to let them know that people of faith stand with them and are working to change these unjust policies.

Pastoral Care - Volunteers support families as they come to say goodbye to their loved ones.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Organization and Nature of Activities (Continued)

<u>Court Watch</u> - Students, religious leaders, and people of faith serve as a presence in the Immigration Court to let those involved in the court system know that people are watching and care about what happens to their immigrant sisters and brothers. It is the Organization's goal that through monitoring and documenting the Organization can bring transparency to this broken system and support the urgent need for more just immigration policies. Court Watch is also a ministry of presence. People in detention are not physically present in court. They hear the proceeding and communicate with the judge via video camera. They are comforted knowing that there are Court Watch volunteers present. Court Watch volunteers are present at hearings morning and afternoon, Monday through Thursday.

<u>Jail Visitation Ministry</u> - Since Illinois' Access to Religious Ministry Act became law in 2008, volunteers have been providing pastoral care to people in detention. Teams of volunteers visit people weekly in immigrant detention at four different locations. Annually the Organization's volunteers visit over 1,200 detained immigrants. Weekly the Organization places \$10 into commissary accounts of individuals as their accounts become depleted. People in detention use this money for basic daily needs. The cost of this program for both jails can be over \$1,000 a week. Visits occur during daytime hours on specific days in McHenry County Jail, Kenosha County Detention Center, Dodge County Detention Center, and Jerome Combs Detention Center (in Kankakee).

<u>Post-Detention</u> - The Organization offers a hotline and hospitality services for individuals released from detention.

*Hotline* - For people released from ICE custody, the Organization has a hotline they can call for assistance. Volunteers respond to hotline calls and provide weather appropriate clothing and shoes, meals, short-term stays, bus tickets, a backpack with essential items, and other needs. The Organization helps people get back to family or friends who are often in other states.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Organization and Nature of Activities (Continued)

Hospitality - For people who have nowhere to live upon release, the Organization provides transitional shelter while they wait for future court dates or work permits. The Marie Joseph House of Hospitality provides food and shelter for men, women, and families with children. A case manager connects people to educational, ESL, religious, health, and legal services. Living in a supportive and caring environment helps people heal and adjust to life in the United States. This trauma-informed care model is what the Organization believes people entering the U.S. and seeking asylum should receive.

<u>Unaccompanied Children</u> - The Organization provide pastoral care to migrant children from around the world. The Organization accompanies children who are diverse in almost every way imaginable, representing different countries, language groups, religions, socio-economic backgrounds, and ages. The Organization facilitates a connection with the sacred during a very critical period in their life journeys.

#### Basis of Accounting

The Organization's accounts are maintained on the accrual basis of accounting. Net assets, revenues, gains, and losses are classified based on the existence or absence of donor or grantor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

*Net Assets Without Donor Restrictions* - Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions. The governing board has not designated any amounts from net assets without donor restrictions as of June 30, 2020.

*Net Assets With Donor Restrictions* - Net assets subject to donor-imposed or certain grantor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Gifts of long-lived assets and gifts of cash restricted for the acquisition of long-lived assets are recognized as revenue when the assets are placed in service. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Cash and Cash Equivalents

The Organization considers all cash and highly liquid financial instruments with original maturities of three months or less, which are neither held for nor restricted by donors for long-term purposes, to be cash and cash equivalents. Cash and highly liquid financial instruments restricted to building projects, endowments that are perpetual in nature, or other long-term purposes are excluded from this definition.

#### Receivables and Allowance for Doubtful Accounts

The Organization records unconditional promises to give that are expected to be collected within one year at net realizable value. Unconditional promises to give expected to be collected in future years are initially recorded at fair value using present value techniques incorporating risk-adjusted discount rates designed to reflect the assumptions market participants would use in pricing the asset. In subsequent years, amortization of the discounts is included in contribution revenue in the statement of activities. The Organization determines the allowance for uncollectible promises to give based on historical experience, an assessment of economic conditions, and a review of subsequent collections. Promises to give are written off when deemed uncollectible.

#### Fixed Assets

The Organization records fixed asset additions over \$500 at cost, or if donated, at fair value on the date of donation. Depreciation and amortization are computed using the straight-line method over the estimated useful lives of the assets ranging from 5 to 7 years, or in the case of capitalized leased assets or leasehold improvements, the lesser of the useful life of the asset or the lease term. When assets are sold or otherwise disposed of, the cost and related depreciation or amortization are removed from the accounts, and any resulting gain or loss is included in the statement of activities. Costs of maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed currently. For the year ended June 30, 2020, depreciation expense amounts to \$2,168, and amortization expense amounts to \$2,032.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Fixed Assets (Continued)

The Organization reviews the carrying values of fixed assets for impairment whenever events or circumstances indicate that the carrying value of an asset may not be recoverable from the estimated future cash flows expected to result from its use and eventual disposition. When considered impaired, an impairment loss is recognized to the extent carrying value exceeds the fair value of the asset. There were no indicators of asset impairment during the year ended June 30, 2020.

#### Deferred Revenue

Exchange transactions in which a reciprocal transfer of assets occurs are recorded as deferred revenue if said transactions are unfulfilled as of year-end. The Organization has no deferred revenue as of June 30, 2020.

#### Revenue Recognition - Grants and Contributions

Contributions received and unconditional promises to give are measured at their fair values and are reported as an increase in net assets. Conditional promises to give are not recognized until they become unconditional. The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the assets, or if they are designated as support for future periods. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. Donor-imposed contributions whose restrictions are met in the same reporting period are reported as net assets without donor restrictions. Net assets restricted for acquisition of buildings or equipment are reported as net assets with donor restrictions until the specified asset is placed in service by the Organization when the restrictions are released.

#### Revenue Recognition - Program Services

Program services revenue is reported at the amount that reflects the consideration to which the Organization expects to be entitled in exchange for said services. The Organization typically bills for services prior to the delivery of services. Revenue is recognized as the underlying performance obligations are satisfied.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Revenue Recognition - Program Services (Continued)

Performance obligations are determined based on the nature of the services provided by the Organization. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges.

#### **Income Taxes**

The Organization is exempt from Federal and State income taxes under Section 501(c)(3) of the Internal Revenue Code, therefore, the financial statements do not include a provision for income taxes. The Organization reviews income tax positions taken or expected to be taken in income tax returns to determine if there are any income tax uncertainties. This includes positions that the entity is exempt from income taxes or not subject to income taxes on unrelated business income. The Organization recognizes tax benefits from uncertain tax positions only if it is more likely than not that the tax positions will be sustained on examination by taxing authorities, based on the technical merits of the positions. The Organization has identified no significant income tax uncertainties. The Organization files information returns as a tax-exempt organization. Should that status be challenged in the future, all years since inception could be subject to review by the IRS.

#### Functional Expense Allocation

The financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The Organization allocates functional expenses mainly on the basis of estimates of time and effort.

#### Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted 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.

#### **Note 1 - Principal Activity and Significant Accounting Policies (Continued)**

#### Advertising costs

The Organization uses advertising to promote its programs among the audiences it serves. The costs of advertising are expensed the first time the advertising takes place, except for direct-response advertising, which is capitalized and amortized over its expected period of future benefits. The Organization had no direct-response advertising during the year ended June 30, 2020. Advertising costs amount to \$0 for the year ended June 30, 2020.

#### Financial Instruments and Credit Risk

The Organization manages deposit concentration risk by placing cash, money market accounts, and certificates of deposit, when applicable, with financial institutions believed to be creditworthy. At times, amounts on deposit may exceed insured limits. As of June 30, 2020, the Organization holds \$49,945 of deposits above federally insured limited. To date, the Organization has not experienced losses in any of these accounts. Credit risk associated with receivables and promises to give is considered to be limited due to high historical collection rates and because substantial portions of the outstanding amounts are due from reputable donors highly supportive of the Organization's mission. When applicable, although the fair values of investments are subject to fluctuation on a year-to-year basis, the Organization believes that the investment policies and guidelines are prudent for the long-term welfare of the Organization.

#### **Note 2 - Accounts Receivable**

At June 30, 2020, accounts receivable comprise of the following:

Collectible in Fiscal Year 2021	\$ 54,500
Less: Discount to Net Present Value	0
Less: Allowance for Doubtful Accounts	 0
Accounts Receivable	\$ 54,500

#### Note 3 - Note Payable

On April 22, 2020, the Organization was approved for a loan in the aggregate amount of \$78,812, pursuant to the Paycheck Protection Program (the "PPP") under Division A, Title I of the Coronavirus Aid, Relief and Economic Security Act ("CARES Act"), which was enacted on March 27, 2020.

The loan, which was in the form of a note payable dated April 22, 2020 matures on April 22, 2022 and bears interest at a rate of 1.00% per annum, payable monthly commencing on November 22, 2020. The note payable is unsecured.

The PPP, established as part of the CARES Act, provides for loans to qualifying businesses for amounts up to 2.5 times of the average monthly payroll expenses of the qualifying business. The loans and accrued interest are forgivable after eight weeks as long as the borrower uses the loan proceeds for eligible purposes, including payroll, benefits, rent and utilities, and maintains its payroll levels. The amount of loan forgiveness will be reduced if the borrower terminates employees or reduces salaries during the eight-week period.

The unforgiven portion of the PPP loan is payable over two years at an interest rate of 1%, with a deferral of payments for the first six months. The Organization intends to use the proceeds for purposes consistent with the PPP. While the Organization currently believes that its use of the loan proceeds will meet the conditions for forgiveness of the loan, the Organization cannot assure that it will not take actions that could cause the Organization to be ineligible for forgiveness of the loan, in whole or in part.

The PPP note payable balance amounts to \$78,812 as of June 30, 2020. Unless forgiven, future principal and interest maturities that exist as of June 30, 2020 are as follows:

Principal
\$ 0
78,812
\$ 78,812
\$

#### **Note 4 - In-Kind Donations**

Donated services are recognized as revenues at their estimated fair value when they create or enhance nonfinancial assets or they require specialized skills which would need to be purchased if they were not donated. Volunteers contribute significant amounts of time to the Organization's program services, administration, and fundraising activities; however, the financial statements do not reflect the value of these contributed services because they do not meet recognition criteria prescribed by generally accepted accounting principles. For the year ended June 30, 2020, the Organization received no donated services that meet the recognition criteria prescribed by generally accepted accounting principles.

Donated goods are recorded at fair value on the date of donation. For the year ended June 30, 2020, no donated goods were received by the Organization.

Donated space is recorded at fair value on the date of donation. For the year ended June 30, 2020, no donated space was received by the Organization.

#### **Note 5 - Leases Commitments**

The Organization leases space in Chicago, Illinois under a lease agreement through June 30, 2028. The lease agreement calls for monthly rent of \$4,000 from July 2018 through June 2028.

Rent expense amounts to \$48,646 for the year ended June 30, 2020. Future minimum lease payments are as follows:

For the Year Ended June 30, 2021	\$ 48,000
2022	48,000
2023	48,000
2024	48,000
2025	48,000
2026 - 2028	144,000
	\$ 384,000

#### **Note 6 - Net Asset Restrictions**

Net assets with donor restrictions are restricted for the following purposes or periods:

Subject to Expenditure for Specific Purpose:	
None as of June 30, 2020	\$ 0
Subject to Passage of Time:	
None as of June 30, 2020	0
Total Net Assets with Restrictions	\$ 0

Net assets were released from donor restrictions by incurring expenses satisfying the purpose restrictions or by the occurrence of the passage of time or other events specified by donors during the year ended June 30, 2020:

None as of June 30, 2020	\$ 0
Time Restrictions Expired:	
None as of June 30, 2020	 0
Total Restrictions Released	\$ 0

#### Note 7 - Liquidity and Availability of Financial Assets

At June 30, 2020, the Organization has \$433,869 of financial assets, excluding non-spendable financial assets, available for general expenditures within one year of the balance sheet date. None of this amount is subject to donor timing or purpose restrictions, excluding general operation restrictions, expiring within one year. No other contractual restrictions exist that make current financial assets unavailable for general expenditure within one year of the balance sheet date. As of June 30, 2020, the Organization does not expect that its liquidity will deteriorate.

#### **Note 7 - Liquidity and Availability of Financial Assets (Continued)**

Financial assets available within one year of the balance sheet for general expenditures comprise of the following:

Financial Assets Available for General Expenditure:	
Cash	\$ 379,369
Accounts Receivable	54,500
Total Financial Assets Available for General Expenditure	433,869
Less: Financial Assets Pledged as Collateral	0
Less: Financial Assets Subject to Donor Timing or Purpose	
Restrictions	0
Total Financial Assets Available to Meet Cash Needs for	
General Use Within One Year	\$ 433,869

#### **Note 8 - Recently Implemented Accounting Pronouncements**

In May 2014, the FASB issued ASU No. 2014-09, *Revenue from Contracts with Customers* (*Topic 606*), which supersedes the previous revenue recognition requirements in Topic 605, Revenue Recognition. The ASU is based on the principle that revenue is recognized to depict the transfer of goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods and services. The ASU also requires additional disclosure about the nature, amount, timing, and uncertainty of revenue and cash flows arising from customer contracts, including significant judgments and changes in judgments and assets recognized from costs incurred to obtain or fulfill a contract. The new guidance was adopted by the Organization during the year ended June 30, 2020.

In January 2016, the FASB issued ASU No. 2016-01, *Recognition and Measurement of Financial Assets and Financial Liabilities*. With relation to not-for-profit organizations, the ASU eliminates the requirement to disclose fair value of financial instruments measured at amortized cost, and requires separate presentation of financial assets and financial liabilities by measurement category and form of financial asset (that is, securities or loans and receivables) on the statement of financial position or within the notes to the financial statements. The new guidance was adopted by the Organization during the year ended June 30, 2020.

#### **Note 9 - Upcoming Accounting Pronouncements**

In February 2016, the FASB issued ASU No. 2016-02, *Leases*, which will supersede the current lease requirements in ASC 840. The ASU requires lessees to recognize a right-of-use asset and related lease liability for all leases, with a limited exception for short-term leases. Leases will be classified as either finance or operating, with the classification affecting the pattern of expense recognition in the statement of activities. Currently, leases are classified as either capital or operating, with only capital leases recognized on the statement of financial position. The reporting of lease-related expenses in the statement of activities and cash flows will be generally consistent with the current guidance. The new lease guidance will be effective for the Organization's year ending June 30, 2023 and will be applied using a modified retrospective transition method to the beginning of the earliest period presented. The new lease standard is not expected to have a significant effect on the the Organization statement of financial position.

#### **Note 10 - Concentration of Grants**

The Organization continuously attempts to diversify its revenue base, and as such, does not have a major revenue concentration from a specific grantor as of June 30, 2020.

#### **Note 11 - Subsequent Events**

The date to which events occurring after June 30, 2020, the date of the most recent balance sheet, have been evaluated for possible adjustment to the financial statements or disclosure is March 29, 2021, which is the date on which the financial statements were available to be issued.