For Office Use Only	_ ILLINOIS CHARITABLE ORGANIZATION ANNUA			Revised 1/2
PMT #	Illinois Attorney General Kwame Raou			
	Charitable Trust Bureau, 115 S. LaSalle Chicago, IL 60603	St CO		1-25720732
AAAT	Report for the Fiscal Period:	[		all items attached:
AMT	•	Make Checks X		of IRS Return d Financial Statements
		Make Checks X Payable to		ved Financial Statements
INIT	209g 0770172022	Illinois Charity		of Form IFC
	& Ending 06/30/2023	Bureau Fund		nnual Report Filing Fee
	<u> </u>	X		ate Report Filing Fee
Federal ID # **-**6143	MO DAY YR Date o	rganization was created	d:	10/18/1993
Are contributions to the organization	tax deductible? Yes No			MO DAY YR
Legal Name: CASA LAKE	COUNTY, INC.	YEAR-END		
		AMOUNTS	100	
Mail Address: 700 FORES		A) ASSETS	A) \$	3,838,146
City, State: VERNON HI		B) LIABILITIES C) NET ASSETS	B) \$ C) \$	129,752
Zip Code: 60061-317	2	U) NET AGGETO	υ, φ	3,708,394
I. SUMMARY OF ALL	REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	<u> </u>	AMOUNT
	TRIBUTIONS AND PROGRAM SERVICE REV. (GROSS AMTS.)	98.817%	D) \$	1,929,743
,	AND MEMBERSHIP DUES	%	E) \$	1,20,1,10
F) OTHER REVENUES		1.183%	F) \$	23,111
	OME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G) \$	1,952,854
	EXPENDITURES DURING THE YEAR:			
H) OPERATING CHARITABL	E PROGRAM EXPENSE	73.361%	H) \$	1,348,328
I) FRUGATION PROGRAM	OCCUMOS ENDENOS	0/	1, 6	
i) EDUCATION PROGRAM	SERVICE EXPENSE	%	1) \$	
J) TOTAL CHARITABLE PR	OGRAM SERVICE EXPENSE (ADD H & I)	73.361%	J) \$	1,348,328
o) TOTAL OHARITABLETTI	OUTAN OLIVIOL EXI LIBOL (ADD II & I)	73.301%	10, 0	1,340,320
J1) JOINT COSTS ALLOCATE	ED TO PROGRAM SERVICES (INCLUDED IN J)			
,				
K) GRANTS TO OTHER CHA	RITABLE ORGANIZATIONS	%	K) \$	
				4 040 000
L) TOTAL CHARITABLE PR	OGRAM SERVICE EXPENDITURE (ADD J & K)	73.361%	L) \$	1,348,328
M) MANAGEMENT AND GEN	IERAI FYDENSE	14.003%	M) \$	257,358
WI) WANAGEWENT AND GEN	NETAL EXILIBE	14.003%	Ινι) ψ	457,350
N) FUNDRAISING EXPENSE		12,636%	N) \$	232,239
,				
0) TOTAL EXPENDITURES	THIS PERIOD (ADD L, M & N)	100 %	0)\$	1,837,925
III. SUMMARY OF ALL	PAID FUNDRAISER & CONSULTANT ACTIVITIES:			
(Attach Attorney General Rep	ort of Individual Fundraising Campaign (Form IFC). One for each PFR.)			
PROFESSIONAL FUNDRAISE		100.0/	P) \$	•
P) TOTAL AMOUNT RAISEL	D BY PAID PROFESSIONAL FUNDRAISERS	100 %	Γ) Φ	0
Q) TOTAL FUNDRAISERS F	EFS AND EXPENSES	%	Q) \$	
() TOTAL TONDINABLIBITE	LLO AND EXI LINGLO	70	14,4	
R) NET RECEIVED BY THE (	CHARITY (P MINUS Q=R)	%	R) \$	
PROFESSIONAL FUNDRAIS				
S) TOTAL AMOUNT PAID TO	O PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$	0
	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:			
	I Z. GREENBERG, EXECUTIVE DIRECTOR		T) \$	187,981
	M. SIEGFRIED, DEVELOPMENT MANAGER		U) \$	95,000
	ARET A. VERGAMINI, PROGRAM MANAGER		V) \$	83,326
	GRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED CODE CATEGORIES	PED)	List o	on back side of instructions CODE
W) DESCRIPTION: COUR X) DESCRIPTION: Y) DESCRIPTION:	T ADVOCATES FOR JUVENILES		W)#	300
X) DESCRIPTION:	T VDAOCUTED TOW OUADWITTED		X) #	300
Y) DESCRIPTION:			Y) #	



Certified Public Accountants

December 19, 2023

Office of the Attorney General Charitable Trust and Solicitations Bureau Attn: Annual Report Section 100 West Randolph Street, 11th Floor Chicago, Illinois 60601-3175

RE: CASA Lake County, Inc., CO#01-25721732

Dear Sirs:

On behalf of our audit client, CASA Lake County, Inc., we are requesting an extension of the filing date of the fiscal year ended June 30, 2023 Form AG 990 for sixty (60) days to February 29, 2024. Since the audited financial statements are still in progress, our firm will require additional time to properly prepare the forms 990 and AG 990.

Thank you very much for your cooperation.

Very truly yours,

Cheryl K Rohlfs

cc: Ms. Terri Greenberg CASA Lake County

IF	THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS YES, ATTACH A DETAILED EXPLANATION:	-	YES	NO	
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		Х	
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?	2.		х	
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 PART 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	
	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?  IF "YES", ENTER  (I) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$	7.		Х	
8.		8.		Х	
9.		9.		Х	
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	0.		Х	
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:  CIBC, 120 S. LASALLE ST., CHICAGO, IL 60603				
	LIBERTYVILLE BANK & TRUST, 9801 W. HIGGINS RD BOX 32, ROSEMONT	,_]	L 6	0018	
	WELLS FARGO, 500 LAKE COOK RD., STE 30, DEERFIELD, IL 60015				
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: TERRI GREENBERG - (847) 383-6260				
● 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.

RF	SHIBE	TΛ	INCL	IIDE	FEES	DILE

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

DOUG MEYER		
PRESIDENT or TRUSTEE (PRINT NAME)	SIGNATURE	DATE
TREASURER or TRUSTEE (PRINT NAME)	SIGNATURE	DATE
		2/20/21

CHERYL K. ROHLFS, CPA
PREPARER (PRINT NAME)

SIGNATURE

DATE