PMT :	Attorney General KWAME RAOUL S Charitable Trust Bureau, 100 West F	tate of Illinois Randolph	S Revised 1/19
AMT	11th Floor, Chicago, Illinois 60	601	# 01003815 Check all items attached:
	Report for the Fiscal Period:	F	Copy of IRS Return
INIT	Beginning 07 , 01 , 2017	Payable to	Audited Financial StatementsCopy of Form IFC
	& Ending 06 / 30 / 2018	Charity -	3 \$15.00 Annual Report Filing Fee 3 \$100.00 Late Report Filing Fee
	eral ID # 30-2393343 MO DAY YR		MO DAY YR
Are	contributions to the organization tax deductible?	Date Organization	was created: 01 / 01 / 1966
	LEGAL NAME ERIKSON INSTITUTE	Year-end amounts	
	MAIL ADDRESS 451 NORTH LASALLE STREET	A) ASSETS	A) \$ 87,157,060
1	DDRESS	B) LIABILITIES	B) \$ 36,357,558
	P CODE CHICAGO, IL 60654-4510	C) NET ASSETS	C) \$ 50,799,502
_	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
'-	D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.		AMOUNT D) \$ 14,591,989
		29.30 %	
	E) GOVERNMENT GRANTS & MEMBERSHIP DUES		
	F) OTHER REVENUES	8.87 %	F) \$ 2,092,604
l	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D,E, & F)	100%	G) \$ 23.601,337
11.	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	78.41 %	H) \$ 20,204,905
	H) OPERATING CHARITABLE PROGRAM EXPENSE	%	1) \$
	I) EDUCATION PROGRAM SERVICE EXPENSE		
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	%	J) \$
	J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$0		
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS RECEIVED	3.20 %	к) \$ 825,468
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADDICAL)	81.61 %	L) \$ 21,030,373
	MAY 1 5 2019	15.02 %	M) \$ 3,870,299
	N) FUNDRAISING EXPENSE Attorney General	3.37 %	N) \$ 867,221
	O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M. C. MARTITABLE TRUST SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES	100 %	O) \$ 25,767,893
111.	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 %	P) \$ 0
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES	0 %	Q) \$ 0
	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R) PROFESSIONAL FUNDRAISING CONSULTANTS:	0 %	R) \$ 0
	 S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE Y 	EAD.	S) \$ 0
''	T) NAME, TITLE: GEOFFREY NAGLE, PRESIDENT	EAK.	T) \$ 410,703
	U) NAME, TITLE: JIE CHEN, SR VP & DEAN OF FACULTY		U) \$ 253,437
	V) NAME, TITLE: PATRICIA LAWSON, CFO		V) \$ 232,219
			List on back side of instructions
	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPEN	DED) CODE CATEGORIES	
	W) DESCRIPTION: INDEPENDENT INSTITUTION OF HIGHER LEARNING		W) # 003
	X) DESCRIPTION:		X) #
1	Y) DESCRIPTION:		Y) #

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:			NO			
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?1.		1			
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?		1			
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBTION 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.		1			
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.		1			
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		1			
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC) 6.		1			
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?		1			
	IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ 0 ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ 0 ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ 0 ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$ 0					
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES? 8.		1			
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION	63.4	3,10			
	SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY? 9.	(B)(R())				
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.		1			
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:					
	US BANK, 1365 S. WASHINGTON ST., NAPERVILLE, IL 60566, NORTHERN TRUST, 50 S. LASALTS ST. CHICAGO	Y	1606			
	BANK OF AMERICA, 5540 W. MADISON ST., CHICAGO, IL 60661	- '	עוניטו			
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: PATRICIA LAWSON 312-755-2250 Attorney (Gene	ral			
Charitable Trust ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS						
NDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT						

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.

3.) REPORTS THAT ARE LATE OR
INCOMPLETE ARE SUBJECT TO A

\$100.00 PENALTY.

GEOFFREY NAGLE, PRESIDENT PRESIDENT OF TRUSTEE (PRINT NAME)

Linguage 51

DATE

DIANNE WASIELESKI, TRUSTEE TREASURER or TRUSTEE (PRINT NAME)

SIGNATURE

DATE

DAVID DAWODU, ASSOC DIRECTO PREPARER (PRINT NAME)

SIGNATURE

DATE