For Office Use Only	ILLINOIS CHARITABLE ORGANIZATION AN	NIIAI REPOR	Form AG990-IL
PMT#	Attorney General LISA MADIGAN Stat		Revised 3/05
- 11-11-11-11-11-11-11-11-11-11-11-11-11	Charitable Trust Bureau, 100 West Ra	andolph	
AMT	11th Floor, Chicago, Illinois 606	01 CO	# 01039585
***	Report for the Fiscal Period:		Check all items attached: Copy of IRS Return
	Beginning 01 / 01 / 2010		Audited Financial Statements Copy of Form IFC
INIT		the Illinois Charity	\$15.00 Annual Report Filing Fee
Federal ID # 364472136	& Ending 12 / 31 / 2010	Bureau Fund 🔲	\$100.00 Late Report Filing Fee
Are contributions to the organ	was created: 09 / 10 / 2001		
LEGAL KEY Internation	onal Foundation	Year-end amounts	
NAME MAIL		A) ASSETS	A) \$ 28,122.03
ADDRESS 175 East Delaw	vare Place, #6605	B) LIABILITIES	B) \$
CITY, STATE Chicago Illino	C) NET ASSETS	C) \$ 28.122.03	
ZIP CODE			
I. SUMMARY OF ALL	REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CO	ONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	100 %	D) \$ 9,300
E) GOVERNMENT GRAN	ITS & MEMBERSHIP DUES	%	E) \$
F) OTHER REVENUES		%	F) \$
G) TOTAL REVENUE, INC	COME AND CONTRIBUTIONS RECEIVED (ADD D.E. & F)	100%	G) \$ 9,300
II. SUMMARY OF ALL	EXPENDITURES DURING THE YEAR:	CLIAMICARIVA SA	
H) OPERATING CHARITA	ABLE PROGRAM EXPENSE	99.5 %	н) \$ 7,440
I) EDUCATION PROGRA	M SERVICE EXPENSE	%	I) \$
J) TOTAL CHARITABLE	PROGRAM SERVICE EXPENSE (ADD H & I)	99.5 %	J) \$ 7.440
J ₁) JOINT COSTS ALLOC			
	CHARITABLE ORGANIZATIONS	%	K) \$
L) TOTAL CHARITABLI	E PROGRAM SERVICE EXPENDITURE (ADD J & K)	99.5 %	L) \$ 7,440
M) MANAGEMENT AND		0.5 %	M) \$ 25
N) FUNDRAISING EXPE	NSE	%	N) \$
Í	JRES THIS PERIOD (ADD L, M, & N)	100 %	0) \$ 7,465
III. SUMMARY OF ALL I	PAID FUNDRAISER AND CONSULTANT ACTIVITIES: eport of Individual Fundraising Campaign- Form IFC. One for each PFR.)		
PROFESSIONAL FUNDRAIS		100 %	P) \$
Q) TOTAL FUNDRAISERS		%	Q) \$
· ·	HE CHARITY (P MINUS Q=R)	%	R) \$
PROFESSIONAL FUNDRAL	ISING CONSULTANTS:		ABTOON TO SEE SECOND WAS TRUE TO THE SECOND A SECOND AS A SECOND ASSECT AS A SECOND AS A S
S) TOTAL AMOUNT PAID	S) \$		
IV. COMPENSATION TO			
T) NAME, TITLE:	T) \$		
U) NAME, TITLE:	U) \$		
V) NAME, TITLE:	V) \$		
V. CHARITABLE PROG	List on back side of instructions CODE		
W) DESCRIPTION: School	W) # 002		
X) DESCRIPTION:	X) #		
Y) DESCRIPTION:	Y) #		

IF 1	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DET	AILED EXPLANA	ATION:	YES	NO
1.	. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION	, FINE, PENALTY	OR JUDGMENT? 1.		~
2.	. HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, EVER BEEN CONVICTED BY ANY COURT OF ANY MIDSDEMEANO	OFFICER OR EM R INVOLVING TI	HE MISUSE OR		
	MISAPPROPRIATION OF FUNDS OR ANY FELONY?		2.		"
3	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUT	ION TO ANY OR	GANIZATION IN WHICH		
٥.	ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST	OR WAS IT A PAR	RTY TO ANY TRANSACTION		
	IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS	A MATERIAL FIN	ANCIAL INTEREST; OR DID		
	ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALU	E NOT REPORTED	D AS COMPENSATION? 3.	-	~
4	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK	IN WHICH ANY	OFFICER, DIRECTOR OR		
	TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHAR		4.		-
	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME O	F OR COMMING	I ED WITH THE		
5.	PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		5.		-
					_
6.	. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSION	AL FUNDRAISER	? (ATTACH FORM IFC)6.		200
7 a	a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITAT	ION. MAILING. A	DVERTISEMENT OR		
, u.	LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRA				"
7b.	b. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT O	OSTS \$;(ii) THE AMOUNT		
	ALLOCATED TO PROGRAM SERVICES \$; (iii) AND GENERAL \$; AND (iv) THE AMOUNT ALLO	CATED TO FUN	DRAISING \$		
	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURP				
8.	PURPOSES?	JSES OTHER THE	AN RESTRICTED 8.		
				NAME OF TAXABLE PARTY.	
9.	. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR			BITCH TOWN	1000
	SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGEN) Y ?	9.		-
10	D. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBA	CK BRIBE OR	ANY THEFT DEFALCATION	图画	
10.	MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZAT	IONAL FUNDS?			~
	THE WAY AND ADDRESS OF THE FINANCIAL INICITATIONS	VARIEDE THE OF	CANIZATION MAINTAINE ITE		
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS THREE LARGEST ACCOUNTS:	WHERE THE OF	RGANIZATION MAINTAINS 115		
	The Vanguard Group MM Fund, Valley Forge, PA 18482, Account #9	96048271			
	The valigania croup hims and, validy a cogs, and cores, recommend				
12	2. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: Dr. Ba	ıla Batavia, 312-3	337-4163		
11500000	ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUC				
JNDE	DER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND () THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES A	ERTIFY THAT I (WE) HAVE EXAMINED THIS ANN	JAL RE	POR
RUE	JE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENE	RAL FOR THE P	URPOSE OF HAVING THE PEO	PLE O	F TH
TAT	TE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZ	E AND AGREE T	O SUBMIT MYSELF AND THE R	EGIST	RAN
IERE	REBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.				
	Parla Patania	η,	0.	-1 . 1	١.
	Bala Batavia		Ratare SIGNATURE	>/ (DA	TE
E SU	SURE TO INCLUDE ALL FEES DUE: PRESIDENT OF TRUSTEE	PRINT NAME)	SIGNATURE	DA	II E

BE SURE TO INCLUDE ALL FELD 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.

Bala Batavia	Bu.	Batane	5/11/1
PRESIDENT or TRUST	EE (PRINT NAME)	SIGNATURE	DATE
Cynthianna Hahn	Cyrran	Hah_	5-1-11
TREASURER or TRUST	EE (PRINT NAME)	SIGNATURE	DATE
Bala Batavia	Bul	Mem	5/11
PREPAR	ER (PRINT NAME)	SIGNATURE	DATE

Attachment to Form AG990-IL

Explanation of why an IRS Return for KEY International Foundation was not filed for 2010.

Key International Foundation had total revenues of less than \$25,000 for the year 2010 and thus was not required to file an IRS Return.