ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT Attorney General LISA MADIGAN State of Illinois Charitable Trust Bureau, 100 West Randolph 11th Floor, Chicago, Illinois 60601	Form AG990-IL Revised 3/05 # 0100964 Check all items attached:
AMT 6 /400 Report for the Fiscal Period:	''
Beginning 01/01/2010 Make Checks Payable to the Illinois Y	Audited Financial Statements Copy of Form IFC \$15.00 Annual Report Filing Fee
& Ending 12/31/2010 Charity LA Bureau Fund	\$100.00 Late Report Filing Fee
Federal ID # 51-0168558 MO DAY YR	MO DAY YR
Are contributions to the organization tax deductible? X Yes No Date Organization was creat	ed: 01/27/1975
LEGAL Year-end NAME REACT INTERNATIONAL, INC A) ASSETS ASSETS	A) \$ 82,233.
MAIL ADDRESS 12114 BOYDTON PLANK ROAD, NO. C B) LIABILITIES	A) \$ 82,233. B) \$ 7,970.
CITY, STATE DINWIDDIE, VA	C) \$ 74,263.
ZIP CODE 23841	:
I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR: PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.) 11.276%	D) \$ 6,970. E) \$ 41,615.
E) GOVERNMENT GRANTS & MEMBERSHIP DUES F) OTHER REVENUES RECEIVED 67.322% 21.403%	E) \$ 41,615. F) \$ 13,230.
r) other neverous	1,4 13,230.
G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, MAY 8 - 201/2 100 % II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	G) \$ 61,815.
H) OPERATING CHARITABLE PROGRAM EXPENSE Attorney General Charitable Trust 2.039%	H) \$ 1,243.
I) EDUCATION PROGRAM SERVICE EXPENSE 85.389%	1) \$ 52,065.
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I) 87.428%	J) \$ 53,308.
J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):	
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	к) \$
L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K) 87.427%	L) \$ 53,308.
M) MANAGEMENT AND GENERAL EXPENSE 12.573%	M)\$ 7,666.
N) FUNDRAISING EXPENSE %	N) \$
0) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	0) \$ 60,974.
III. 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 %	Q) \$
R) NET RECEIVED BY THE CHARITY (P MINUS Q=R) %	R) \$
PROFESSIONAL FUNDRAISING CONSULTANTS:	
S)T OTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:	S) \$ 0.
T)N AME, TITLEDORA WILBANKS, OFFICE MANAGER	T) \$ 6,496.
U) NAME, TITLE:	U) \$ V) \$
V) NAME, TITLE: V CHAR ITABLE PROCEDAM DESCRIPTION, CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED)	1
V.CHAR ITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED)	List on back side of instructions CODE
W) DESCRIPTION: PROMOTE USE OF CB AND COMMPUTER EQUIPMENT X) DESCRIPTION: FOR EMERGENCIES Y) DESCRIPTION:	W)# 300
X) DESCRIPTION: FOR EMERGENCIES	X) # 300
Š Y) DESCRIPTION:	(Y)_#

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YESNO	
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 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.	X	
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	
7Ь	. 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.	Х	
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?	9.	X	
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:			
	BANK OF SOUTHSIDE VIRGINIA, 14003 BOYDTON PLANK RD, DINWIDDI	E, V	Α	
	CENTAURUS FIANCIAL INC., 2300 KATELLA AVENUE, SUITE 200, ANAHEIM, CA			
COLE REAL ESTATE INVESTMENTS, PO BOX 2199312, KANSAS CITY, MO				
12	12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: REACT INTERNATIONAL, INC (818)237-3015			
L				

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