## 990

Department of the Treasury Internal Revenue Service

A For the 2017 calendar year, or tax year beginning

## 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.

and ending

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

Open to Public Inspection

OMB No. 1545-0047

В	Check if applicable	C Name of organization		D Employer identif	ication number				
_	Addres								
F	]change ]Name	chicago Public Education Fund		26	1279013				
F	lchange lnitial		/aita						
F	return Final	200 Wast Adams	m/suite	E Telephone numb	er - 558 – <b>4</b> 500				
	return/ termin-	City or town, state or province, country, and ZIP or foreign postal code	<del></del>	G Gross receipts \$	19,858,751.				
Г	Amend			H(a) Is this a group					
F	lreturn Applica tion			for subordinate					
_	pendin	same as C above		H(b) Are all subordinates included? Yes No					
$\overline{T}$	Tax-exe	mpt status: X 501(c)(3) 501(c) ( ) ( (insert no.) 4947(a)(1) or □	527		a list. (see instructions)				
		e: ▶ www.TheFundChicago.org		H(c) Group exempti					
K	Form of	organization: X Corporation Trust Association Other	L Year o	of formation: 1999	<b>M</b> State of legal domicile: ${ t IL}$				
P		Summary							
Ģ	1 8	Briefly describe the organization's mission or most significant activities: $\overline{ ext{The }  ext{Fu}}$	nd i	s a nonprof	it				
Activities & Governance	9	organization that works to build a critical							
ern	2 (	Check this box   if the organization discontinued its operations or disposed	of more	than 25% of its net a					
Š	1 8	Number of voting members of the governing body (Part VI, line 1a)			26				
8	4 1	Number of independent voting members of the governing body (Part VI, line 1b)							
ties	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			27				
Εį	6	Total number of volunteers (estimate if necessary)			25				
Ac	7a ]	Total unrelated business revenue from Part VIII, column (C), line 12							
_	bi	Net unrelated business taxable income from Form 990-T, line 34	<u> </u>						
Revenue	, ,	Contributions and grants (Part VIII, line 1h)	-	Prior Year 3,302,398	Current Year 8,691,634.				
	8 (   9 F			0.	0,051,054.				
	10	Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		121,639	21,734.				
ď	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0,	0.				
	1	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,424,037	8,713,368.				
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		422,287					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.					
ģ		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,722,204	1,928,059.				
Expenses	16a F	Professional fundraising fees (Part IX. column (A). line 11e)		0.	0.				
xpe	.   b ⊺	Fotal fundraising expenses (Part IX, column (D), line 25)   269,975	•						
Ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,505,265	2,771,909.				
	18 7	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,649,756					
_	19 F	Revenue less expenses. Subtract line 18 from line 12		-1,225,719.	3,987,275.				
Net Assets or	8			ginning of Current Year	End of Year				
Sset	20	Total assets (Part X, line 16)		11,388,702					
et A	21	Total liabilities (Part X, line 26)		527,087					
	<u>2  22                                  </u>	Net assets or fund balances. Subtract line 21 from line 20		10,861,615.	14,886,842.				
_		Signature Block ties of perjury, I declare that I have examined this return, including accompanying schedules and	d etatome	ante and to the best of r	ay knowledge and belief it is				
	-	ities of perjury, i declare that i have examined this return, including accompanying scriedules and i, and complete. Declaration of preparer (other than officer) is based on all information of which i			ny kilowieuge and belief, it is				
uu	, 0011001	, and complete. Declaration of preparer (other than officer) is based on an information of which	ргорагог	nas any knowledge.					
Sig	nr	Signature of officer		Date					
He		► Heather Y. Anichini, President & CEO							
	.	Type or print name and title							
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN				
Pa		Thomas Bishop		if self-emplo					
Pre		Firm's name RSM US LLP		Firm's EIN ▶	42-0714325				
Us	e Only	Firm's address 1 S. WACKER DRIVE, STE 800							
_		CHICAGO, IL 60606		Phone no. 31	12-634-3400				
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No				

Total program service expenses ▶

# Form 990 (2017) Chicago Public Education Fund Part IV Checklist of Required Schedules

			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?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part 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	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	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	11b		Х
С	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	11c		Х
d	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	11d	37	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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	446		х
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		<del></del>
.0	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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	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
			000	

# Form 990 (2017) Chicago Public Education Fund Part IV Checklist of Required Schedules (continued)

			Yes	No
<b>2</b> 0a	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	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		37	
	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? If "Yes," complete		Х	
•	Schedule J	23	Λ	
24a	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	240		x
h	Schedule K. If "No", go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		21
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C		24c		
ч	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
<b>2</b> 00	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
_	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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
0.4	contributions? If "Yes," complete Schedule M	30		Α.
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
32	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u></u>		
-	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	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	L

732005 11-28-17

# Form 990 (2017) Chicago Public Education Fund Part V Statements Regarding Other IRS Filings and Tax Compliance

Series the number reported in Box 3 of Form 1086. Enter 0-if not applicable   1a   26   1b   0   0   0   0   0   0   0   0   0		Check if Schedule O contains a response or note to any line in this Part v		<u></u>			Ш		
Series the number of Forms W2G included in line 1s. Enter of. Find applicable   10   10   10   10   10   10   10   1						Yes	No		
b Id the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2	1a			26					
Capabiling winnings to piras winners?   1c   X				<u> </u>					
27 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with on within the year covered by this returns?  28 27 Note. If the sum of lines 1a, and 2a is greater than 250, you may be required to 6-file (see instructions)  39 Lift the canadization have unreated business gross income of \$1,000 or more during the year?  30 Lift the organization have unreated business gross income of \$1,000 or more during the year?  31 A ary time during the calendary avar, did the organization have an explanation in Schedule O  30 Lift Yes, *Inst if filed a form 990-T for this year? If *No,* to fire 3b, provide an explanation in Schedule O  30 Lift Yes, *Inst if filed a form 990-T for this year? If *No,* to fire 3b, provide an explanation in Schedule O  30 Lift Yes, *Inst if filed a form 990-T for this year? If *No,* to fire 3b, provide an explanation in Schedule O  31 If Yes,* the time name of the foreign country, *Person the country, *Person the name of the foreign country, *Person 114, Report of Foreign Bank and Financial Accounts (FBAR).  32 Was the organization a party to a prohibited that where the name of the foreign country, *Person 114, Report of Foreign Bank and Financial Accounts (FBAR).  33 V. *Yes,* to the line 5a or 5b, did the organization file Form 8886-T?  34 Did any taxable party notify the organization file Form 8886-T?  35 Did any taxable party notify the organization file Form 8886-T?  36 Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  35 If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  36 Unit the organization receive a payment in excess of \$5 made party sa a contribution and party for goods and services provided to the payor?  36 If Yes,* indicate the number of Forms 8282 filed during the year?  37 Did the organization selevation and party for goods and services	С					v			
filed for the calendary year ending with or within the year covered by this return     2a	_		 I	 I	1c	Λ			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  30 bid the organization have unrelated business give greater than 250, you may be required to e-file (see instructions)  30 bid the organization have unrelated business gross income of \$1,000 or more during the year?  31 bid 1 by 1 b	2a			27					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a					Oh	y			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  bif "Yes," has it filed a Form 9901 for this year? if "No." to line 3b, provide an explanation in Schodule O  4a 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)?  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was 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?  6b If "Yes," it did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c If "Yes," did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible?  7a Organizations that may receive deductible contributions under section 170(c).  8b If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor?  7b If "Yes," did the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6b If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7c X  6f If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7b If If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7c If If the organization received a contribution of qualified intellectual property, did the organization file a Form 1089-C?  7c If the organiz	D				20	22			
b if "Yes," has it filed a Form 990-T for this year? #"No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly over, a financial account in a foreign country. ▶  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was 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?  5b Wes, "I will the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions.  6b Ves, "I did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions.  7 Organizations that many receive deductible contributions under section 170(c).  8 Uffer the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that many receive deductible contributions under section 170(c).  8 Uffer organization include with every solicitation and parity for goods and services provided to the payor?  7 The organization manual contribution of the value of the goods or services provided?  7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  8 If "Yes," indicate the number of Forms 8282 filed during the year  9 If the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 The X Y Y Yes, "Indicate the number of Forms 8282 filed during the year?  9 Sponsoring organization manual and provide the payor payor premiums on a personal benefit contra	20				20		x		
4a At any time during the calendary 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 accounts?  5 einstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6 Does the organization include with every solicitation and party to goods and services provided to the aparty were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 mate party as a contribution and party for goods and services provided to the payor?  7 To Did the organization receive apayment in excess of \$75 mate party as a contribution and party for goods and services provided to the payor?  7 To Did the organization receive apayment in excess of \$75 mate party as a contribution and party for goods and services provided to the payor?  7 To Did the organization received a payment in excess of \$75 mate party as a contribution and party for goods and services provided to the payor?  7 To Did the organization received a payment in excess of \$75 mate party as a contribution of payor and the good of the payor and the payor									
financial account in a foreign country (such as a bank account, securities account, or other financial account;?  b If "Yes," either the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAFI).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAFI).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAFI).  See instructions a party to a prohibited tax sheller transaction at any time during the tax year?  5a					SD				
b 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).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  So Uses the organization in the development of the organization file form 8886-T?  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?  So If "Yes," indicate the any receive deductible contributions under section 170(c).  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?  To Organizations that may receive deductible contributions under section 170(c).  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?  To Organization receive apayment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  To Use the organization received apayment in excess of \$75 made partly as a contribution of partly for goods and services provided to the payor?  To Use for \$70 may are a services provided?  To Use for \$70 may are a services provided?  To Use for \$70 may are a services provided?  To Use for \$70 may are a services provided?  To Use for \$70 may are a services provided to the payor?  To Use for \$70 may are a services provided to the payor?  To Use for \$70 may are a services provided to the payor?  To Use for services provided to the payor provided to the p	та			•	<b>4</b> a		x		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c I**Yes,** to line 5a or 5b, did the organization file Form 8886-T?  6a 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?  6b I**Yes,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8 If *Yes,** did the organization notify the donor of the value of the goods or services provided 7 to file Form 8282?  8 If *Yes,** indicate the organization notify the donor of the value of the goods or services provided?  7 If Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  8 If *Yes,** indicate the number of Forms 8282 filed during the year  9 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If X  9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  9 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  9 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distribution sunder section 4966?  9 Sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization have access business holdings at any time during the year?  10 Gross income from members or	b		aoooc		ı.u				
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a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b 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  c Enter the amount of reserves on hand  13b  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
Note. See the instructions for additional information the organization must report on Schedule O.  b 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  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b	13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
b 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  c Enter the amount of reserves on hand  13c  14a  X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b	а				13a				
organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b									
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b		Ι.	ı					
14aDid the organization receive any payments for indoor tanning services during the tax year?14aXbIf "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O14b									
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O14b				<u> </u>	4.6		v		
	d	if res, has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	е О			990	(2017\		

Form 990 (2017)

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X					
Sec	tion A. Governing Body and Management										
	and the developing body and management				Yes	No					
12	Enter the number of voting members of the governing body at the end of the tax year	1a	2	6	103	110					
ıu	If there are material differences in voting rights among members of the governing body, or if the governing		_	Ť							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
h		1h	2	5							
b	Enter the number of voting members included in line 1a, above, who are independent	1b		4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					Х					
_	officer, director, trustee, or key employee?			2	+	1					
3	Did the organization delegate control over management duties customarily performed by or under the		=			X					
	of officers, directors, or trustees, or key employees to a management company or other person?				-	X					
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?										
5	Did the organization become aware during the year of a significant diversion of the organization's ass				+	X					
6	Did the organization have members or stockholders?			6	+	<u> </u>					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a			1_		<b>₩</b>					
	more members of the governing body?			7a	-	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockho	olders, or			,,					
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				177						
а	The governing body?			8a	X	-					
b	Each committee with authority to act on behalf of the governing body?			8b	X	-					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					,,					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)								
					Yes	No v					
	Did the organization have local chapters, branches, or affiliates?			10a	-	X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl										
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	77	_					
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y beto	re filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				77						
12a				12a	+						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y				1,7						
	in Schedule O how this was done			12c		<u> </u>					
13	Did the organization have a written whistleblower policy?				X	_					
14	Did the organization have a written document retention and destruction policy?			14	X						
15	Did the process for determining compensation of the following persons include a review and approve		dependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				١						
	The organization's CEO, Executive Director, or top management official										
b	Other officers or key employees of the organization			15b	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 arrange					١					
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	-								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	nizatio	า'ร								
_	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶IL										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Sect	on 501(c)(3)s only	) availa	ble						
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website X Upon request Other (explain		,								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy, a	nd fina	ncial						
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	d records: ►								
	Heather Y. Anichini - 312-558-4500										
	200 West Adams, Ste. 2150, Chicago, IL 60606-5230										

#### Form 990 (2017)

### Form 990 (2017) Chicago Public Education Fund 36-42 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

- 1a 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 (Ď), (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.

Licket this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	l	111126		C)	прсі	isai	(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one					one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week (list any	_	officer and a director/trustee)		from the	from related organizations	other compensation			
	hours for	Individual trustee or director				- - - -		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			en sate		(W-2/1099-MISC)	,	organization
	organizations	al trus	ınal tr		loyee	o mb				and related
	below	Jividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Heather Y. Anichini	line) 40.00	Ĕ	ü	₽	-S	훈늄	요			
President & CEO	40.00	Х		X				307,549.	0.	41,999.
(2) Brian P. Simmons	4.00			<u> </u>				301,343.	0.	41,000
Chair	1.00	х		х				0.	0.	0.
(3) Brent Gledhill	4.00			-				0.0		
Chair Elect		х		x				0.	0.	0.
(4) Kenneth C. Griffin	3.00							-		
Vice Chair		Х		х				0.	0.	0.
(5) Helen H. Zell	3.00									
Vice Chair		Х		Х				0.	0.	0.
(6) Jill M. Garling	3.00									
Treasurer		Х		Х				0.	0.	0.
(7) Barbara Malott Kizziah	3.00							_	_	_
Secretary		Х		Х				0.	0.	0.
(8) Laura Bilicic	1.00								•	•
Director	1 00	Х						0.	0.	0.
(9) Kevin Callis	1.00	,,							0	0
Director	1 00	Х						0.	0.	0.
(10) Gillian Darlow	1.00	Х						0.	0.	^
Director	1.00	^						0.	0.	0.
(11) Kassie Davis Director	1.00	х						0.	0.	0.
(12) Jim Frank	1.00							0.	0.	
Director	1.00	х						0.	0.	0.
(13) John Garabedian	1.00							0.		
Director		х						0.	0.	0.
(14) Austan Goolsbee	1.00							-		
Director		Х						0.	0.	0.
(15) Mellody Hobson	1.00									
Director		Х						0.	0.	0.
(16) Timothy Knowles	1.00									
Director		Х						0.	0.	0.
(17) Stuart E. Lucas	1.00								_	
Director		X						0.	0.	0.

Form 990 (2017) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (A) (D) (F) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any the organizations compensation ndividual trustee or director hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations )fficer line) 1.00 (18) Siddharth Mehta 0. 0. 0. Director (19) Anthony Miller 1.00 X 0 0. 0. Director 1.00 (20) Judy Pomeranz X 0. 0. 0. Director  $1.\overline{00}$ (21) Deborah Ouazzo X 0 . 0. Director 0. 1.00 (22) Jana R. Schreuder 0. 0. Х Ο. 1.00 (23) Penny Bender Sebring Х 0. 0. 0. Director (24) Eric Smith 1.00 X 0. 0. 0. Director (25) Elizabeth Swanson 1.00 X 0. 0. Director 1.00 (26) David J. Vitale Director 0. 0 0. 307,549. 0. 1b Sub-total 430,876. 75,108. 0. c Total from continuation sheets to Part VII, Section A 117,107. 738,425. d Total (add lines 1b and 1c)

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual Х 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person .

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
Convergence Consulting Group, 2502 N.	Principal quality	
	database development	654,322.
	Executive training	
2001 Sheridan Road, Evanston, IL 60208	for top principals	437,100.
Sensible Innovation, Inc	Summer Design	
672 S. Everett Street, Lakewood, CO 80226	Program Support	155,216.
National SAM Innovation Project	Summer Design	
672 S. Everett Street, Lakewood, CO 80226	Program Support	154,920.
Teachers College, Columbia University	Principal leadership	
525 West 120th Street, New York, NY 10027	development	124,000.
2 Total number of independent contractors (including but not limited to those liste		
\$100,000 of compensation from the organization > 5		

See Part VII, Section A Continuation sheets

Form 990 (2017)

4

Form 990 Chicago	Public 1	₫dι	108	at:	LOI	<u>1</u>	ťu!	nd	36-427	9013
Part VII Section A. Officers, Directors, Tro	ustees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)			((	C)			(D)	(E)	(F)
Name and title	Average	(0)		Pos			.11	Reportable	Reportable	Estimated
	hours per	(C	check a		tnat	app	ily)	compensation from	compensation from related	amount of other
	week					/ee		the	organizations	compensation
	(list any	ector				oldme		organization	(W-2/1099-MISC)	from the
	hours for	or dir	99			sated 6		(W-2/1099-MISC)		organization
	related organizations	Individual trustee or director	Institutional trustee		ee/	Highest compensated employee				and related organizations
	below	idual	tution	-ie	Key employee	est co	er.			<b>9-</b>
	line)	Indi	Insti	Officer	Key	High	Former			
(27) Chaula Gupta	40.00									
VP, Program Investments					Х			178,688.	0.	35,382.
(28) Nelson Gerew	40.00	-						126 600	_	F 000
Director, Data, Policy & Reports	40.00					Х		136,600.	0.	7,088.
(29) Tiffany Gholston Dir., Org. Planning & Development	40.00	$\mathbf{I}$				х		115,588.	0.	32,638.
bir., org. Framming & Development						^		113,300.	0.	32,030.
		1								
		-								
		1								
		1								
		-								
		1								
		1								
		-								
		1								
			$\vdash$		$\vdash$					
		1								
	·							400 075		
Total to Part VII, Section A, line 1c								430,876.		75,108.

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			·	·	<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
ar our		Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events						
	d	Related organizations	1d					
imi	е	Government grants (contribut	ions) <b>1e</b>					
tion	f	All other contributions, gifts, gran	ts, and					
ibu		similar amounts not included above	ve 1f	8,691,634.				
d O	g	Noncash contributions included in lines	1a-1f: \$					
ခဲ့ မ	h	Total. Add lines 1a-1f		<b>&gt;</b>	8,691,634.			
				Business Code				
<u>e</u>	2 a							
er i	b							
n S	С							
Je v	d							
Program Service Revenue	е							
۵ ا	f	All other program service reve						
-	g							
	3	Investment income (including						
		other similar amounts)			152,177.			152,177.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	11,014,940	•				
	b	Less: cost or other basis	11 145 202					
	_	and sales expenses	120 442	•				
	C	Gain or (loss)	-130,443	·1	-130,443.			-130,443.
ne		Net gain or (loss)Gross income from fundraising		<b>&gt;</b>	-130,443.			-130,443.
_		including \$	of					
Other Rever		contributions reported on line						
e.		Part IV, line 18						
₽		Less: direct expenses						
		Net income or (loss) from fund		<b>_</b>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam	-	······				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sale						
	44	Miscellaneous Revenu		Business Code				
	11 a							
	b							
	c	All other revenue						
		All other revenue						
	12	<b>Total.</b> Add lines 11a-11d <b>Total revenue.</b> See instructions.			8,713,368.	0.	0.	21,734.
	14	i viai i vivilav. Occ ilibil activilo.		🖊 l	5,715,500.	ı "•I	٠.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	nlete all columns. All oth	ner organizations must co	mplete column (A)	
0001	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	13,125.	13,125.		
2	Grants and other assistance to domestic	20,220	23,2231		
2	individuals. See Part IV, line 22	13,000.	13,000.		
3	Grants and other assistance to foreign	20,000	23,000		
J	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,	563,618.	391,687.	91,317.	80,614.
^	trustees, and key employees	303,010.	391,007.	91,311.	00,014.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,085,315.	867,948.	127,329.	90,038.
7	Other salaries and wages	т,000,010.	001,340.	141,343.	30,030.
8	Pension plan accruals and contributions (include	34,716.	28,057.	3,948.	2,711.
•	section 401(k) and 403(b) employer contributions)	143,377.	111,662.	18,064.	13,651.
9	Other employee benefits	101,033.	77,383.	13,308.	10,342.
10	Payroll taxes	101,000.	11,303.	13,300.	10,344.
11	Fees for services (non-employees):				
	Management	2,915.		2,915.	
	Legal	22,777.		22,777.	
	Accounting Lobbying	22,7774		22////	
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees	19,640.		19,640.	
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	2,106,728.	2,037,981.	68,747.	
12	Advertising and promotion	220,660.	34,253.	154,164.	32,243.
13	Office expenses	71,666.	42,189.	23,287.	6,190.
14	Information technology	51,462.	39,114.	6,308.	6,040.
15	Royalties				
16	Occupancy	193,785.	147,286.	23,755.	22,744.
17	Travel	19,933.	6,521.	13,334.	78.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,538.	7,970.	2,568.	
20	Interest				
21	Payments to affiliates			_	
22	Depreciation, depletion, and amortization	45,364.	34,479.	5,561.	5,324.
23	Insurance	6,441.		6,441.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount. list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,726,093.	3,852,655.	603,463.	269,975.
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)				

Form 990 (2017)
Part X | Balance Sheet

Pa	πx	Balance Sheet					
		Check if Schedule O contains a response or not	te to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,764,499.	1	1,923,074.
	2	Savings and temporary cash investments			1,037,008.	2	835,796.
	3	Pledges and grants receivable, net			3,905,406.	3	6,888,529.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated en	nployees. Complete			
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	า 4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net			7		
Ř	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	42,905.	9	37,163.		
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	586,600.			
	b	Less: accumulated depreciation		486,494.	46,684.	10c	100,106.
	11	Investments - publicly traded securities	4,551,469.	11	5,626,078.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			40,731.	15	50,409.
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	34)	11,388,702.	16	15,461,155.
	17	Accounts payable and accrued expenses			481,849.	17	421,869.
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and former					
≣		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	3 17-24	. Complete Part X of	4E 220		150 444
		Schedule D			45,238.	25	152,444. 574,313.
	26	Total liabilities. Add lines 17 through 25			527,087.	26	3/4,313.
		Organizations that follow SFAS 117 (ASC 958		ck here ▶ 🔼 and			
ces		complete lines 27 through 29, and lines 33 an			6,409,709.		7 515 914
Fund Balances	27	Unrestricted net assets			4,451,906.	27	7,515,814. 7,371,028.
Ва	28	Temporarily restricted net assets		Γ	4,431,300.	28	1,311,020.
pur	29			N -11-1 N		29	
		Organizations that do not follow SFAS 117 (A	SC 958	B), cneck nere ▶ ☐			
S O		and complete lines 30 through 34.			00		
set	30	Capital stock or trust principal, or current funds				30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed		F		31	
Net Set	32	Retained earnings, endowment, accumulated in			10,861,615.	32	14,886,842.
_	33	Total liabilities and not assets (fund balances			11,388,702.	33	15,461,155.
	34	Total liabilities and net assets/fund balances			11,300,704.	34	T2,401,133.

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	8,71						
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,72						
3	Revenue less expenses. Subtract line 2 from line 1	3	3,98						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5	Net unrealized gains (losses) on investments	5	3	7,9	52.				
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 in Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	14,88	6,8	42.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				Ш				
				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	Ο.							
2a	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	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,							
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit							
	Act and OMB Circular A-133?		За		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

#### **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

Open to Public Inspection

**Employer identification number** Name of the organization Chicago Public Education Fund 36-4279013 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

### 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.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	3,881,540.	8,765,254.	2,380,320.	3,302,398.	8,691,634.	27,021,146.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	3,881,540.	8,765,254.	2,380,320.	3,302,398.	8,691,634.	27,021,146.	
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)						12,636,129.	
_6	Public support. Subtract line 5 from line 4.						14,385,017.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
7	Amounts from line 4	3,881,540.	8,765,254.	2,380,320.	3,302,398.	8,691,634.	27,021,146.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	12,324.	7,763.	181,017.	188,642.	152,177.	541,923.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	<b>Total support.</b> Add lines 7 through 10						27,563,069.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)		
_	organization, check this box and stor	here					<u></u>	
	ction C. Computation of Publ						50.40	
14	Public support percentage for 2017 (					14	52.19 %	
15	Public support percentage from 2016					15	45.25 %	
16a	33 1/3% support test - 2017. If the	-						
	<b>stop here.</b> The organization qualifies							
b	<b>33 1/3% support test - 2016.</b> If the o	-						
	and stop here. The organization qual							
17a	10% -facts-and-circumstances tes	ū					•	
	and if the organization meets the "fac							
	meets the "facts-and-circumstances"							
b	10% -facts-and-circumstances tes	-						
	more, and if the organization meets the		•		•			
	organization meets the "facts-and-circ							
18	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

#### 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.)

Se	ction A. Public Support	siew, piedee cem	proto r urt m.j				
	endar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and		, ,	. ,		, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	1					
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7:	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ı	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						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
<u>Se</u>	ction B. Total Support						
	endar year (or fiscal year beginning in) ►	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10:	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital				1		
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		<u> </u>		<u> </u>
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	zation,
<u></u>	check this box and stop here ction C. Computation of Publi						<b>P</b>
				l (f))		15	
	Public support percentage for 2017 (I Public support percentage from 2016					16	<u>%</u> %
	ction D. Computation of Inves					10	70
17						17	%
	Investment income percentage from 2					18	<del></del>
	a 33 1/3% support tests - 2017. If the						
.50	more than 33 1/3%, check this box a						
	33 1/3% support tests - 2016. If the						
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization			•	. ,	ŭ	

T ..

#### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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 **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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 **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **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** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c 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 Part VI 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.
- 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 Part VI, 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 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).
- **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 **Part VI.**
- **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 Part VI.
- c 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 Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **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.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	<b></b> -		
	5b 5c		
	30		
	6		
	7		
	8		
	9a		
	9b		
	0-		
	9c		
	40-		
	10a		
	10b		
n 9	90 or 99	0-EZ	2017
		-,	

Pa	rt IV Supporting Organizations (continued)			
	(= = : / M / M × M /		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
<u> </u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	Was a said to state a said to be discounted as a discounted at the state of the state of the state of		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
000	tion B. All Type in oupporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	tructions	<u> </u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	OL.		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
d	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Jd		
5	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
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	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

ıaı	Type in item i anotheriany integrated ese	(a)(s) Supporting Orga	anizations (continued)	
	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
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	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

**2017** 

Name of the organization Employer identification number

Chicago Public Education Fund 36-4279013

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)( $3$ ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	)-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	, ,	covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \\$							
Caution	: An organization th	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),					

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

#### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

2017

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below. 
➤ Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	tions: Complete Part III			
Name of organization	tions. Complete Fart III.		Emp	oloyer identification number
Chicago	Public Educatio	n Fund		36-4279013
Part I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527	organization.
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campa</li> </ol>	ures		<b>&gt;</b> :	\$
Part I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization und	der section 4955	<b>&gt;</b>	\$
2 Enter the amount of any excise tax	incurred by organization manage	ers under section 495	5	\$
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
<b>b</b> If "Yes," describe in Part IV.		==		. Va
	ganization is exempt und		<u> </u>	
<ol> <li>Enter the amount directly expended</li> <li>Enter the amount of the filing organ exempt function activities</li> <li>Total exempt function expenditures line 17b</li> <li>Did the filing organization file Form</li> <li>Enter the names, addresses and er made payments. For each organization contributions received that were presented and the filing organization files.</li> </ol>	s. Add lines 1 and 2. Enter here a 1120-POL for this year?nployer identification number (El tion listed, enter the amount paid	her organizations for s and on Form 1120-POL by of all section 527 p d from the filing organ	ection 527   olitical organizations to whization's funds. Also enter the	Yes No ch the filing organization the amount of political
political action committee (PAC). If  (a) Name	additional space is needed, prov	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e) Total			
2a Lobbying nontaxable amount	303,822.	370,375.	384,813.	420,371.	1,479,381.			
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					2,219,072.			
c Total lobbying expenditures								
d Grassroots nontaxable amount	75,956.	92,594.	96,203.	105,093.	369,846.			
e Grassroots ceiling amount (150% of line 2d, column (e))					554,769.			
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2017

### Schedule C (Form 990 or 990-EZ) 2017 Chicago Public Education Fund 36-427901 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		)	(b)	
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504(-)	<u></u>		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 5				
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members			t III-A, lir	ne 3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
_	expenses for which the section 527(f) tax was paid).	Jai			
а	Current year		2a		
	Carryover from last year				
C					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			0		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list)· Part II-	A lines 1	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	r noty, i ait ii	, iii 100 T	una 2 (000	
	socione), and that it b, into 1.7 too, complete the part of any additional information.				

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization

Chicago Public Education Fund

**Employer identification number** 36-4279013

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
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 donor advisors in v	vriting that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pa			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cel	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserv	ation easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	-	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
Do	conservation easements.  † III   Organizations Maintaining Collections of	Art Historical Transuras or (	Other Similar Assets
Га	Complete if the organization answered "Yes" on Form		Other Sillilai Assets.
	If the organization elected, as permitted under SFAS 116 (AS		ment and belonge sheet works of ort
Id	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ	·	ance of public service, provide, in Fart Alli,
h	If the organization elected, as permitted under SFAS 116 (AS		at and balance about works of art. historical
D	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	rucation, or research in furtherance of p	ablic service, provide the following amounts
			▶ Φ
	(i) Revenue included on Form 990, Part VIII, line 1		
0	(ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical trea	acures, or other similar assets for financia	
2	the following amounts required to be reported under SFAS 1		ai gairi, provide
•	Revenue included on Form 990, Part VIII, line 1	, ,	<b>&gt;</b> \$
d	Assets included in Form 990, Part X		

Par	rt III Organizations Maintaining C	collections of Art, H	listorical Tr	easures, d	or Other	Similar A	ssets(continued)
3	Using the organization's acquisition, accessi	on, and other records, ch	eck any of the	following tha	t are a sig	nificant use o	of its collection items
	(check all that apply):						
а	Public exhibition	d 🗆	$\square$ Loan or exc	hange progra	ams		
b	Scholarly research	е 🗆	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain how	w they further t	he organizati	on's exem	pt purpose ir	n Part XIII.
5	During the year, did the organization solicit o	r receive donations of art	, historical trea	sures, or oth	er similar a	ssets	
	to be sold to raise funds rather than to be ma	aintained as part of the o	rganization's c	ollection?			Yes No
Par	rt IV Escrow and Custodial Arran	gements. Complete if	the organization	n answered '	'Yes" on F	orm 990, Pai	rt IV, line 9, or
	reported an amount on Form 990, Par						
1a	Is the organization an agent, trustee, custodi	an or other intermediary	for contribution	ns or other as	sets not in	cluded	
	on Form 990, Part X?						L Yes L No
b	If "Yes," explain the arrangement in Part XIII	and complete the followi	ng table:				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
	Did the organization include an amount on Fo				-	/?	L Yes
	If "Yes," explain the arrangement in Part XIII.						
Par	rt V Endowment Funds. Complete in			1			1
		(a) Current year (b	) Prior year	(c) Two year	s back (d	<b>)</b> Three years	back (e) Four years back
1a	Beginning of year balance						
b							
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the curr		e 1g, column (a	a)) held as:			
а	· · · · · · · · · · · · · · · · · · ·	%					
b		%					
С	· · · · · · · · · · · · · · · · · · ·	%					
_	The percentages on lines 2a, 2b, and 2c sho				16 11		
Зa	Are there endowment funds not in the posse	ssion of the organization	that are neid a	ina aaministe	erea for the	organization	1.
	by:						Yes No
	(i) unrelated organizations						
<b>b</b>	(ii) related organizations  If "Yes" on line 3a(ii), are the related organiza	tions listed as required a					
4	Describe in Part XIII the intended uses of the						30
_	rt VI Land, Buildings, and Equipm		ini iunus.				
	Complete if the organization answered		t IV line 11a 9	See Form 990	) Part X lii	ne 10	
	Description of property	(a) Cost or other		or other		umulated	(d) Book value
	bescription of property	basis (investment)		(other)		eciation	(d) Dook value
12	Land	<u> </u>		/	2.5/51		
			+				<del>                                     </del>
	Leasehold improvements		2.2	4,916.	18	36,567.	38,349.
	Equipment			1,684.		99,927.	
	Other		+	_,		,	327.370
	II. Add lines 1a through 1e (Column (d) must e		olumn (R) line :	10c.)			100,106.

Schedule D (Form 990) 2017 Chicago Pub	lic Education	Fund	36-4279013 Page
Part VII Investments - Other Securities.			-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part	X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat	tion: 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)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuat	tion: Cost or end-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part	X. line 15.
	Description		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		<b>&gt;</b>
Part X Other Liabilities.			
Complete if the organization answered "Yes"			O, Part X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes		150 111	
(2) Deferred Rent		152,444.	
(3)			
(4)			
(5)			
(6)			

(7) (8)

152,444.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ightharpoons2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Part XI	Recond	ciliation	of Revenue	per Audited	<b>Financial</b>	<b>Statements</b>	With	Revenue	per Ret	urn.

Pai	TEXT Reconciliation of Revenue per Audited Financial State	ements with	i Revenue per R	eturi	1.
	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	9,432,643.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	37,952.		
b			700,963.		
С					
d					
е	Add lines 2a through 2d			2e	738,915.
3	Subtract line 2e from line 1			3	8,693,728.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,640.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	19,640.
5				5	8,713,368.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	ements Wit	h Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total expenses and losses per audited financial statements			1	5,407,416.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	700,963.		
b	Prior year adjustments	2b			
С		1 - 1			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	700,963.
3	Subtract line 2e from line 1			3	4,706,453.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,640.		

#### Part XIII Supplemental Information.

**b** Other (Describe in Part XIII.)

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

c Add lines 4a and 4b

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 4; Part X, 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, Line 2:

The Fund is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code and applicable state law. In addition, The Fund qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

The accounting standard on accounting for uncertainty in income taxes addressed the determination of whether tax benefits claimed on a tax return should be recorded in the financial statements. Under this guidance, The Fund may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be

19,640.

4,726,093.

4c

sustained on examination by taxing authorities, based on the technical
merits of the position. Examples of tax positions include the tax-exempt
status of The Fund and the various positions related to the potential
sources of unrelated business taxable income. The tax benefits recognized
in the financial statement from such a position are measured based on the
largest benefit that has a greater than 50 percent likelihood of being
realized upon ultimate settlement. The Fund does not believe that there
are any unrecognized tax benefits or tax liabilities that should be
recorded for the reporting periods presented in these financial
statements.
The Fund is generally no longer subject to examination by the Internal
Revenue Service for years before 2014.

#### SCHEDULE I (Form 990)

**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

2017

Open to Public

Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

hicago Public Education Fund

Employer identification number

Cnicago P	ubitc Eau	cation Fund	1				36-42/9013
Part I General Information on Grants a	and Assistance					<u> </u>	
1 Does the organization maintain records	to substantiate the	amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	t funds in the Unite	d States.			
Part II Grants and Other Assistance to	Domestic Organia	zations and Domest	ic Governments. C	complete if the org	anization answered "\	es" on Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II can	be duplicated if addit	tional space is need	ded.			
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 grant or assistance
Chicago Public Schools							
42 W. Madison Street							Professional Learning
Chicago, IL 60602	36-6005821		13,125.	0.			Community Stipends.
2 Enter total number of section 501(c)(3) a	and government or	ganizations listed in th	ne line 1 table		1	•	<b>1.</b>
3 Enter total number of other organization							0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2017)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part 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 non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
rants To Principals	12	13,000.	0.		

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:

The Fund makes investments in grantees pursuant to benchmark schedules, and grant dollars are disbursed to grantees only upon documented evidence that grantees are achieving or working toward achieving the most critical factors for their programs to be successful. Acceptable achievements are jointly agreed upon at the time The Fund commits to the grant, and staff members work with the grantee to monitor and document progress against these shared goals. At any point during the grant period, The Fund may withhold the associated payment if a particular benchmark is not met or can

Part IV	Suppleme	ntal Informa	tion					
decide	to disc	continue	fund	ding if am	ple progres	s is not	being made	in a
timely	manner	against	the	specified	benchmark	goals.		

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Chicago Public Education Fund

Employer identification number 36-4279013

D	irt I Questions Regarding Compensation	7,501		
F	inti   Questions negaturily Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant  X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?			Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
~	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
5	contingent on the net earnings of:			
а	The organization?	6a		х
		6b		X
D	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	OD		
7				
′	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	х	
8	not described on lines 5 and 6? If "Yes," describe in Part III			
0		0		Х
0	* * * * * * * * * * * * * * * * * * * *	. 8		-22
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	. 9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Heather Y. Anichini	(i)	237,549.	70,000.	0.	12,600.	29,399.	349,548.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.		0.
(2) Chaula Gupta	(i)	163,388.	15,300.	0.	7,412.	27,970.		0.
VP, Program Investments	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Part I, Line 7:						
Employees may receive a year-end bonus computed as a percentage of their						
base salary. For the President & CEO, the Executive Committee determines						
the final amount to be paid. For all other staff, the CEO determines the						
final amount to be paid.						

#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Chicago Public Education Fund

**Employer identification number** 36-4279013

Form 990, Part I, Line 1, Description of Organization Mission: schools in Chicago by investing in talented principals and enabling educator teams to reinvent classroom learning in ways that dramatically improve student outcomes. The Fund is a catalyst for accelerating student learning in all of Chicago's public schools, and has been a longstanding leader in identifying and scaling what works for teachers and principals, as well as the students they serve. Please visit our website at www.thefundchicago.org to learn more about The Fund.

Form 990, Part III, Line 4a, Program Service Accomplishments: leadership capacity. Thirty high-performing principals joined the fourth cohort of The Fellowship in 2017, committing to lead in Chicago through at least 2020. In addition, The Fund partnered with the Cahn Fellows Program at Teachers College, Columbia University, to offer opportunities to seven Chicago principals. The Cahn Fellows Program is a national program that recognizes top principals and develops their capacity as leaders.

In addition to these retention efforts, more than 150 principals received in-role supports through The Fund's programs and investments. This includes 52 principals who engaged in coaching opportunities with University of Illinois (UIC) and National Louis University (NLU), and 45 principals who participated in one of seven principal-led Professional Learning Communities (PLCs). Each PLC is facilitated by a high-performing principal recruited from previous cohorts of Fund programming.

Name of the organization

Chicago Public Education Fund

Employer identification number 36-4279013

The Fund also worked to inform its own and the city's efforts to improve principal quality by performing regular engagement surveys, exit surveys and focus groups with public school principals in Chicago. The Fund's annual engagement survey yielded a 78 percent response rate and informed organizational strategy and programming. For example, with this data, The Fund published its 2017 Progress Report. The report shared key facts about new principals in Chicago during the 2017-18 school year.

In 2017, The Fund also supported The Chicago Principal Partnership (The Partnership), a citywide effort to provide actionable principal quality data to stakeholders and ensure that principal quality remains an enduring priority in Chicago's school improvement strategy. In 2017,

The Partnership launched a powerful Data Warehouse that produces regular reports on key principal quality metrics for stakeholders, and published some results from The Fund's annual survey.

The Fund's activities in 2017 helped recruit, support and retain high-performing principals in more than 300 of Chicago's public schools.

Form 990, Part III, Line 4c, Program Service Accomplishments:

educators citywide through our first annual Principal Appreciation

Campaign, which involved social media outreach, videos sharing

exceptional principal stories, ads on local transit routes and a

celebration event attended by more than 100 principals and leaders from across the city.

Name of the organization
Chicago Public Education Fund

Employer identification number 36-4279013

Form 990, Part VI, Section B, line 11b:

The President and CEO reviews the completed Form 990, and then it is

emailed in final form to the Governance, Operations, Finance, and Audit

Committee, as well as to the entire Board of Directors, for their review

and comments prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

Officers, directors, and key employees complete a questionnaire to disclose annually any business transactions or relationships they or a family member may have had with The Fund or any of its officers, directors, or key employees. Potential conflicts noted in the responses are passed along to the President & CEO for review and, when necessary, referred to the Executive Committee for their consideration.

In addition to the required annual conflict of interest questionnaire, The Fund's Board of Directors' policy covering conflicts of interest provides that Directors and staff have the responsibility to immediately disclose potential conflicts of interest and refrain from influencing other directors or staff in relation to those matters. If a potential or actual conflict arises, directors also have the responsibility to recuse themselves at an appropriate time. Directors, staff and their immediate family members cannot realize any direct or indirect personal financial benefit from a Fund investment.

Form 990, Part VI, Section B, Line 15:

The Executive Committee of the Board is responsible for reviewing and approving the compensation package for the President and CEO. The

Name of the organization  Chicago Public Education Fund	Employer identification number 36-4279013
determination of the appropriate level of compensation is	ncluded a review of
compensation levels for the equivalent positions at comp	arable
organizations, through review of Form 990s and survey da	ta produced by
national and regional industry associations.	
For other staff salaries, a review of compensation level	s at comparable
organizations was conducted by the CEO, and her recommen	dations for salary
adjustments were reviewed by the Governance, Operations,	Finance and Audit
Committee in conjunction with the annual budget planning	process.
The process for determining the compensation is document	ed.
Form 990, Part VI, Section C, Line 19:	
Financial statements for recent fiscal years are availab	le to the public on
The Fund's web site. Also, the governing documents, conf	lict of interest
policy and financial statements are available upon reque	st for the same
period of disclosure as set forth in IRC Section 6104(d)	•
Form 990, Part IX, Line 11g, Other Fees:	
Consultants:	
Program service expenses	0.
Management and general expenses	64,875.
Fundraising expenses	0.
Total expenses	64,875.
	•
Clerical Temps:	
Program service expenses	0.
Management and general expenses	3,872.
732212 09-07-17 Sch	edule O (Form 990 or 990-EZ) (2017

Name of the organization  Chicago Public Education Fund	Employer identification number 36-4279013
Fundraising expenses	0.
Total expenses	3,872.
Program Service Fees:	
Program service expenses	2,037,981.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	2,037,981.
Total Other Fees on Form 990, Part IX, line 11g, Col A	2,106,728.