** PUBLIC DISCLOSURE COPY **
Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

AF	or the	and 2022 calendar year, or tax year beginning	a enaing		
B c	heck if pplicable	C Name of organization		D Employer identifi	cation number
	Addres	Chicago Public Education Fund			
	Name change	Doing business as		36-42790	13
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	Final return/	200 West Adams	1175	312-558-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	38,389,569.
	Ameno	Chicago, 11 00000-3230		H(a) Is this a group re	
	Application pending	F Name and address of principal officer: Heactiet 1. All Cities	i	for subordinates	? Yes X No
		same as C above		H(b) Are all subordinates in	ncluded? Yes No
<u> </u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions
	Vebsit			H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 1999 N	M State of legal domicile: ${ t IL}$
Pa	rt I	Summary			
Ð		Briefly describe the organization's mission or most significant activities: The			lic schools
Activities & Governance		by investing in the talented educators wh			
ern	l	Check this box if the organization discontinued its operations or dispo	sed of more	1	
ŏ	ı			3	27
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b)			26
es		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			41
Νİ	I	Total number of volunteers (estimate if necessary)			27
Act	l			<u>7a</u>	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0 . Current Year
		Contributions and avanta (Dart VIII line 11)		5,360,177.	24,987,900.
ne	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		-38,710.	-300,138.
Вè	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,321,467.	24,687,762.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		609,001.	711,499.
	l			0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,355,038.	2,735,269.
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	61,142.
ben	b h	Total fundraising expenses (Part IX, column (D), line 25) 299, 7	90.	<u> </u>	<u> </u>
Ε̈́	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,584,598.	2,387,407.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,548,637.	5,895,317.
	l	Revenue less expenses. Subtract line 18 from line 12		-227,170.	18,792,445.
or		•		ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		21,727,022.	40,657,031.
ASS	21	Total liabilities (Part X, line 26)		1,071,238.	1,468,698.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		20,655,784.	39,188,333.
Pa	ırt II	Signature Block			
Unde	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedule	es and stateme	ents, and to the best of my	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparer	has any knowledge.	
		Circulum of allians		Dete	
Sigr		Signature of officer		Date	
Her	е	Heather Y. Anichini, President & CEO			
		Type or print name and title		Date Check F	PTIN
		Print/Type preparer's name Preparer's signature		if L	_
Paid		Rebekuh Eley		self-employ	•
	arer	Firm's name RSM US LLP		Firm's EIN 4	2-0714325
use	Only	Firm's address 30 South Wacker Dr, Suite 3300		31	2_634_2400
	. Ale - '-	Chicago, IL 60606-3392		Phone no. 3 1	2-634-3400
May	tne IF	S discuss this return with the preparer shown above? See instructions			X Yes No

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Га	Clatement of Frogram Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	
	The Chicago Public Education Fund (The Fund) is a nonprofit	
	organization that improves public schools in Chicago by investing in	
	the talented educators who lead them. We are a catalyst for	
	accelerating student learning and a long-standing leader in	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	ю
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X N	ю
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	1 071 050 500 000	,)
	Programmatic Supports	_ ′
		_
	The Fund supports principals and aspiring principals through quality	_
	programming, actionable data, and public reporting. Fund programs are	_
	open to all educators leading in Chicago's public schools. We serve	_
	leaders in schools across the city, representing a diversity of school	_
	types, including elementary, high school, charter, and district.	_
	oppost including clemonoully inigh someon, charter, and abstract	_
	Our two largest programs were Professional Learning Communities and the	_
	Summer Design Program. These programs accounted for 167 (53%) and 77	_
	(24%) of our participant slots, respectively. Both programs aimed to	_
	meet principal and aspiring principal needs and were regularly featured	_
4h	1 0 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
4b	(Code:) (Expenses \$1,865,552. including grants of \$124,500.) (Revenue \$0. Systems, Data, and Policies	_)
	byscems, Data, and Tolicles	_
	The Fund has invested in educator talent in Chicago for over 20 years.	_
	In the last decade, our focus has narrowed on school leaders. Chicago's	_
	school leaders shoulder tremendous responsibilities, and they require	_
	the autonomy to act on the needs of their communities. As such, The	_
	Fund's policy work is dedicated to building a culture of strong local	_
	leadership in Chicago.	_
	readership in chicago:	_
	We deeply value our partnerships with other organizations in our	_
	systems-level work. In 2022, we worked most closely with our partners	_
	at Chicago Public Schools. Our annual Principal Engagement Survey and	_
4 -	(Code:) (Expenses \$	_
4C	Educator Engagement	_)
	Educator Engagement	_
	In 2022 The Fund also connected educations to the breader research	
	In 2022, The Fund also connected educators to the broader research community, to our work, and to one another. We celebrated their	
	innovation and leadership citywide.	_
	T. W	
	In May, we shared a report from the Chicago Consortium on School	_
	Research about the successful practices used to support English	_
	Language Learners in Chicago. We also facilitated a learning discussion	_
	with the authors, Chicago Public Schools leadership, and local	
	educators.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 4,681,513.	

Form 990 (2022) 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_	37	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		, v
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			, v
_	Schedule D, Part III	8		X
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?		37	
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
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,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l		, v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	_
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	3		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	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		X
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13				X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		 ^
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
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. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_ <i>''</i> _		
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	_ _		<u> </u>
	,	19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
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	

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Pai	rt IV Checklist of Required Schedules (continued)		V	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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			
	Schedule J	23	X	
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			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	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			
	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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			l
	"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			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	74			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			10	X	

Form 990 (2022) Chicago Public Education Fund

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		_	Yes	No No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	41	17	
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			177
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		+
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		$+^{\Delta}$
D	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).	-		
E.		5a		Х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
	If "Yes" to line 5a or 5b, did 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			1
oa	any contributions that were not tax deductible as charitable contributions?	6a		X
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b	,	
7	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 pay	or? 7 a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	70	:	X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0	? 7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
_	Gross income from members or shareholders 11a	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
19a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12:		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13:	a .	
	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14	а	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	141)	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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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 on 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			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This doction b regardle information about policies has required by the internal historiae doctor)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	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			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.	•		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	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 books and records			
	Heather Y. Anichini - 312-558-4500			
	200 West Adams, 1175, Chicago, IL 60606-5230			

Form 990 (2022) Chicago Public Education Fund 36-4 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 (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r										
(A)	(B))) Pos	C) ition	,		(D)	(E)	(F)
Name and title	Average		not c	heck i	more	than c		Reportable	Reportable	Estimated
	hours per					s both r/trust		compensation	compensation	amount of
	week (list any	tor						from the	from related organizations	other compensation
	hours for	direct				p		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related
	below	Individual trustee or director	Institutional trustee	Je.	Key employee	est c	ner			organizations
	line)	Indi	Insti	Officer	Key	Highest compensated employee	Former			
(1) Heather Y. Anichini	55.00	1							_	
President & CEO		Х		Х				388,007.	0.	45,564.
(2) Nelson Gerew	40.00									
Director, Data & Policy						X		202,500.	0.	8,080.
(3) Bridget Lee	40.00	1								
Director, Engagement & Operations						X		136,588.	0.	12,476.
(4) Anne Bringewatt	40.00									
Director, Data	1.0.00					Х		111,119.	0.	6,192.
(5) Esther Lee	40.00	-						100 005		6 200
Sr. Manager, Educator Supports	4 00					Х		100,025.	0.	6,322.
(6) Brent Gledhill	4.00								•	•
Chair	1 00	Х		Х				0.	0.	0.
(7) Kenneth C. Griffin	1.00	. ,		37					0	0
Vice Chair until 7/1/22	2 00	Х		Х				0.	0.	0.
(8) Helen H. Zell	2.00	Х		v				0.	0.	^
Vice Chair (9) Jill M. Garling	4.00	Δ		Х				0.	0.	0.
Treasurer	4.00	Х		х				0.	0.	0.
(10) Barbara Malott Kizziah	2.00	Λ		Δ				0.	0.	<u> </u>
Secretary	2.00	Х		х				0.	0.	0.
(11) Ellen Alberding	1.00	Λ		_				0.	0.	<u></u>
Director	1.00	Х						0.	0.	0.
(12) Gillian Darlow	1.00	77						0.	0.	<u></u>
Director	1.00	х						0.	0.	0.
(13) John Dugenske	1.00							•	•	
Director	1100	х						0.	0.	0.
(14) Kimberly Evans	1.00									
Director		х						0.	0.	0.
(15) Jim Frank	1.00								•	
Director		Х						0.	0.	0.
(16) John Garabedian	1.00							-	-	
Director		Х						0.	0.	0.
(17) Austan Goolsbee	1.00								-	_
Director		Х						0.	0.	0.
<u></u>		•	_	_	_	•	_			- 000 (cccs)

Form **990** (2022) 232007 12-13-22

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (F) (A) (D) (E) Position Average Reportable Name and title 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 ndividual trustee or director organizations compensation the hours for organization (W-2/1099-MISC/ from the Highest compensated Imployee related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations and related ey employee 1099-NEC) below organizations line) (18) Christina Herzog 1.00 0. Director X 0. 0. (19) Kelly Howe 1.00 X 0. 0. 0. Director 1.00 (20) Stuart Lucas Х 0. 0. Director 0. (21) Karen May 1.00 Director X 0. 0. 0. (22) Siddharth Mehta 1.00 Х 0. 0. 0. Director 1.00 (23) Anthony Miller Director Х 0. 0. 0. (24) Auyana Orr 1.00 Х 0. 0. 0. Director (25) Judy Pomeranz 1.00 Director 0. 0. 0. (26) Jesse Ruiz 1.00 Director 0. 0. 0. 938,239. 0. 78,634. 1b Subtotal 0. c Total from continuation sheets to Part VII, Section A 0. 938,239. 0. 78.634. d Total (add lines 1b and 1c)

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 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

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 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	(C) Compensation
The Chicago Public Schools	Principal	·
	Professional Develop	432,000.
Accelerate Institute, 833 W Jackson Blvd,	Leadership Bridge	
8th Floor, Chicago , IL 60607	Program	140,970.
Leadership and Design	Summer Design	
206 Brooke Acres Drive, Los Gatos, CA 95032	Program	137,379.
New Leaders, Inc., 30 W 26th St, 10th	Leadership Bridge	
Floor, New York, NY 10010	Program	119,000.
Cahn Fellow Programs, 3540 E Broad St, Ste		
120, Mansfield, TX 76063	Cahn Fellows Program	115,375.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 5		

5

(A) Name and title Average hours per week (list any hours for related organizations below line) (27) Andrea Saenz Director (28) Penny Bender Sebring Director (29) Brian P. Simmons Director (30) Eric Smith Director (31) David J. Vitale Director (32) D'Andrea J. Weaver (A) (A) (B) (C) (D) Reportable compensation from the companization from the organizations (W-2/1099-MISC) (B) (C) (D) (E) (R) (F) (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	Form 990 Chicago I	Public E	ldu	са	ti	.on	F	un	.d	36-427	9013
(A) Name and title Average hours per week (ist arry hours for related organizations below line) (27) Andrea Saenz (27) Andrea Saenz (28) Fenny Bender Sebring 1.00 Director (38) Fenny Bender Sebring 1.00 Director (39) Eric Smith 1.00 Director (31) David J. Vitale 1.00 Director (31) David J. Vitale 1.00 Director (31) David J. Vitale 1.00 Director (32) Iris Marke J. Weaver 1.00 Director (31) David J. Vitale 1.00 Director (32) Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver (36) Eric Smith 1.00 Director (37) Marke J. Weaver 1.00 Director (38) Weaver 1.00 Director (39) Weaver 1.00 Director (31) Weaver 1.00 Director (31) Weaver 1.00 Director (32) Weaver 1.00 Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver 1.00 Director (36) Weaver 1.00 Director (37) Weaver 1.00 Director (38) Weaver 1.00 Director (39) Weaver 1.00 Director (31) Weaver 1.00 Director (31) Weaver 1.00 Director (32) Weaver 1.00 Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver 1.00 Director (36) Weaver 1.00 Director (37) Weaver 1.00 Director (38) Weaver 1.00 Director (39) Weaver 1.00 Director (39) Weaver 1.00 Director (39) Weaver 1.00 Director (31) Weaver 1.00 Director (31) Weaver 1.00 Director (32) Weaver 1.00 Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver 1.00 Director (36) Weaver 1.00 Director (37) Weaver 1.00 Director (38) Weaver 1.00 Director (39) Weaver 1.00 Director (39) Weaver 1.00 Director (31) Weaver 1.00 Director (31) Weaver 1.00 Director (32) Weaver 1.00 Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver 1.00 Director (36) Weaver 1.00 Director (37) Weaver 1.00 Director (38) Weaver 1.00 Director (39) Weaver 1.00 Director (31) Weaver 1.00 Director (32) Weaver 1.00 Director (33) Weaver 1.00 Director (34) Weaver 1.00 Director (35) Weaver 1.00 Director (47) Weaver 1.00 Director (58) Weaver 1.00 Direc	Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	ees (continued)	
Name and title		1								' '	(F)
Nours for related organizations Carbock all that apply) Compensation from related organizations Carbock (list any hours for related organizations Carbock (list any hours for related organizations Carbock (line) Ca							1		I .		
Week (list arry hours for related organizations related relate		1	(cl					ly)			amount of
1.00 X		week (list any	lirector				l employee		the organization	organizations	compensation from the
Director		related organizations below	Individual trustee or c	Institutional trustee	Officer	Key employee	Highest compensatec	Former	(W-2/1099-WIGC)		
1.00 X		1.00								0	•
Director		1 00	X	_			_		0.	0.	0.
1.00 Director		1.00	x						0.	0.	0.
Director		1,00								•	•
1.00 X 0. 0. 0. 0 0 0 0 0 0 0			х						0.	0.	0.
Director		1.00									
Director			Х						0.	0.	0.
(32) D'Andre J. Weaver 1.00 X 0. 0. 0. 0. 0.		1.00	v						_	α	0.
X		1.00	Λ						0.	0.	0.
Total to Part VII, Section A, line 1c	Director		Х						0.	0.	0.
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
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Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
	Total to Part VII, Section A, line 1c	·····									

		Check if Schedule O	ontains a	response	or note to any lin	e in this Part VIII			
					_	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							iunction revenue	business revenue	sections 512 - 514
တ္ တ	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b			1b					
ဇ် မြ		Fundraising events		1c					
fts,		Related organizations		1d					
ig ig		Government grants (contri		1e					
Sin		All other contributions, gifts,							
e E	'	· -			24,987,900.				
έĐ		similar amounts not included		1f	90,655.				
	g		ines 1a-1f	1g \$	50,055.	24,987,900.			
O a	<u>n</u>	Total. Add lines 1a-1f			Business Code	24,507,500.			
	_				Business Code				
<u>ic</u>	2 a								
er v	b								
n S	С								
a Sev	d								
Program Service Revenue	е								
₫	f	All other program service							
	g	Total. Add lines 2a-2f							
	3	Investment income (includ	ling divide	ends, intere	st, and				
		other similar amounts)			344,943.			344,943.	
	4	Income from investment of	f tax-exer	npt bond p	roceeds				
	5	Royalties							
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b		6b						
	С	Rental income or (loss)	6c						
	d	Net rental income or (loss)							
		Gross amount from sales of		Securities	(ii) Other				
		assets other than inventory	7a 13,	056,726.					
	h	Less: cost or other basis		·					
ō	-	and sales expenses	7h 13.	701,807.					
enc	c	Gain or (loss)		645,081.					
Revenue	4	Net gain or (loss)			•	-645,081.			-645,081.
푸		Gross income from fundraising				, , , , , ,			
)ther	υu		•						
0		contributions reported on							
		Part IV, line 18	•						
	h	Less: direct expenses							
		Net income or (loss) from t							
		Gross income from gamin							
	σd								
		Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from							
	10 a	Gross sales of inventory, le							
		and allowances							
		Less: cost of goods sold			•				
\rightarrow	С	Net income or (loss) from	sales of ir	ventory					
<u>s</u>					Business Code				
e e	11 a								
Miscellaneous Revenue	b								
Sel Sev	С								
Mis		All other revenue							
\perp	е	Total. Add lines 11a-11d							
	12	Total revenue. See instruction	ns			24,687,762.	0.	0.	-300,138.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B)
Program service
expenses (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 454,000. 454,000. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 257,499. 257,499. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 432,947. 281,415. 64,942. 86,590. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 1,925,925. 1,657,584. 185,673. 82,668. 7 Pension plan accruals and contributions (include 40,716. 36,356. 3,591. 769. section 401(k) and 403(b) employer contributions) 18,427. 153,254. 182,063. 10,382. Other employee benefits 9 153,618. 126,660. 16,223. 10,735. 10 Payroll taxes 11 Fees for services (nonemployees): Management 6,164. 6,164. Legal 27,023. 27,023. Accounting 69,926. 69,926. Lobbying 61,142. 61,142. Professional fundraising services. See Part IV, line 17 33,532. 33,532. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 1,500,348. 1,177,919. 322,429. column (A), amount, list line 11g expenses on Sch O.) 66,142. 37,111. 10,481. 18,550. Advertising and promotion 12 110,429. 60,286. 47,145. 2,998. 13 Office expenses 90,659. 73,516. 12,093. 5,050. Information technology 14 Royalties 15 157,315. 25,877. 10,807. 193,999. 16 Occupancy 42,672. 26,002. 16,670. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 56,573. 35,560. 21,013. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 181,321. 147,036. 24,186. 10,099. Depreciation, depletion, and amortization 22 8,619. 8,619. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) All other expenses 5,895,317. 4,681,513. 914,014. 299,790. Total functional expenses. Add lines 1 through 24e 25 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 (2022)
Part X Balance Sheet

Par	LA	Balance Sneet					
		Check if Schedule O contains a response or note	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,368,103.	1	2,479,760.	
	2	Savings and temporary cash investments			43,996.	2	1,178,000.
	3	Pledges and grants receivable, net			5,152,411.	3	18,064,802.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			126,163.	9	94,293.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a 10b				
	b	1	891,907.		1,077,246.		
	11	Investments - publicly traded securities		14,030,609.	11	17,602,992.	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets	112 022	14	150 000		
	15	Other assets. See Part IV, line 11	113,833.	15	159,938.		
	16	Total assets. Add lines 1 through 15 (must equa	21,727,022.	16	40,657,031.		
	17	Accounts payable and accrued expenses	113,421.	17	161,478.		
	18	Grants payable		18			
	19	Deferred revenue				19 20	
	20 21	Tax-exempt bond liabilities			0.	21	175,000.
	22	Loans and other payables to any current or form			<u> </u>	21	175,000.
Liabilities	22	trustee, key employee, creator or founder, subst					
bilit		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par					
		parties, and other liabilities not included on lines					
		of Schedule D	,		957,817.	25	1,132,220.
	26	=			1,071,238.	26	1,468,698.
		Organizations that follow FASB ASC 958, che					
ses		and complete lines 27, 28, 32, and 33.					
and	27	Net assets without donor restrictions		14,206,197.	27	20,605,259.	
Ba	28	Net assets with donor restrictions	6,449,587.	28	18,583,074.		
ınd		Organizations that do not follow FASB ASC 99	58, che	eck here			
Ţ.		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq				30	
t As	31	Retained earnings, endowment, accumulated in				31	
Rei	32	Total net assets or fund balances			20,655,784.	32	39,188,333.
	33	Total liabilities and net assets/fund balances			21,727,022.	33	40,657,031.

	1 990 (2022) Chicago Public Education Fund	<u> 36</u> -	4279013	<u>P</u> a	ıge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	24,68	7,7	62.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,89	5,3	17.
3	Revenue less expenses. Subtract line 2 from line 1	3	18,79	2,4	45.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,65	5,7	84.
5	Net unrealized gains (losses) on investments	5	-25	8,2	96.
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 on Schedule O)	9	_	1,6	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	39,18	8,3	33.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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 on 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	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 separate	basis,			
	consolidated basis, or both:				
	X 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	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 on Sche	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				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	it		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

Name of the organization

Chicago Public Education Fund 36-4279013 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having 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. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) 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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	11278121.	6056803.	2583791.	5360177.	24987900.	50266792.
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	11278121.	6056803.	2583791.	5360177.	24987900.	50266792.
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)						29340707.
	Public support. Subtract line 5 from line 4.						20926085.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018 11278121.	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total 50266792.
	Amounts from line 4	117/9171	6056803.	2583791.	5360177.	2498/900.	50200/92.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	120 620	215 001	260 025	255 660	244 042	1225057
_	and income from similar sources	138,620.	215,991.	209,033.	255,668.	344,943.	1225057.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		3,120.				3,120.
44	assets (Explain in Part VI.) Total support. Add lines 7 through 10		3,120.				51494969.
	Gross receipts from related activities,	ote (see instructio	ne)			12	D1474707•
	First 5 years. If the Form 990 is for the		,	ourth or fifth tax v			
.0	organization, check this box and sto						
Sec	etion C. Computation of Publi						
	Public support percentage for 2022 (l			olumn (f))		14	40.64 %
	Public support percentage from 2021					15	55.20 %
	33 1/3% support test - 2022. If the					ore, check this bo	
	stop here. The organization qualifies as a publicly supported organization X						
b	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qualifies as a publicly supported organization						
17a	7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances to	est. The organization	n qualifies as a pu	blicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, ched	ck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s

Schedule A (Form 990) 2022 Chicago Public Education Fund 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.)

Sed	ction A. Public Support	siow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, 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						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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		
3c		
4a		
4b		
4c		
5a		
Ja		
5b		
5c		
6		
7		
8		
9a		
Oh		
9b		
9c		
30		
10a		
iva		
10b		

Pa	TIV Supporting Organizations (continued)			
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		—
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			1
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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			1
	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,			
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			l
	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			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			l
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			1
	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			l
	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 on line 2, above, did the organization's supported organizations have a			1
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)).		
a	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 governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	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 on line 2a, above, 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	01		
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а		0.		
	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ob		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	لــــــا	

1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	on 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	on 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):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990) 2022

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2022 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

T dit Vi	Par line Sed	t IV, S 1; Pa ction D	ection A, I	lines 1, 2 ion D, lir	2, 3b, 3c, 4 nes 2 and 3	1b, 4c, 5 3; Part l'	5a, 6, 9a, 9b, 9c, 11a, 11 V, Section E, lines 1c, 2	b, and 1 a, 2b, 3a	1c; Part IV, , and 3b; Pa	Part II, line 1/a or 1/b; Part III, line 12; Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V, art for any additional information.
Sched	ule	Α,	Part	II,	Line	10,	Explanation	for	Other	Income:
Misce	11aı	neoı	us Ind	come						
			: \$							
2015	AilO	uiic	<u>. у</u>	J, I.	20.					

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2022

C. gamzater type (check one).						
Filers of:	Section:					
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
-	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a) contributor, du	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one ring 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; -EZ, line 1. Complete Parts I and II.					
contributor, dui	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
year, contributi is checked, ent purpose. Don't	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, 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 General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$					
	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization Employer identification number

Chicago Public Education Fund

36-4279013

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 7,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$5,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$4,500,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	\$ 3,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$3,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Chicago Public Education Fund

36-4279013

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Chicago Public Education Fund

36-4279013

Part II			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization **Employer identification number** Chicago Public Education Fund 36-4279013 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047

2022

Open to Public Inspection

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

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	ions. Complete Fait III.		Em	oloyer identification number
G	Public Education	n Fund		36-4279013
Part I-A Complete if the org				
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures gn activities			
	anization is exempt und		•	
1 Enter the amount of any excise tax	incurred by the organization un	der section 4955		\$
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 4955		\$
3 If the organization incurred a section				
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV. Part I-C Complete if the org	anization is exempt und	ler section 501(c)	except section 501/	c)/3)
-			-	
1 Enter the amount directly expended				a
2 Enter the amount of the filing organ exempt function activities		•		Ф
3 Total exempt function expenditures				\$
line 17b				\$
4 Did the filing organization file Form				Yes No
5 Enter the names, addresses and en				
made payments. For each organiza				
contributions received that were pro-	omptly and directly delivered to	a separate political org	anization, such as a separa	te segregated fund or a
political action committee (PAC). If	additional space is needed, pro	vide information in Part	IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds. If none, enter -0-	contributions received and promptly and directly
			lulius. Il florie, effici -0	delivered to a separate
				political organization.
				If none, enter -0
	İ	I	I	i

Sche	edule C (Form 990) 2022 Chica	go Public Education Fund	36-4	279013 Page 2		
Pa	rt II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and fi	iled Form 5768 (ele	ction under		
	Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). Check if the filing organization checked box A and "limited control" provisions apply.					
		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)	430.			
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	69,496.			
С	c Total lobbying expenditures (add lines 1a and 1b) 69,926.					
d	Other exempt purpose expenditures		5,730,717.			
е	Total exempt purpose expenditures (add line	s 1c and 1d)	5,800,643.			
f	Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	440,032.			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				

 Over \$1,500,000 but not over \$17,000,000
 \$225,000 plus 5% of the excess over \$1,500,000.

 Over \$17,000,000
 \$1,000,000.

 g Grassroots nontaxable amount (enter 25% of line 1f)
 110,008.

20% of the amount on line 1e.

h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0
0 •

0 •

\$100,000 plus 15% of the excess over \$500,000.

\$175,000 plus 10% of the excess over \$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

__ Yes ___ No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total		
2a Lobbying nontaxable amount	402,819.	384,861.	425,852.	440,032.	1,653,564.		
b Lobbying ceiling amount (150% of line 2a, column(e))					2,480,346.		
c Total lobbying expenditures			46,217.	69,926.	116,143.		
d Grassroots nontaxable amount	100,705.	96,215.	106,463.	110,008.	413,391.		
e Grassroots ceiling amount (150% of line 2d, column (e))					620,087.		
f Grassroots lobbying expenditures			3,043.	430.	3,473.		

Schedule C (Form 990) 2022

Not over \$500,000

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Schedule C (Form 990) 2022 Chicago Public Education Fund 36-42790 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)).

Eor o	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes No		Amo	
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:				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C					
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?				
g	Direct contest with to sixtheters the installer				
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
ï	Other activities?				
i	Total. Add lines 1c through 1i				
2 a	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				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(5)), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
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		3		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	No" OR (I	b) Part II		3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).		0-		
	Current year				
C	Carryover from last year				
3			_		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditures next year?	iiticai	4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information		-		
 Prov	ide 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 ar	nd 2 (See	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information. nedule C, Part II-A	,,	,	(
Fui	nd team members held meetings with Illinois General .	Assemb	ly mer	mbers	and
<u>th</u>	eir staff members to discuss legislation that might	impact	princ	cipal	
qua	ality in Chicago's public schools. The Fund also emp	loyed a	a legi	islati	ve
	nsultant to provide services such as education-relat				

material development, and outreach.

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 Inspection

Name of the organization

Chicago Public Education Fund

Employer identification number 36-4279013

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(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 w	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
_	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		1 1
b			
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·	
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, h	nandling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?	-	
9	In Part XIII, describe how the organization reports conservation		
Ū	balance sheet, and include, if applicable, the text of the footne	•	
	organization's accounting for conservation easements.		ionic that goodhood the
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in for	urtherance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these iten	ns.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(m) 4		•
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

	Tim Organizations Maintaining O	Oncodiono oi 74	t, motoriour me	acarco, or	Other C	iiiiiiai 7100	ceonti	<u>nuea)</u>	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the f	ollowing that	make signi	ficant use of	its		
	collection items (check all that apply):								
а	Public exhibition	d	I Loan or exc	hange prograi	m				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further th	e organization	n's exempt	purpose in F	Part XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other	similar ass	sets			
_	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "\	Yes" on Fo	rm 990, Part	IV, line 9, or		
	reported an amount on Form 990, Par	•							
1a	Is the organization an agent, trustee, custodi		•						-
	on Form 990, Part X?						Yes	X	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
							Amour	it	
	Beginning balance					1c			
	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f	77		
	Did the organization include an amount on Fo				-		X Yes		∐ No
	If "Yes," explain the arrangement in Part XIII.							X	
Par	T V Endowment Funds. Complete i					Three weers b	00k (a) Four	r 1/00r0	- hook
		(a) Current year	(b) Prior year	(c) Two years	s back (d)	Three years b	ack (e) Fou	r years	Dack
	Beginning of year balance	1,003,623.	1 000 000						
b	Contributions	1,000,000.	1,000,000.						
С	Net investment earnings, gains, and losses	-240,351.	3,623.						
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses	1 =50 0=0	1 000 600						
g	End of year balance	1,763,272.							
2	Provide the estimated percentage of the curr) held as:					
а	Board designated or quasi-endowment	100	_%						
b	Permanent endowment0000	%							
С		%							
_	The percentages on lines 2a, 2b, and 2c show	•							
За	Are there endowment funds not in the posse	ssion of the organiza	ition that are held ar	nd administere	ed for the			Vaa	T No
	organization by:						- w	Yes	No
	(i) Unrelated organizations								X
	(ii) Related organizations						3a(ii)		 ^
b	If "Yes" on line 3a(ii), are the related organiza						3b		<u> </u>
Dai	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment funds.						
ı aı	Complete if the organization answere) Part IV line 11a S	00 Form 000	Dart V line	. 10			
	· · · · · · · · · · · · · · · · · · ·	1					400		
	Description of property	(a) Cost or o basis (investr		or other (other)		ımulated ciation	(d) Boo	k valu	ıe
1a	Land								
	Buildings	I							
	Leasehold improvements		1,15	4,777.		6,590.			87.
	Equipment	I	39	4,351.	24	5,292.	14	9,0	59.
	Other								
	l. Add lines 1a through 1e. <i>(Column (d) must</i> e		X. column (B). line 1	Oc.)			1,07	$7, \bar{2}$	46.

Schedule D (Form 990) 2022 Chicago Pub. Part VII Investments - Other Securities.	lic Education	Fund 36	-4279013 Page 3
Complete if the organization answered "Yes" of	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 valuation: Cost or end	d-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" of		-	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Tatal (Col. (b) must equal Form 000 Port V col. (D) line 12.)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			1 120 000
(2) Operating Lease Liability			1,132,220.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			1 122 224
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		1,132,220.

2. 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) 2022 Chicago Public Education Fund		42/9013 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
	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	25,663,270.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -258,296.		
b	Donated services and use of facilities 2b 1,267,336.		
С	Recoveries of prior year grants	_	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	1,009,040.
3	Subtract line 2e from line 1	3	24,654,230.
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 33,532.	_	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	33,532.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	24,687,762.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	7,127,521.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 1,267,336.	_	
b	/ /	_	
С	Other losses 2c -1,600.	_	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	1,265,736.
3	Subtract line 2e from line 1	3	5,861,785.
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 33,532.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	33,532.
5	Total expenses Add lines 2 and 40 (This word a worl Farm 200 Part I line 10)	5	5 895 317.

Part XIII Supplemental Information.

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 IV, line 2b:

During 2022, The Fund entered into a fiscal agency agreement with several funders. As of December 31, 2022, \$175,000 had been received. Under this agreement, and at the direction of the funders, The Fund will disburse up to the full amount received to complete a project related to the governance of Chicago's public schools. The project was not complete at the close of the fiscal year, so the full \$175,000 remains on the 2022 balance sheet.

Part V, line 4:

The Fund established a board-designated Endowment Fund to support the operations and initiatives of The Fund and its programmatic activity over the long term.

Part X, Line 2:

The Fund is generally 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)(A)(1)(vi) 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 states that 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 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 statements from such a position are measured based on the largest benefit that has a greater than 50% 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.

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization Employer identification number Chicago Public Education Fund 36-4279013 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events С In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Campbell & Co - 1 E Wacker Yes No Dr, Ste 2100, Chicago, IL Х Fundraising 0 61,142 -61,142. 61 142. -61 142. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. IL

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sch	nedule G (Form 990) 2022 Chicago Public Education Fund 36-4	<u> 127901.</u>	3 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	O No
13	Indicate the percentage of gaming activity conducted in:		
a	a The organization's facility	13a	%
k	o An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
L	a If IIVaa II antay the amount of gaming you and a gaming by the avganization		
L	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
,	of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party:		
•	on Tes, entername and address of the tilld party.		
	Name		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•		Yes	☐ No
ŀ	retain the state gaming license? Description of De	100	
•	organization's own exempt activities during the tax year \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III. lines 9	. 9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	, , , , , ,
Sc	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers	3:	
<u>(i</u>) Name of Fundraiser: Campbell & Co		
<u>(i</u>	.) Address of Fundraiser: 1 E Wacker Dr, Ste 2100, Chicago, IL	60601	

Schedule G	(Form 990) Supplemental Infor	Chicago	Public	Education	Fund	36-4279013	Page 4
Part IV	Supplemental Infor	mation _{(continu}	ued)				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **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.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization								Employer identification number
			cation Fund					36-4279013
Part I General In	formation on Grants a	nd Assistance						
criteria used to a	ation maintain records t ward the grants or assis IV the organization's pro	stance?				-		on X Yes No
	d Other Assistance to I nat received more than \$					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and ad	dress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Chicago Public Sch	hools							
42 W Madison St								Program participation
Chicago, IL 60602		36-6005821	City of Chicago	391,500.	0.			stipends
	er of section 501(c)(3) ar	-		e line 1 table				1.

members work with the grantee to monitor and document progress against

(a) Type of grant or assistance	(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
Guanta ta Puinzinala	43	257 400	0.		
Grants to Principals	45	257,499.	0.		
Part IV Supplemental Information. Provide the information	n required in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
Part I, Line 2:					
The Fund makes investments in gr	antees purs	uant to be	enchmark sc	hedules, and	
grant dollars are disbursed to g	rantees onl	y upon doc	cumented ev	idence that	
grantees are achieving or workin					
factors for their programs to be	successiul	• Acceptar	ore acureve	ments are	

these shared 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.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Questions Regarding Compensation

Department of the Treasury

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

Chicago Public Education Fund Employer identification number 36-4279013

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 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 Indicate which, if any, of the following the 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 Written employment contract X Compensation survey or study Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee 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: **a** Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a X Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? Х b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Х 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2022

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.

(A) Name and Title		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Heather Y. Anichini	(i)	353,007.	35,000.	0.	15,960.	29,604.	433,571.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Nelson Gerew	(i)	202,500.	0.	0.	8,080.	0.	210,580.	0.
Director, Data & Policy	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
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	(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:
Bonuses awarded during 2022 were determined under the discretion of the
Board of Directors and are correctly reported on Sch J, Part II, Col.
(B)(ii).

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Inspection **Employer identification number**

	Chicago Publ	ic Eau	cation Fui	na	36-	4 <i>2</i> / 9 () <u>1</u> 3	
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contrib	determini	_	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	2	87,083.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other \dots							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			2				
25	Other (Event Expenses)	X	1	3,572.	Cost			
26	Other ()							
27	Other ()							
28	Other ()			<u> </u>				
29	Number of Forms 8283 received by the organization	•		1 1			٥	
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0	
00-	Destruction of the second section is			and the David I. Barra & Marrier	l- 00 . H 1. '1		Yes	No
зua	During the year, did the organization receive by	•		·	•			
	must hold for at least 3 years from the date of			•		200		Х
L	exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II.	·				30a		
	Does the organization have a gift acceptance p	ooliov that re	aquires the review	of any nonetandard contribut	ione?	21		Х
31 32a	Does the organization have a gift acceptance p	•	•	•		31		
JŁa			•			32a		Х
h	contributions? If "Yes," describe in Part II.					OZ.u		
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	r for which column (a) is chec	cked.			
	also alle a la Dark II		, p. 5, p. opoit)	(a) 10 01100	,			

Schedule M (Form 990) 2022 Chicago Public Education Fund

36-4279013

Page 2

SCHEDULE O (Form 990)

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 Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Chicago Public Education Fund

Employer identification number 36-4279013

Form 990, Part III, Line 1, Description of Organization Mission:
identifying and scaling what works for not only teachers and
principals, but also their students.
Form 990, Part III, Line 4a, Program Service Accomplishments:
on our website and in our reports.
Professional Learning Communities allowed school leaders to participate
in yearlong peer-learning groups led by the city's top principals.
Participants engaged in reflective journeys, designed to help them
understand their leadership more deeply, learn new skills, encourage
innovative practices in their buildings, and advance positive school
culture. Professional Learning Community leaders were frequently
featured on our website.
Our Summer Design Program equipped educators with the resources to
create student-centered solutions to school-based challenges.
Participants designed and tested new or modified approaches to
teaching, learning, and climate. Some of the promising practices that
emerged were featured in a series of case studies.
In addition to the Professional Learning Communities and the Summer
Design Program, our team managed two principal fellowships, a program
focused on aspiring principals, and piloted a Masterclass series in
2022. The Fund's programs supported 315 leaders across 246 schools,
serving 130,000 students across the city.

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization
Chicago Public Education Fund

Employer identification number
36-4279013

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

new Assistant Principal Engagement Survey helped inform district

strategy, including the launch of several working groups designed to

invite principal voices. We regularly staffed CPS efforts to surface

and act on the perspectives of educators in schools.

Additionally, we held a legislative breakfast in February 2022 to share principal and assistant principal perspectives with elected leaders.

Through this event, we introduced legislators to principals in their districts. We encouraged educators to share positive stories from their schools and legislators to ask questions about the issues affecting teaching and learning.

Finally, we published 11 case studies in 2022. These reports were

designed to amplify school practices that accelerated student learning
in the wake of the pandemic.

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

In June, we hosted an Innovation Showcase, which featured the work of

six school teams. Each team shared a specific promising practice,

answering questions from one another and the broader community. Several

of the presenters were award winners, having participated in the Design

Challenge we sponsored earlier in the spring. We shared all of the

practices they shared in our communications.

In October, The Fund celebrated educators citywide through our sixth annual Principal Appreciation Campaign. The 2022 campaign included two

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization Chicago Public Education Fund Employer identification number 36-4279013

school visits, three casual events for principals to reconnect with

peers, and one event at the Museum of Science and Industry that

featured stories of resilience from school leaders. We also designed

and executed a social media campaign and mailed pins recognizing their

years of service to all public school principals in Chicago.

Throughout the year, we hosted an Educator Advisory Committee, whose members consulted on our work. Composed of 34 leaders from across the city, the group offered thoughtful insight into policy topics that would improve school leader conditions.

Form 990, Part VI, Section A, line 2:

John Dugenske and Siddharth Mehta have a business relationship.

Form 990, Part VI, Section A, line 4:

In September 2022, The Fund changed the Board of Directors bylaws. The change updated the number of Directors from no fewer than twenty and no more than twenty-five to no fewer than twenty-five and no more than thirty.

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

The President and CEO review 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

Schedule O (Form 990) 2022 Page 2

Name of the organization
Chicago Public Education Fund
Employer identification number
36-4279013

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 determination of the appropriate level of compensation included a review of compensation levels for the equivalent positions at comparable organizations, through a review of Form 990s and survey data produced by national and regional industry associations.

For other staff salaries, a review of compensation levels at comparable organizations was conducted by the CEO, and her recommendations for salary adjustments were reviewed by the Governance, Operations, Finance, and Audit Committee in conjunction with the annual budget planning process.

Schedule O (Form 990) 2022 Page **2**

Schedule O (Form 990) 2022	Page 2
Name of the organization Chicago Public Education Fund	Employer identification number 36-4279013
The process for determining the compensation is documented	1.
Form 990, Part VI, Section C, Line 18:	
IRS Form 990 filings are available on Organization's websi	ite
https://thefundchicago.org/who-we-are/donor-resources/.	
Form 990, Part VI, Section C, Line 19:	
Financial statements for recent fiscal years are available	e to the public on
The Fund's website. Also, the governing documents, conflic	
policy, and financial statements are available upon reques	
period of disclosure as set forth in IRC Section 6104(d).	of for the bame
period of discressive as see forth in the section of office.	
Form 990, Part IX, Line 11g, Other Fees:	
Programmatic Supports:	
Program service expenses	1,104,056.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	1,104,056.
Fellows Non-Payroll Stipends:	
Program service expenses	67,222.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	67,222.
Consultants:	
Program service expenses	6,641.
Management and general expenses	320,274.
200040 40 20 20	Schodulo () (Form 990) 2023

Schedule O (Form 990) 2022 Page **2**

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