Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 07-01-2022 , and ending 06-30-2023

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
CHICAGO FOUNDATION FOR WOMEN

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
140 SOUTH DEARBORN STREET 400

City or town, state or province, country, and ZIP or foreign postal code
CHICAGO, IL 60603

D Employer identification number
36-3348160

E Telephone number
(312) 577-2801

G Gross receipts $ 26,594,922

F Name and address of principal officer:
SUNNY FISCHER
140 SOUTH DEARBORN STREET 400
CHICAGO,IL 60603

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.
H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CFW.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1985

M State of legal domicile: IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
CHICAGO FOUNDATION FOR WOMEN (CFW) INVESTS IN WOMEN AND GIRLS AS CATALYSTS, BUILDING STRONG COMMUNITIES FOR ALL. THE FOUNDATION ENVISIONS A WORLD IN WHICH ALL WOMEN, GIRLS, TRANS AND GENDER NON BINARY INDIVIDUALS HAVE THE OPPORTUNITY TO THRIVE IN SAFE, JUST AND HEALTHY COMMUNITIES.

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	22
6	Total number of volunteers (estimate if necessary)	6	385
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	9,139,183	7,072,332
	9	Program service revenue (Part VIII, line 2g)	16,425	2,144
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,063,207	1,014,229
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-156,158	-163,790
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,062,657	7,924,915
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,447,250	3,419,600
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,722,315	1,728,042
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶649,921		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,214,911	1,249,799
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6,384,476	6,397,441
	19	Revenue less expenses. Subtract line 18 from line 12	3,678,181	1,527,474

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	20,516,109	23,723,909
	21	Total liabilities (Part X, line 26)	499,571	2,182,952
	22	Net assets or fund balances. Subtract line 21 from line 20	20,016,538	21,540,957

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date: 2024-02-21

▶ SUNNY FISCHER INTERIM CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00226461
Firm's name ▶ CHERRY BEKAERT ADVISORY LLC			Firm's EIN ▶ 88-2730877	
Firm's address ▶ 1075 PEACHTREE STREET NE SUITE 1600 ATLANTA, GA 30309			Phone no. (404) 209-0954	

May the IRS discuss this return with the preparer shown above? See Instructions. ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission:

FOR OVER THIRTY-SEVEN YEARS, CFW HAS BEEN THE ONLY ORGANIZATION IN THE REGION TO TAKE A COMPREHENSIVE APPROACH TO UNDERSTAND AND ADDRESS THE CHALLENGES AND NEEDS WOMEN AND GIRLS FACE THROUGH EVERY STAGE OF THEIR LIVES WITH A FOCUS ON ECONOMIC SECURITY, FREEDOM FROM VIOLENCE, AND ACCESS TO HEALTH CARE SERVICES AND INFORMATION. CFW WORKS WITH A COMMUNITY OF SOCIALLY-MINDED INVESTORS WHO SHARE OUR PASSION FOR IMPROVING THE LIVES OF WOMEN, GIRLS, TRANS, AND GENDER NONBINARY PEOPLE AND ENSURES THAT EVERY DOLLAR THEY GIVE ACHIEVES MAXIMUM IMPACT. WE HOLD OURSELVES AND OUR GRANTEES TO A HIGH STANDARD, CONDUCTING RIGOROUS EVALUATION, CAREFUL MONITORING, AND COMMUNITY-CENTERED RESULTS. CFW ALSO INVESTS IN THE FUTURE OF ORGANIZATIONS THROUGH LEADERSHIP DEVELOPMENT AND BUILDING SUSTAINABLE NONPROFIT INFRASTRUCTURE. AS A RESULT, TWO-THIRDS OF NONPROFITS FOR WHICH CFW WAS THE FIRST INSTITUTIONAL FUNDER ARE STILL THRIVING TEN YEARS AFTER RECEIVING THEIR FIRST CFW GRANT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

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 ☑ No

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 (Code:) (Expenses $ 3,761,457 including grants of $ 3,419,600) (Revenue $)

GRANTMAKING: CFW REMAINS AT THE FOREFRONT OF IDENTIFYING THE NEXT CHALLENGES FOR WOMEN, GIRLS, TRANS, AND GENDER NONBINARY INDIVIDUALS WITH DEEP ROOTS IN THE COMMUNITY. IN FISCAL YEAR 2023, WORKING WITH NEARLY 3,000 DONORS AND LOCAL PARTNERS ON THE FRONT LINES, CFW INVESTED A TOTAL OF $3,449,750 THROUGH 238 GRANTS, SUPPORTING 161 ORGANIZATIONS WORKING TO ADVANCE HEALTH, ECONOMIC SECURITY, AND SAFETY OF CHICAGO-AREA WOMEN, GIRLS, TRANS, AND GENDER NONBINARY INDIVIDUALS. CFW SUPPORTS ORGANIZATIONS AND THEIR LEADERS THROUGHOUT THE GREATER CHICAGO AREA, INCLUDING COOK, LAKE, DUPAGE, WILL, MCHENRY, AND KANE COUNTIES. OVER THE PAST YEAR, CFW GRANTS SERVED 287,774 PEOPLE, OF WHICH 222,007 (83%) IDENTIFIED AS WOMEN OR GIRLS, 39,417 (15%) IDENTIFIED AS MALE, AND 4,608 (2%) IDENTIFIED AS TRANSGENDER OR GENDER NONBINARY. OF THOSE SERVED, 36% IDENTIFY AS AFRICAN AMERICAN, 35% AS LATINX, 20% AS CAUCASIAN/WHITE, 4% AS ASIAN/PACIFIC ISLANDER, 1% AS ARAB AMERICAN/MIDDLE EASTERN, 2% MULTI-RACIAL, 1% AS AMERICAN INDIAN/INDIGENOUS PEOPLES, AND 1% AS OTHER.CFW IS MORE COMMITTED THAN EVER TO DOING MORE OF WHAT WE ARE BEST AT, PROVIDING STRATEGIC AND FLEXIBLE INVESTMENTS TO THE MOST CRITICAL ORGANIZATIONS IMPROVING THE LIVES OF CHICAGO'S MOST VULNERABLE WOMEN AND THEIR FAMILIES.

4b (Code:) (Expenses $ 736,938 including grants of $) (Revenue $)

OUTREACH, ADVOCACY AND COMMUNICATIONS: THANKS TO THE PAST, SUSTAINED SUPPORT OF THESE MOVEMENTS AND THEIR INFRASTRUCTURE, EVEN IN TIMES OF MORE INTENSE POLITICAL OPPOSITION, CFW AND OUR PARTNERS HAVE BEEN ABLE TO HARNESS THE OPPORTUNITY OF THE CURRENT POLITICAL CLIMATE TO DRIVE PROGRESSIVE CHANGE. CFW'S INVESTMENTS IN COALITIONS, ADVOCACY, AND BUILDING THE LEADERSHIP DEVELOPMENT OF ADVOCATES HAVE CONTRIBUTED TO OVER 55 PIECES OF PRO-WOMEN-AND-GIRLS LEGISLATION PASSED OVER THE PAST SIX YEARS. THIS HAS INCLUDED THE EQUAL RIGHTS AMENDMENT IN ILLINOIS, THE NO SALARY HISTORY LAW THAT STRENGTHENS THE ILLINOIS EQUAL PAY ACT, THE ILLINOIS REPRODUCTIVE HEALTH ACT, AND A STATEWIDE SEXUAL HARASSMENT LAW. AS A RESULT, ILLINOIS IS INCREASINGLY BECOMING A BASTION FOR WOMEN'S RIGHTS IN A NATIONALLY POLARIZING AND OPPRESSIVE SOCIOPOLITICAL CONTEXT.CFW ALSO LEVERAGES THE STRENGTH OF SEVERAL EXTERNAL PARTNERS TO ENSURE THE LONG-TERM SUSTAINABILITY AND SUCCESS OF ITS WORK. IN PARTNERSHIP WITH THE OFFICE OF THE CITY CLERK OF CHICAGO, CFW HOSTED A 2020 VIRTUAL GIRLS SUMMIT, AND SEVERAL SMALLER FOCUSED VIRTUAL CONVERSATIONS IN 2021 AS A CONTINUATION OF THE GIRLS SUMMIT, BRINGING TOGETHER OVER 400 PARTICIPANTS FROM ACROSS THE CITY TO HAVE A CONVERSATION ABOUT THE SAFETY AND WELLBEING OF ALL YOUNG WOMEN, GIRLS, TRANS, AND NONBINARY INDIVIDUALS AGES 13-24. IN ADDITION, CFW IS A MEMBER OF THE CLOSING WOMEN'S WEALTH GAP (CWWG), WE DEMAND MORE COALITION, AND A HOST OF FUNDERS' COLLABORATIVES AND WORKS IN CLOSE PARTNERSHIP WITH LOCAL GOVERNMENT LEADERS.

4c (Code:) (Expenses $ 618,822 including grants of $) (Revenue $)

CAPACITY BUILDING: CFW INTENTIONALLY COUPLES ITS GRANTMAKING WITH A BROAD RANGE OF HIGH-QUALITY, NO-COST PROGRAMS RANGING FROM BOARD DEVELOPMENT, TO FUNDRAISING TO EXECUTIVE COACHING FOR EMERGING WOMEN LEADERS ON THE FRONTLINES OF THE GENDER EQUITY MOVEMENT. THROUGH THIS WORK, CFW BUILDS THE STRENGTH OF WOMEN-LED ORGANIZATIONS AND ENSURES THAT ORGANIZATIONAL AND LEADERSHIP DEVELOPMENT IS APPLIED WITH A GENDER LENS, PARTICULARLY WHEN ORGANIZATIONAL LEADERS ARE WORKING TO ADDRESS POVERTY AND INEQUITY. CFW'S GIVING COUNCILS AND CIRCLES REPRESENT GROUPS OF ENERGIZED AND DIVERSE PEOPLE WHO HAVE COME TOGETHER AROUND SHARED INTERESTS TO RAISE MONEY AND AWARD GRANTS ACCORDING TO THESE INTERESTS. CFW HOSTS THREE GIVING COUNCILS, ALL OF WHOM FOCUS THEIR GIVING ON SPECIFIC GROUPS OF WOMEN AND GIRLS IN THE CHICAGO REGION. THEY ENGAGE IN GRANTMAKING BY AND FOR THEIR RESPECTIVE COMMUNITIES AS INDICATED BY THE NAME OF THE GIVING COUNCIL: LBTQ GIVING COUNCIL (LESBIAN, BISEXUAL, TRANSGENDER, QUEER, AND QUESTIONING) WOMEN OF COLOR UNITED GIVING COUNCIL YOUNG WOMEN'S GIVING COUNCIL IN ADDITION, CFW HOSTS FOUR GEOGRAPHY-BASED GIVING CIRCLES. THESE GIVING CIRCLES FOCUS THEIR GRANTMAKING FOR WOMEN AND GIRLS IN THEIR RESPECTIVE COMMUNITIES, USING HYPER-LOCAL GEOGRAPHY, AS INDICATED BY THE NAME OF THE GIVING CIRCLE: THE WESTERN SUBURBS GIVING CIRCLE THE NORTH SHORE GIVING CIRCLE THE SOUTH SIDE GIVING CIRCLE WEST SIDE GIVING CIRCLELASTLY, CFW IS ALSO CONSCIOUSLY BUILDING ITS CAPACITY TO ENSURE THAT THE ORGANIZATION SERVES ALL WHO IDENTIFY AS FEMALE IN THE CHICAGO REGION AND IS ONE WHERE ALL WOMEN, GIRLS, TRANS, AND GENDER NONBINARY INDIVIDUALS SEE THEMSELVES. AS SUCH, CFW IS INTENTIONALLY CREATING THE SPACE TO BUILD AND SUSTAIN AN INSTITUTION THAT IS AWARE OF AND ADDRESSES ITS OWN STRUCTURAL RACIAL BIASES. AS A FIRST STEP, CFW HAS CONVENED AN ANTI-RACISM TRANSFORMATION TEAM, A CFW BODY COMPRISED OF 16 INTERNAL AND EXTERNAL STAKEHOLDERS REPRESENTING CFW'S VAST NETWORK WHO WILL LEAD THE EFFORT TO TRANSFORM CFW INTO AN ANTI-RACIST INSTITUTION. THIS TEAM WILL DO THAT BY ENGAGING IN CONTINUAL ANALYSIS AND ESSENTIAL RESTRUCTURING OF CFW TO ENSURE THAT THE FOUNDATION'S WAY OF BEING IS ONE THAT WIELDS A SHARED POWER WITH, AND HOLDS ITSELF ACCOUNTABLE TO, RACIALLY OPPRESSED GROUPS TO ACHIEVE ITS GOAL OF GENDER EQUITY. THE ANTI-RACISM TRANSFORMATION TEAM IS NOW REFLECTED IN CFW'S ORGANIZATIONAL CHART, REPORTING DIRECTLY TO THE PRESIDENT & CEO.IN FY22, CFW LAUNCHED THE REPRODUCTIVE JUSTICE CHAMPIONS, WHICH SEEKS TO ELEVATE THE EXPERTISE, LEADERSHIP, AND LIVED EXPERIENCES OF BLACK, INDIGENOUS, PEOPLE OF COLOR (BIPOC) AND AFRICANA, LATIN, ASIAN, AND NATIVE AMERICAN (ALANA) GROUPS IN ILLINOIS WORKING AT THE INTERSECTIONS OF REPRODUCTIVE AND SEXUAL JUSTICE AND OTHER SOCIAL JUSTICE MOVEMENTS. CFW WILL IMPLEMENT A STRATEGY THAT WILL LEAD TO A REGION-WIDE SAFE-HAVEN FOR REPRODUCTIVE HEALTH ACCESS AND IMPROVED HEALTH OUTCOMES. THIS INITIATIVE WILL BE A REGIONAL MODEL FOR HOW TO CREATE A SANCTUARY WHILE BUILDING THE MOVEMENT TO ENSURE REPRODUCTIVE AND SEXUAL JUSTICE AND ACCESS DURING A TIME OF INCREASED ATTACK.THE BLACK WOMEN-LED CAPACITY BUILDING (BLOC) PROGRAM IS A DATA-DRIVEN FUNDING MODEL THAT SUPPORTS BLACK WOMEN-LED ORGANIZATIONS, MEASURES IMPACT AND BEGINS TO MAKE THE CASE TO OTHER FUNDERS (REGIONAL AND NATIONAL) TO STRATEGICALLY FUND TARGETED CAPACITY BUILDING EFFORTS. CFW WILL WORK SIDE BY SIDE WITH GRANTEES, AND WITH THE SUPPORT OF OUR PROGRAM AND HR DEPARTMENTS, GRANTEES WILL BE POSITIONED TO IMPLEMENT SYSTEMATIC CARE STRUCTURES THAT INCLUDE COMPREHENSIVE BENEFITS PACKAGES FOR ORGANIZATIONS AND THEIR STAFF.

(Code:) (Expenses $ 507,017 including grants of $) (Revenue $)

STRATEGIC INITIATIVES: CFW IS UNIQUELY POSITIONED TO COORDINATE AND LEAD COLLECTIVE IMPACT WORK. FOR EXAMPLE, CFW HAS SUPPORTED A COHORT OF 10 GRANTEE PARTNERS AS PART OF THE ELEANOR NETWORK (EN). INDIVIDUALLY, THESE NONPROFIT ORGANIZATIONS WORK TO ADDRESS THE ECONOMIC SECURITY OF LOW- TO MODERATE-INCOME WOMEN AND FAMILIES THROUGHOUT THE REGION. IN 2017 CFW, BUILDING ON THE SUCCESS OF THE ELEANOR NETWORK, LAUNCHED THE ENGLEWOOD WOMEN'S INITIATIVE (EWI), A PLACE-BASED, COMMUNITY-CENTERED AND HOLISTIC APPROACH TO WOMEN'S ECONOMIC SECURITY. THESE INITIATIVES CONTRIBUTE TO THE LARGER BODY OF CFW'S EXPERTISE, DISCOVERY, AND PARTNERSHIPS.CFW HAS AN AMBITIOUS GOAL TO ADVANCE GENDER EQUITY FOR THE REGION AS PART OF ITS STRATEGIC PLAN. THIS WORK TAKES A NUMBER OF FORMS, INCLUDING LARGE-SCALE POLICY CHANGE AND ADVOCACY, AS WELL AS WORK TO TRANSFORM THE CULTURE AND SYSTEMS WITHIN ORGANIZATIONS. CFW IS HOST TO THE WILLIE'S WARRIORS LEADERSHIP INITIATIVE, A UNIQUE LEADERSHIP DEVELOPMENT PROGRAM NAMED IN HONOR OF THE LATE CIVIL RIGHTS LEADER, REV. WILLIE T. BARROW. WILLIE'S WARRIORS, ESTABLISHED IN 2018, OFFERS BLACK WOMEN FROM ALL SECTORS AND BACKGROUNDS A SPACE TO GAIN A DEEPER SENSE OF THEMSELVES AS LEADERS, STRENGTHENING THEIR PERSONAL LEADERSHIP STYLE AND BRINGING THEIR WHOLE SELVES TO THE TABLE. WARRIORS EXPLORE THE IDEA OF LEADERSHIP, PERSONAL GROWTH AND TRANSFORMATION, AND HOW TO SUSTAIN THEMSELVES WHILE MOVING OUR COMMUNITIES FORWARD. IN 2023, THE FOUNDATION GRADUATED THE FIFTH COHORT OF WARRIORS AND WILL SOON WELCOME THE SIXTH COHORT.

4d Other program services (Describe in Schedule O.)

(Expenses $ 507,017 including grants of $) (Revenue $)

4e **Total program service expenses ▶** 5,624,234

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	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		No
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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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 foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
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		No
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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		No
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		No
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		No
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		No
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):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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	78			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

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

Line	Question	Sub-line	Amount	Line	Yes	No
2a	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	2a	22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in 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 financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	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).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
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		No
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		No
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	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.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			13a		
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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		
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? If "Yes," see instructions and file Form 4720, Schedule N.			15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No
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? If "Yes," complete Form 6069.			17		

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section 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 in Schedule O.	**1a** 27			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 27			
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**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
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**		No
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**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
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 in Schedule O*		**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	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**	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	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**		No
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**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed▶ IL

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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:

▶SUNNY FISCHER 140 SOUTH DEARBORN STREET 400 CHICAGO,IL 60603 (312) 577-2801

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.
- List all of the organization's **former** officers, key employees, or 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CARMEN AWADZI DIRECTOR	3.00	X						0	0	0
(2) JOAN BACON DIRECTOR	3.00	X						0	0	0
(3) ALICIA BAILEY DIRECTOR	3.00	X						0	0	0
(4) ALLISON CLARK CHAIR APPOINTMENT	3.00	X						0	0	0
(5) DEBORAH B COLE DIRECTOR	3.00	X						0	0	0
(6) REBECCA BROKMEIER DIRECTOR	3.00	X						0	0	0
(7) REGINA CROSS DIRECTOR	3.00	X						0	0	0
(8) JESSYCA DUDLEY DIRECTOR	3.00	X						0	0	0
(9) ERICA DUNCAN DIRECTOR	3.00	X						0	0	0
(10) GEORGINA HEARD-LABONNE VICE CHAIR, ADVOCACY COMMITTEE	3.00	X						0	0	0
(11) KERI HOLLEB HOTALING VICE CHAIR, PROGRAM COMMITTEE	3.00	X						0	0	0
(12) TANYA DAVIS DIRECTOR	3.00	X						0	0	0
(13) SUSAN KUROWSKI DIRECTOR	3.00	X						0	0	0
(14) LAUREN DENSHAM DIRECTOR	3.00	X						0	0	0
(15) KATHLEEN MCDONALD DIRECTOR	3.00	X						0	0	0
(16) ANITA MITAL DIRECTOR	3.00	X						0	0	0
(17) MICHAEL NARCISO TREASURER	3.00	X		X				0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) ADOLFO HERNANDEZ DIRECTOR	3.00	X						0	0	0
(19) NORMAN JONES DIRECTOR	3.00	X						0	0	0
(20) JILL LYONS DIRECTOR	3.00	X						0	0	0
(21) SILVIA RIVERA SECRETARY	3.00	X		X				0	0	0
(22) ANGELA L PUTNAM DIRECTOR	3.00	X						0	0	0
(23) JESSICA SOHL CHAIR - ELECT	3.00	X		X				0	0	0
(24) ANEL RUIZ SENIOR VICE PRESIDENT	3.00	X						0	0	0
(25) GRETCHEN WOLF DIRECTOR	3.00	X						0	0	0
(26) ANN MARIE WRIGHT CHAIR	3.00	X		X				0	0	0
(27) KELLY SMITH HALEY DIRECTOR	3.00	X						0	0	0
(28) FELICIA BLAKLEY PRESIDENT & CEO	40.00			X				247,738	0	17,028
(29) LINDA WAGNER CHIEF OPERATING OFFICER	40.00			X				149,416	0	13,885
(30) JESSI MOON CHIEF DEVELOPMENT OFFICER	40.00					X		103,667	0	12,526
(31) SCHEAGBE GRISBY CHIEF OF STAFF	40.00					X		117,479	0	12,778
(32) LORA YORK SENIOR PROGRAM OFFICER	40.00					X		100,040	0	12,187

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	718,340	0	68,404

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 ▶ 5

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
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*	4	Yes	
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		No

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	853,250			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,219,082			
	g Noncash contributions included in lines 1a - 1f:$	1g	1,019,938			
	h **Total.** Add lines 1a-1f ▶		7,072,332			
Program Service Revenue		Business Code				
	2a BOARD BOOT CAMP	611430	2,144	2,144		
	b					
	c					
	d					
	e					
	f All other program service revenue.					
	g **Total.** Add lines 2a–2f. ▶		2,144			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		637,746			637,746
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		

	(A)	(B)	(C)	(D)
d Net rental income or (loss) ▶				

		(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	7a	18,634,410	
b Less: cost or other basis and sales expenses	7b	18,257,927	
c Gain or (loss)	7c	376,483	

			(A)	(B)	(C)	(D)
d Net gain or (loss) ▶			376,483			376,483
8a Gross income from fundraising events (not including $ 853,250 of contributions reported on line 1c). See Part IV, line 18	8a	242,693				
b Less: direct expenses	8b	412,080				
c Net income or (loss) from fundraising events ▶			-169,387			-169,387
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory ▶						

OtherRevenueMiscAmt	Business Code	(A)	(B)	(C)	(D)
11a OTHER INCOME	523000	5,597	5,597		
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d ▶		5,597			
12 **Total revenue.** See instructions ▶		7,924,915	7,741	0	844,842

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 . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,419,600	3,419,600		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	428,066	323,990	34,748	69,328
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,017,486	679,936	23,363	314,187
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	39,578	27,678	1,327	10,573
9 Other employee benefits	143,361	100,759	4,111	38,491
10 Payroll taxes	99,551	69,617	3,339	26,595
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	23,100		23,100	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	107,832	92,354	2,024	13,454
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	576,495	492,138	10,744	73,613
12 Advertising and promotion	3,728	1,228	2,500	
13 Office expenses	92,847	59,416	2,989	30,442
14 Information technology	170,621	146,675	911	23,035
15 Royalties				
16 Occupancy	133,056	96,090	260	36,706
17 Travel	3,137	2,231	98	808
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	47,187	40,589	3,839	2,759
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,272		8,272	
23 Insurance	4,440	3,105	149	1,186
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER PROGRAM EXPENSES	46,598	46,569	29	0
b EQUIPMENT	13,962	9,173	790	3,999
c PUBLIC EVENTS	795	795	0	0
d				
e All other expenses	17,729	12,291	693	4,745
25 **Total functional expenses.** Add lines 1 through 24e	6,397,441	5,624,234	123,286	649,921
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☑ if following SOP 98-2 (ASC 958-720).				

Part X **Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	8,952	1	2,095,235
	2	Savings and temporary cash investments	4,503,123	2	610,223
	3	Pledges and grants receivable, net	995,000	3	1,363,476
	4	Accounts receivable, net		4	
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	88,258	9	156,794
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 100,275			
	b	Less: accumulated depreciation — 10b: 76,297	32,250	10c	23,978
	11	Investments—publicly traded securities	14,888,526	11	19,173,758
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	0	14	300,445
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	20,516,109	16	23,723,909
Liabilities	17	Accounts payable and accrued expenses	79,476	17	105,411
	18	Grants payable	219,750	18	1,695,600
	19	Deferred revenue	200,345	19	17,500
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other 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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	0	25	364,441
	26	**Total liabilities.** Add lines 17 through 25	499,571	26	2,182,952
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	6,260,163	27	4,970,775
	28	Net assets with donor restrictions	13,756,375	28	16,570,182
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	20,016,538	32	21,540,957
	33	Total liabilities and net assets/fund balances	20,516,109	33	23,723,909

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,924,915
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,397,441
3	Revenue less expenses. Subtract line 2 from line 1	3	1,527,474
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,016,538
5	Net unrealized gains (losses) on investments	5	-3,055
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	21,540,957

Part 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 ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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	Yes	
	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: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A (Form 990)

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.
▶ 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
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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:

5 ☐ 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).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **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.**

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.**

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.**

d ☐ **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.**

e ☐ 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.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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 grant.") . .	6,075,451	5,091,081	3,492,145	9,139,183	7,072,332	30,870,192
2 Tax revenues levied for the organization'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	6,075,451	5,091,081	3,492,145	9,139,183	7,072,332	30,870,192
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) . .						9,352,305
6 **Public support.** Subtract line 5 from line 4.						21,517,887

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4. .	6,075,451	5,091,081	3,492,145	9,139,183	7,072,332	30,870,192
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	614,802	584,798	556,784	608,169	637,746	3,002,299
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	36,316	8,318	4,641	18,515	5,597	73,387
11 **Total support.** Add lines 7 through 10						33,945,878

12 Gross receipts from related activities, etc. (see instructions) . . . . | 12 | 377,196

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f)) . . . . | 14 | 63.390 %

15 Public support percentage for 2020 Schedule A, Part II, line 14 . . . . | 15 | 68.730 %

16a **33 1/3% support test—2022.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☑

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 **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" test. The organization qualifies as a publicly supported organization . . . . ▶☐

b **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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" test. The organization qualifies as a publicly supported organization . . . . ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar 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.") .						
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 business under section 513						
4 Tax revenues levied for the organization'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						
7a 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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6. . .						
10a 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.						
11 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2022** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2021** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests-2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

b **33 1/3% support tests—2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
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.*	**1**		
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).*	**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.*	**3a**		
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.*	**3b**		
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.*	**3c**		
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.*	**4a**		
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.*	**4b**		
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.*	**4c**		
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).*	**5a**		
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?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
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.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	**7**		
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).*	**8**		
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.***	**9a**		
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.***	**9b**		
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.***	**9c**		
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.*	**10a**		
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).*	**10b**		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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**		
b	A family member of a person described on 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in **Part VI**.*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

Section 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 or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section 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 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the 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.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described 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 these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations?*If "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 of its supported organizations? *If "Yes," describe in **Part VI.** the role played by the organization in this regard.*	**3b**		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* ***Part VI***). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

	Section 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		

	Section 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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**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		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see 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 organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	5	
6 Other distributions (*describe in* ***Part VI***). See instructions	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions	8	
9 Distributable amount for 2022 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

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 (reasonable 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 e			
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. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is 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.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule B (Form 990) Department of the Treasury Internal Revenue Service	**Schedule of Contributors** ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047 **2022**

Name of the organization	Employer identification number
CHICAGO FOUNDATION FOR WOMEN	36-3348160

Organization type (check one):

Filers of: **Section:**

Form 990 or 990-EZ

☐ 501(c)( ) (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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during 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 . . . . ▶ $ ____________

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

Name of organization	Employer identification number
CHICAGO FOUNDATION FOR WOMEN	36-3348160

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	$ RESTRICTED	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(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
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

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 information once. See instructions.) ▶ $**

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 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 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 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
-	

Additional Data

Return to Form

Software ID:

Software Version:

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 the organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $

3 Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A 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).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	5,760	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	3,747	
c	Total lobbying expenditures (add lines 1a and 1b)	9,507	
d	Other exempt purpose expenditures	5,614,727	
e	Total exempt purpose expenditures (add lines 1c and 1d)	5,624,234	
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	431,212	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
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.

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	107,803	
h	Subtract line 1g from line 1a. If zero or less, enter -0-.	0	
i	Subtract line 1f from line 1c. If zero or less, enter -0-.	0	

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)** 2018	**(b)** 2019	**(c)** 2020	**(d)** 2021	**(e)** Total
2a Lobbying nontaxable amount	340,160	375,471	438,038	431,212	1,584,881
b Lobbying ceiling amount (150% of line 2a, column(e))					2,377,322
c Total lobbying expenditures	10,378	7,254	7,896	9,507	35,035
d Grassroots nontaxable amount	85,040	93,868	109,510	107,803	396,221
e Grassroots ceiling amount (150% of line 2d, column (e))					594,332
f Grassroots lobbying expenditures	8,828	5,135	5,760	5,760	25,483

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a) Yes	(a) No	(b) Amount
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:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			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 expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures. See Instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

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

2022

Open to Public Inspection

Name of the organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	9	
2	Aggregate value of contributions to (during year)	26,500	
3	Aggregate value of grants from (during year)	102,000	
4	Aggregate value at end of year	773,281	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors 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

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . .	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ________

4 Number of states where property subject to conservation easement is located ▶ ________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ ________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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, not 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 furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, 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 furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ________

(ii) Assets included in Form 990, Part X . . . . ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ________

b Assets included in Form 990, Part X . . . . ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other ....
c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,940,876	8,072,244	6,539,952	6,961,208	6,323,939
b Contributions	7,426,344	986	329,343	2,600	527,200
c Net investment earnings, gains, and losses	595,506	-901,729	1,444,349	-184,049	315,644
d Grants or scholarships	330,000	230,625	241,400	239,807	205,575
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	14,632,726	6,940,876	8,072,244	6,539,952	6,961,208

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ....

b Permanent endowment ▶ 80.000 %

c Term endowment ▶ 20.000 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		No
(ii) Related organizations	3a(ii)		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		8,023	6,017	2,006
d Equipment		92,252	70,280	21,972
e Other				

Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶ 23,978

Part VII Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3)Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 13.)* ▶		

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(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' 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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	364,441

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
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	8,057,815
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-3,055		
b	Donated services and use of facilities	2b	74,400		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	169,387		
e	Add lines **2a** through **2d**			2e	240,732
3	Subtract line **2e** from line **1**			3	7,817,083
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	107,832		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	107,832
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	7,924,915

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	6,533,396
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	74,400		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	169,387		
e	Add lines **2a** through **2d**			2e	243,787
3	Subtract line **2e** from line **1**			3	6,289,609
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	107,832		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	107,832
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	6,397,441

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.

Return Reference	Explanation
PART V, LINE 4:	EARNINGS PROVIDE AN ONGOING SOURCE OF INCOME TO THE FOUNDATION.
PART X, LINE 2:	CFW HAS BEEN DETERMINED TO BE EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR EITHER FEDERAL OR STATE INCOME TAXES. CFW HAS EVALUATED THE TAX POSITIONS TAKEN FOR ALL OPEN TAX YEARS. CURRENTLY, THE 2019, 2020 AND 2021 TAX YEARS ARE OPEN AND SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE; HOWEVER, THE FOUNDATION IS NOT CURRENTLY UNDER AUDIT NOR HAS THE FOUNDATION BEEN CONTACTED BY THE INTERNAL REVENUE SERVICE. BASED ON THE EVALUATION OF CFW'S TAX POSITIONS, MANAGEMENT BELIEVES ALL POSITIONS WOULD BE UPHELD UNDER AN EXAMINATION; THEREFORE, NO PROVISION FOR THE EFFECTS OF UNCERTAIN TAX POSITIONS HAS BEEN RECORDED FOR THE YEAR ENDED JUNE 30, 2023 AND 2022
PART XI, LINE 2D - OTHER ADJUSTMENTS:	FUNDRAISING EVENT EXPENSES 169,387.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	FUNDRAISING EVENT EXPENSES 169,387.

Additional Data

Return to Form

Software ID:

Software Version:

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, lines 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
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

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.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **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.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
			Yes	**No**			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
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.

Part II **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 IMPACT AWARDS (event type)	**(b)** Event #2 ANNUAL LUNCHEON (event type)	**(c)** Other events 1 (total number)	**(d)** Total events (add col. **(a)** through col. **(c)**)
Revenue	1 Gross receipts	64,277	1,030,616	1,050	1,095,943
	2 Less: Contributions	53,217	798,983	1,050	853,250
	3 Gross income (line 1 minus line 2)	11,060	231,633		242,693
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	11,060	111,633		122,693
	8 Entertainment		60,000		60,000
	9 Other direct expenses	44,078	185,309		229,387
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				412,080
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-169,387

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.

		(a) Bingo	**(b)** Pull tabs/Instant bingo/progressive bingo	**(c)** Other gaming	**(d)** Total gaming (add col.**(a)** through col.**(c)**)
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ______ % ☐ No	☐ Yes ______ % ☐ No	☐ Yes ______ % ☐ 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? ☐ Yes ☐ No

b If "No," explain: ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ____________

11 Does the organization conduct gaming activities with nonmembers? . . . . ☐ **Yes** ☐ **No**

12 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** ☐ **No**

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	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 Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ 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 retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

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.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization: CHICAGO FOUNDATION FOR WOMEN
Employer identification number: 36-3348160

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) A LONG WALK HOME 1658 N MILWAUKEE AVE STE 104 CHICAGO,IL 60647	30-0053613	501(C)(3)	17,000	0			IMPACT AWARD; BLACK GIRLHOOD ALTAR PROJECT
(2) AFFINITY COMMUNITY SERVICES 2850 S WABASH AVE STE 108 CHICAGO,IL 60616	36-4157571	501(C)(3)	76,000	0			GENERAL OPERATING SUPPORT; FOCUS GROUP STIPEND; CAPACITY BUILDING SUPPORT
(3) ALL CHICAGO MAKING HOMELESSNESS HISTORY 651 W WASHINGTON BLVD STE 504 CHICAGO,IL 60661	36-4272272	501(C)(3)	110,000	0			ENGLEWOOD WOMEN'S INITIATIVE ; ELEANOR NETWORK
(4) ALLIES FOR COMMUNITY BUSINESS (FORMERLY ACCION CHICAGO) 135 N KEDZIE AVE CHICAGO,IL 60612	36-3966573	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(5) ANEW BUILDING BEYOND VIOLENCE & ABUSE 18137 S HARWOOD HOMEWOOD,IL 60430	36-3089796	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(6) APNA GHAR INC (OUR HOME) 4350 N BROADWAY 2ND FLOOR CHICAGO,IL 60613	36-3698770	501(C)(3)	23,000	0			GENERAL OPERATING SUPPORT
(7) ARAB AMERICAN FAMILY SERVICES 7000 W 111TH ST STE 300 WORTH,IL 60482	60-0002593	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(8) ARISE CHICAGO 1700 W HUBBARD STE 2E CHICAGO,IL 60622	20-1072983	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(9) ASOCIACION LATINA DE ASISTENCIA Y PREVENCION DEL CANCER DE MAMA 3023 N CLARK ST STE 613 CHICAGO,IL 60657	45-2586118	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(10) ASSATA'S DAUGHTERS 5700 S PRAIRIE AVE CHICAGO,IL 60637	52-2094677	501(C)(3)	35,000	0			GENERAL OPERATING SUPPORT
(11) AWAKENINGS ART 4001 NORTH RAVENSWOOD AVENUE 204C CHICAGO,IL 60613	27-1747959	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(12) BA NIA INCORPORATED 6950 S PERRY AVE CHICAGO,IL 60612	36-4051755	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(13) BETWEEN FRIENDS PO BOX 608548 CHICAGO,IL 60660	36-3460990	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(14) BLACK GIRLS DANCE 103 E 89TH ST CHICAGO,IL 60619	82-1437264	501(C)(3)	22,800	0			CAPACITY BUILDING SUPPORT
(15) BLUE TIN PRODUCTION 640 W IRVING PARK RD ROOM 101 CHICAGO,IL 60613	84-3133322	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(16) BUILD INC 5100 W HARRISON ST CHICAGO,IL 60644	23-7022085	501(C)(3)	15,000	0			BUILDING GIRLS 2 WOMEN
(17) CABRINI GREEN LEGAL AID 6 S CLARK ST CHICAGO,IL 60603	36-2775706	501(C)(3)	20,000	0			ADVOCACY FOR WOMEN AND MOTHERS
(18) CARA 237 S DESPLAINES ST CHICAGO,IL 60661	36-4268095	501(C)(3)	15,000	0			CAREER ADVANCEMENT PROGRAM
(19) CARING ACROSS GENERATIONS 45 BROADWAY NEW YORK,NY 10006	35-2420942	501(C)(3)	15,000	0			CARING ACROSS GENERATIONS ILLINOIS CARE FELLOWSHIP PROGRAM
(20) CENTER FOR ADVANCING DOMESTIC PEACE 813 S WESTERN AVE UNIT 1C CHICAGO,IL 60612	33-1075347	501(C)(3)	26,000	0			GENERAL OPERATING SUPPORT
(21) CENTER FOR CHANGING LIVES 1955 N ST LOUIS AVE CHICAGO,IL 60647	36-3731388	501(C)(3)	30,000	0			OFFICE TO CAREERS TRAINING FOR WOMEN OF COLOR
(22) CENTRO SANAR 2646 W 22ND PLACE CHICAGO,IL 60608	88-1575835	501(C)(3)	10,000	0			PERINATAL MENTAL HEALTH GROUP
(23) CHICAGO COMMONS ASSOCIATION 515 E 50TH ST CHICAGO,IL 60615	36-2169136	501(C)(3)	40,000	0			FAMILY HUB EMPLOYMENT SUPPORT PROGRAM
(24) CHICAGO COMMUNITY BOND FUND WESTSIDE JUSTICE CENTER CHICAGO,IL 60612	47-5015710	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(25) CHICAGO COMMUNITY FOUNDATION 225 N MICHIGAN AVE STE 2200 CHICAGO,IL 60601	36-3432023	501(C)(3)	15,000	0			IMMIGRANT FUNDERS COLLABORATIVE; CHICAGOLAND WORKFORCE FUNDERS ALLIANCE
(26) CHICAGO FREEDOM SCHOOL 719 S STATE ST 4TH FLOOR CHICAGO,IL 60605	20-4735643	501(C)(3)	25,000	0			PROJECT HEAL US AND REPRODUCTIVE JUSTICE
(27) CHICAGO FURNITURE BANK 4801 S WHIPPLE ST CHICAGO,IL 60632	83-1214857	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(28) CHICAGO VOLUNTEER DOULAS PO BOX 5851 CHICAGO,IL 60680	27-3636022	501(C)(3)	30,000	0			GENERAL OPERATING SUPPORT
(29) CHICAGO WOMEN IN TRADES 2444 W 16TH ST STE 3E CHICAGO,IL 60608	36-3256699	501(C)(3)	85,000	0			ADVANCING EQUITY AND INCLUSION FOR WOMEN; TECHNICAL OPPORTUNITIES PROGRAM
(30) CHICAGO WOMEN'S HEALTH CENTER 1025 W SUNNYSIDE AVE STE 201 CHICAGO,IL 60640	36-2922469	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(31) CHILDREN'S BEST INTEREST PROJECT 2522 W WINNEMAC AVE STE 1 CHICAGO,IL 60625	45-5441381	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(32) CHINESE MUTUAL AID ASSOCIATION 1016 W ARGYLE CHICAGO,IL 60640	36-3139799	501(C)(3)	15,000	0			YOUNG WOMEN WARRIORS PROGRAM
(33) COMMUNITIES UNITED 4600 W PALMER CHICAGO,IL 60639	36-4394374	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(34) COMMUNITY ORGANIZING AND FAMILY ISSUES (COFI) 2245 S MICHIGAN AVE STE 200 CHICAGO,IL 60616	36-4044632	501(C)(3)	30,000	0			GENERAL OPERATING SUPPORT
(35) COMMUNITYHEALTH 2611 W CHICAGO AVE CHICAGO,IL 60622	36-3831793	501(C)(3)	5,500	0			GENERAL OPERATING SUPPORT
(36) CONNECTIONS FOR ABUSED WOMEN AND THEIR CHILDREN 1116 N KEDZIE AVE 5TH FLOOR CHICAGO,IL 60651	36-2950380	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT; IMPACT AWARD
(37) CROSSROADS FUND 3411 W DIVERSEY PKWY STE 20 CHICAGO,IL 60647	36-3092907	501(C)(3)	7,500	0			GENERAL OPERATING SUPPORT AND CULTIVATE: WOMEN OF COLOR LEADERSHIP
(38) DARREN B EASTERLING CENTER FOR RESTORATIVE PRACTICES 503 E 61ST STREET CHICAGO,IL 60637	81-4493626	501(C)(3)	15,000	0			THERAPEUTIC INTERVENTION MODEL FOR BLACK WOMEN
(39) DEBORAH'S PLACE 2822 W JACKSON BLVD CHICAGO,IL 60612	36-3382973	501(C)(3)	30,000	0			GENERAL OPERATING SUPPORT
(40) ENLACE CHICAGO 2759 S HARDING AVE CHICAGO,IL 60623	36-3727669	501(C)(3)	20,000	0			CHW PEER SUPPORT NETWORK
(41) EQUAL HOPE 300 S ASHLAND AVE CHICAGO,IL 60402	26-2264895	501(C)(3)	51,000	0			NORTHSHORE WOMEN'S HEALTH DISPARITIES REDUCTION PROGRAM; GENERAL OPERATING SUPPORT
(42) ERIE FAMILY HEALTH CENTER 1701 W SUPERIOR ST 3RD FLOOR CHICAGO,IL 60622	36-3088628	501(C)(3)	15,000	0			REPRODUCTIVE HEALTH PROGRAM
(43) EVERTHRIVE ILLINOIS 1006 S MICHIGAN AVE STE 200 CHICAGO,IL 60605	36-3651051	501(C)(3)	50,000	0			GENERAL OPERATING SUPPORT
(44) FAMILY CHRISTIAN HEALTH CENTER 31 W 155TH ST HARVEY,IL 60426	36-4346917	501(C)(3)	15,000	0			ELIMINATING MATERNAL MORTALITY
(45) FAMILY RESCUE MS JOYCE COFFEE PO BOX 17528 CHICAGO,IL 60617	36-3170408	501(C)(3)	45,000	0			ENGLEWOOD WOMEN'S INITIATIVE; GENERAL OPERATING SUPPORT
(46) FIREBIRD COMMUNITY ARTS 2651 W LAKE ST CHICAGO,IL 60612	36-3639885	501(C)(3)	15,000	0			PROJECT FIRE
(47) FOCUS FAIRIES MENTORING 10736 S EBERHART AVE CHICAGO,IL 60609	82-1147254	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(48) FREE ROOT OPERATION 220 N GREEN ST CHICAGO,IL 60607	85-1329885	501(C)(3)	35,700	0			BLACK GIRL BLOOM; GENERAL OPERATING SUPPORT; SOUTHSIDE GIVING CIRCLE MATCH
(49) FUND FOR JUSTICE DBA CHICAGO APPLESEED CENTER FOR FAIR COURTS 750 N LAKE SHORE DRIVE CHICAGO,IL 60611	23-7059214	501(C)(3)	10,000	0			FREEDOM FROM VIOLENCE
(50) GADS HILL CENTER 1919 W CULLERTON ST CHICAGO,IL 60608	36-2167082	501(C)(3)	15,000	0			HEALTHY MOVES
(51) GIRLFORWARD PO BOX 607516 CHICAGO,IL 60660	45-2987277	501(C)(3)	30,000	0			GENERAL OPERATING SUPPORT
(52) GIRLS INC OF CHICAGO 2212 S MICHIGAN AVE STE 210 CHICAGO,IL 60616	81-4491475	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(53) GLOBAL GIRLS INC 8151 S SOUTH CHICAGO AVE CHICAGO,IL 60617	36-4367027	501(C)(3)	10,000	0			WOMEN AND GIRLS WELLNESS PROJECT
(54) GROW YOUR OWN TEACHERS 1901 W CARROLL AVE STE 201 CHICAGO,IL 60612	20-8324406	501(C)(3)	45,000	0			GENERAL OPERATING SUPPORT
(55) GYRLS IN THE HOOD FOUNDATION 944 W 71ST ST CHICAGO,IL 60621	81-4646922	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(56) HANA CENTER 4300 N CALIFORNIA AVE CHICAGO,IL 60618	36-2746468	501(C)(3)	15,000	0			WOMEN MOVING FORWARD TOGETHER
(57) HEALING TO ACTION 333 S MICHIGAN AVE STE H696 CHICAGO,IL 60604	81-4546742	501(C)(3)	22,000	0			SCHOLARSHIPS FOR SURVIVOR POWER INSTITUTE; GENERAL OPERATING SUPPORT
(58) HEART WOMEN & GIRLS 818 E 63RD ST CHICAGO,IL 60637	27-3625796	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(59) HEARTLAND ALLIANCE'S NATIONAL IMMIGRANT JUSTICE CENTER 224 S MICHIGAN AVE STE 600 CHICAGO,IL 60604	36-1877640	501(C)(3)	25,000	0			GENDER JUSTICE INITIATIVE
(60) HEARTLAND HUMAN CARE SERVICES 208 S LASALLE ST STE 1300 CHICAGO,IL 60604	36-4053244	501(C)(3)	50,000	0			IDEA (IMAGINE, DEDICATE, EARN, ACHIEVE)
(61) HUSTLE MOMMIES 110 N KENILWORTH 1C OAK PARK,IL 60301	46-4681276	501(C)(3)	27,700	0			THE MOM WHO GREW FROM CONCRETE; HUSTLE MOMMIES MOMPRENEUR COUNCIL
(62) ILLINOIS CAUCUS FOR ADOLESCENT HEALTH PO BOX 477629 CHICAGO,IL 60647	36-3223988	501(C)(3)	42,000	0			GENERAL OPERATING SUPPORT
(63) ILLINOIS CONTRACEPTIVE ACCESS NOW (ICAN) - A PROJECT OF ALLIANCECHICAGO 225 W ILLINOIS ST 5TH FLOOR CHICAGO,IL 60654	81-5434098	501(C)(3)	22,000	0			GENERAL OPERATING SUPPORT
(64) ILLINOIS PRISON PROJECT 53 W JACKSON BLVD STE 1056 CHICAGO,IL 60604	83-4052929	501(C)(3)	12,000	0			INCARCERATED WOMEN & SURVIVORS PROJECT
(65) IMMIGRANT SOLIDARITY DUPAGE 311 S NAPERVILLE RD SUITE 3 WHEATON,IL 60187	27-2978949	501(C)(3)	6,000	0			LATINA EMPOWERMENT INTIATIVE
(66) INELLAS RESTORATION CENTER 1505 WASHINGTON BLVD MAYWOOD,IL 60153	84-2342173	501(C)(3)	6,000	0			GENERAL OPERATING SUPPORT
(67) JANE ADDAMS RESOURCE CORPORATION 4432 N RAVENSWOOD CHICAGO,IL 60640	36-3682559	501(C)(3)	100,000	0			GENERAL OPERATING SUPPORT; CAREERS IN MANUFACTURING FOR WOMEN
(68) JANE ADDAMS SENIOR CAUCUS 1111 N WELLS STE 302 CHICAGO,IL 60610	36-3476552	501(C)(3)	25,000	0			GENERAL OPERATING
(69) KAN-WIN PO BOX 996 PARK RIDGE,IL 60068	36-3752338	501(C)(3)	25,000	0			MULTILINGUAL DOMESTIC AND SEXUAL VIOLENCE PROGRAM
(70) KENWOOD OAKLAND COMMUNITY ORGANIZATION 4242 S COTTAGE GROVE AVE CHICAGO,IL 60653	36-2598637	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(71) LADIES OF VIRTUE 1245 S MICHIGAN AVE STE 149 CHICAGO,IL 60605	80-0530610	501(C)(3)	85,000	0			GENERAL OPERATING SUPPORT; CAPACITY BUILDING SUPPORT
(72) LAKE COUNTY CRISIS CENTER (A SAFE PLACE) 2710 17TH ST ZION,IL 60099	36-3032700	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(73) LATINO UNION OF CHICAGO 4811 N CENTRAL PARK CHICAGO,IL 60625	61-1403712	501(C)(3)	20,000	0			HOUSEHOLD WORKER ORGANIZING
(74) LATINOS PROGRESANDO 3047 W CERMAK RD CHICAGO,IL 60623	36-4355072	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(75) LAW CENTER FOR BETTER HOUSING 33 N LASALLE ST STE 900 CHICAGO,IL 60602	36-3134577	501(C)(3)	30,000	0			ENGLEWOOD WOMEN'S INITIATIVE
(76) LIFE IS WORK 5463 W CHICAGO AVE CHICAGO,IL 60651	82-3436927	501(C)(3)	12,000	0			GENERAL OPERATING SUPPORT
(77) LIFE SPAN 70 E LAKE ST STE 600 CHICAGO,IL 60601	36-2991281	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(78) LIFT-CHICAGO 4601 S COTTAGE GROVE AVE CHICAGO,IL 60653	52-2168409	501(C)(3)	30,000	0			GENERAL OPERATING SUPPORT
(79) LIVE FREE CHICAGO 4445 S KING DR CHICAGO,IL 60653	81-5487128	501(C)(3)	12,000	0			GENERAL OPERATING SUPPORT
(80) LOGAN SQUARE NEIGHBORHOOD ASSOCIATION 2840 N MILWAUKEE AVE CHICAGO,IL 60618	36-2638491	501(C)(3)	15,000	0			PARENT MENTOR PROGRAM/LOS PADRES MENTORES
(81) LOVE UNITY & VALUES (LUV) INSTITUTE 1507 E 53RD STREET CHICAGO,IL 60615	45-4329663	501(C)(3)	80,000	0			LADIES OF LEADERSHIP; CAPACITY BUILDING SUPPORT
(82) LWC STUDIOS 5268 NICHOLSON LANE KENSINGTON,MD 20895	47-3669656	501(C)(3)	15,000	0			100 LATINA BIRTHDAYS
(83) MEAN GIRLS EMPOWERMENT PO BOX 1508 SOUTH HOLLAND,IL 60473	81-0929818	501(C)(3)	7,700	0			GENERAL OPERATING SUPPORT
(84) MARGARET'S VILLAGE 7315 SOUTH YALE CHICAGO,IL 60621	36-3104655	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(85) METROPOLITAN FAMILY SERVICES 101 N WACKER DR STE 1700 CHICAGO,IL 60606	36-2167940	501(C)(3)	30,000	0			ENGLEWOOD WOMEN'S INITIATIVE
(86) MIDWEST ACCESS COALITION PO BOX 408363 CHICAGO,IL 60640	47-2160168	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(87) MIDWEST ACCESS PROJECT 3130 N ROCKWELL CHICAGO,IL 60618	20-8336719	501(C)(3)	6,000	0			GENERAL OPERATING SUPPORT
(88) MIKVA CHALLENGE 200 S MICHIGAN AVE STE 1000 CHICAGO,IL 60604	52-2033353	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(89) MITCHELL MUSEUM OF THE AMERICAN INDIAN 3001 CENTRAL ST EVANSTON,IL 60201	20-0679235	501(C)(3)	12,000	0			GENERAL OPERATING SUPPORT
(90) MOTHER & CHILD ALLIANCE 917 W 18TH ST CHICAGO,IL 60608	36-4432079	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(91) MOTHERS' MILK BANK OF THE WESTERN GREAT LAKES 1691 ELMHURST ROAD ELK GROVE VILLAGE,IL 60007	45-3994836	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(92) MOTHERS OPPOSED TO VIOLENCE EVERYWHERE 3147 W DOUGLAS BLVD CHICAGO,IL 60623	27-0685132	501(C)(3)	12,000	0			GENERAL OPERATING SUPPORT
(93) MUJERES LATINAS EN ACCION 2124 W 21ST PL CHICAGO,IL 60608	36-2877520	501(C)(3)	22,500	0			VOCES UNIDAS; GENERAL OPERATING SUPPORT
(94) NATIONAL ABLE NETWORK INC 567 W LAKE ST STE 1150 CHICAGO,IL 60661	23-7339397	501(C)(3)	50,000	0			WOMEN'S IT CAREER LAB TRAINING PROGRAM
(95) NATIONAL ASIAN PACIFIC AMERICAN WOMENS FORUM PO BOX 13255 CHICAGO,IL 60613	36-4799986	501(C)(3)	35,000	0			CHICAGO REPRODUCTIVE JUSTICE ORGANIZING PROJECT
(96) NEW COMMUNITY OUTREACH 3627 S COTTAGE GROVE AVE CHICAGO,IL 60653	82-3088298	501(C)(3)	10,000	0			KEY YOUTH RESTORATIVE JUSTICE PROGRAM
(97) NEXT MOVE COMMUNITY SERVICES 3224 RIDGE RD LANSING,IL 60438	84-1785756	501(C)(3)	10,000	0			NEXT MOVE WORKFORCE DEVELOPMENT PROGRAM
(98) NORTH SUBURBAN LEGAL AID CLINIC 3500 WESTERN AVENUE HIGHLAND PARK,IL 60035	47-2859426	501(C)(3)	18,000	0			GENERAL OPERATING SUPPORT
(99) NORTHWEST SIDE HOUSING CENTER 5233 W DIVERSEY AVE CHICAGO,IL 60639	20-1413891	501(C)(3)	20,000	0			WOMEN FORWARD CHICAGO
(100) OF COLOR INC 2033 W 95TH ST CHICAGO,IL 60643	36-4840123	501(C)(3)	52,000	0			CAPACITY BUILDING SUPPORT; GENERAL OPERATING SUPPORT
(101) ONE ROOF CHICAGO PO BOX 25325 CHICAGO,IL 60625	83-3495607	501(C)(3)	17,000	0			GENERAL OPERATING SUPPORT
(102) OPEN STUDIO PROJECT INC 903 SHERMAN AVE EVANSTON,IL 60202	36-3894275	501(C)(3)	8,000	0			ART & MENTAL HEALTH WELLNESS FOR WOMEN AND GIRLS
(103) ORGANIZING NEIGHBORHOODS FOR EQUALITY NORTHSIDE 4648 N RACINE CHICAGO,IL 60640	51-0137583	501(C)(3)	25,000	0			WOMEN OF COLOR TABLE
(104) PEER HEALTH EXCHANGE CHICAGO 1423 BROADWAY 1059 OAKLAND,CA 94612	56-2374305	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(105) PLANNED PARENTHOOD OF ILLINOIS PO BOX 735332 CHICAGO,IL 60673	36-2170901	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(106) POLISHED PEBBLES 10816 S PARNELL CHICAGO,IL 60628	51-0677821	501(C)(3)	15,000	0			PINK HARD HATS
(107) PROJECT EXPLORATION 4511 S EVANS CHICAGO,IL 60653	36-4305660	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(108) REBIRTH SOCIETY 604 MCCULLOUGH AVE NE HUNTSVILLE,AL 35801	81-2945569	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT (MULTIPLE PROJECTS)
(109) REFUGEEONE 6008 N CALIFORNIA AVE CHICAGO,IL 60659	36-3817743	501(C)(3)	25,000	0			WOMEN'S HEALTH PROJECT; IMPACT AWARD
(110) RESILIENCE 180 N MICHIGAN AVE STE 600 CHICAGO,IL 60601	36-3049386	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(111) ROGER BALDWIN FOUNDATION OF THE ACLU INC 150 N MICHIGAN AVE STE 600 CHICAGO,IL 60601	36-2682569	501(C)(3)	40,000	0			WOMEN'S AND REPRODUCTIVE RIGHTS PROJECT (WRRP)
(112) SARAH'S INN 1547 CIRCLE AVE FOREST PARK,IL 60130	36-3084461	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(113) SEXPECTATIONS CHICAGO NFP 3300 W POTOMAC CHICAGO,IL 60651	86-2425763	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(114) SHEWILL LEGACY NFP 2650 W 69TH ST CHICAGO,IL 60629	88-2101982	501(C)(3)	10,000	0			SOUTHSIDE GIVING CIRCLE MATCH; SHEWILL LEGACY EMPOWERMENT PROGRAM
(115) SHRIVER CENTER ON POVERTY LAW 67 E MADISON STE 2000 CHICAGO,IL 60603	36-3151279	501(C)(3)	25,000	0			WOMEN'S LAW & POLICY INITIATIVE
(116) SISTA AFYA COMMUNITY CARE NFP 1817 E 71ST ST CHICAGO,IL 60649	85-2035370	501(C)(3)	40,000	0			GENERAL OPERATING SUPPORT; HOLISTIC MENTAL WELLNESS CARE
(117) SISTERREACH 2811 CLARKE RD MEMPHIS,TN 38115	45-4013343	501(C)(3)	25,000	0			GENERAL OPERATING SUPPORT
(118) SOUTHSIDE CENTER OF HOPE 820 SOUTH INDEPENDENCE BLVD CHICAGO,IL 60624	36-3332673	501(C)(3)	61,000	0			GENERAL OPERATING SUPPORT; CAPACITY BUILDING SUPPORT
(119) SYRIAN COMMUNITY NETWORK 5439 N BROADWAY CHICAGO,IL 60640	47-3105667	501(C)(3)	10,000	0			SCN'S REFUGEE WOMEN'S SUPPORT CIRCLE
(120) TAPROOTS INC 2718 W ADAMS ST 2ND FLOOR CHICAGO,IL 60612	36-3041825	501(C)(3)	10,000	0			COLORED GIRLS ARE COVER GIRLS
(121) TARGET HOPE 4713 BLARNEY DR MATTESON,IL 60443	36-3933644	501(C)(3)	20,000	0			SATURDAY ACADEMY ACADEMIC ACHIEVEMENT
(122) TEAMWORK ENGLEWOOD 815 W 63RD ST 2ND FLOOR CHICAGO,IL 60621	74-3102944	501(C)(3)	70,000	0			GENERAL OPERATING SUPPORT
(123) TELPOCHCALLI COMMUNITY EDUCATION PROJECT 2832 W 24TH BLVD CHICAGO,IL 60623	71-0961074	501(C)(3)	15,000	0			SALUD (HEALTH)
(124) THE DREAMCATCHER FOUNDATION 5401 S HYDE PARK BLVD CHICAGO,IL 60615	56-2640816	501(C)(3)	20,000	0			GENERAL OPERATING SUPPORT
(125) THE HARBOUR INC 1440 RENAISSANCE DRIVE PARK RIDGE,IL 60068	36-2627480	501(C)(3)	8,000	0			EXPERIENTIAL LEARNING
(126) THE NETWORK ADVOCATING AGAINST DOMESTIC VIOLENCE 33 N DEARBORN ST CHICAGO,IL 60602	36-3331605	501(C)(3)	12,000	0			GENERAL OPERATING SUPPORT
(127) THE RESURRECTION PROJECT (TRP) 1805 S PAULINA ST CHICAGO,IL 60608	36-3576073	501(C)(3)	15,000	0			HOPE FAMILY SERVICES
(128) UPWARDLY GLOBAL 123 W MADISON ST STE 1950 CHICAGO,IL 60602	94-3346127	501(C)(3)	40,000	0			GENERAL OPERATING SUPPORT
(129) VILLAGE LEGAL AND COMMUNITY PROJECT 5113 S HARPER CHICAGO,IL 60615	87-1463966	501(C)(3)	7,700	0			"I AM BEAUTIFULLY AND WONDERFULLY MADE"
(130) WAREHOUSE WORKERS FOR JUSTICE 37 S ASHLAND AVE FIRST FLOOR CHICAGO,IL 60607	80-0792786	501(C)(3)	20,000	0			ORGANIZING WOMEN WAREHOUSE WORKERS
(131) WOMEN EMPLOYED 1 E WACKER DR STE 3110 CHICAGO,IL 60601	36-2969526	501(C)(3)	42,500	0			GENERAL OPERATING SUPPORT
(132) WOMEN FOR ECONOMIC JUSTICE 2505 S HARDING AVE STE1 CHICAGO,IL 60623	45-2218648	501(C)(3)	15,000	0			HEALING JUSTICE AND MOVEMENT
(133) WOMEN'S ALL POINTS BULLETIN - WAPB PO BOX 5323 CHICAGO,IL 60680	80-0390294	501(C)(3)	10,000	0			GENERAL OPERATING SUPPORT
(134) WOMEN'S BUSINESS DEVELOPMENT CENTER 8 S MICHIGAN AVE STE 400 CHICAGO,IL 60603	36-3488628	501(C)(3)	15,000	0			ELEVATING WOMEN CHILDCARE BUSINESS OWNERS
(135) WOMEN'S JUSTICE INSTITUTE 2150 S CANALPORT CHICAGO,IL 60608	36-2762168	501(C)(3)	15,000	0			GENERAL OPERATING SUPPORT
(136) WORKERS CENTER FOR RACIAL JUSTICE 2243-2245 E 71ST ST CHICAGO,IL 60649	45-4461270	501(C)(3)	12,000	0			BLACK WOMEN-LED POLICY AND ADVOCACY
(137) YO SOY ELLA INC 711 LYMAN AVE OAK PARK,IL 60304	80-0853586	501(C)(3)	20,500	0			GENERAL OPERATING SUPPORT; YOUNG WOMEN'S GIVING COUNCIL MATCH
(138) YWCA METROPOLITAN CHICAGO 1 N LASALLE ST STE 1700 CHICAGO,IL 60602	36-2179765	501(C)(3)	30,000	0			ENGLEWOOD WOMEN'S INITIATIVE
(139) YWCA OF EVANSTONNORTH SHORE 1215 CHURCH ST EVANSTON,IL 60201	36-2193618	501(C)(3)	15,000	0			COMPREHENSIVE DOMESTIC VIOLENCE SERVICES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 139

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	PROSPECTIVE GRANTEE ORGANIZATIONS FOR THE PRIMARY SPRING AND FALL CYCLES AND THE CATALYST FUND FOR REPRODUCTIVE JUSTICE CYCLE ARE REQUIRED TO SUBMIT A PROPOSAL REQUESTING FUNDING, INCLUDING THE PURPOSE OF THE GRANT, POPULATION TO BE SERVED, AND EXPECTED OUTCOMES. POTENTIAL GRANTEES ALSO SUBMIT CURRENT FINANCIAL INFORMATION INCLUDING AUDITS. THE PROPOSALS ARE REVIEWED BY STAFF, COMMUNITY MEMBERS, AND A BOARD-LED COMMITTEE TO DETERMINE IF FUNDING WILL BE RECOMMENDED TO THE BOARD OF DIRECTORS. THE PROPOSALS AND THE EVALUATIONS ARE PRESENTED TO THE BOARD OF DIRECTORS, AND IF APPROVED, THE PROPOSALS ARE FUNDED. UPON BOARD APPROVAL, THE PROGRAM STAFF PREPARES A RECORD WHICH OUTLINES GRANT CONDITIONS. FOR ALL PRIMARY SPRING AND FALL CYCLES AND THE CATALYST FUND FOR REPRODUCTIVE JUSTICE CYCLE GRANT AWARDS, THE GRANTEE IS REQUIRED TO SIGN A GRANT AGREEMENT LETTER AND RETURN A SIGNED COPY TO THE FOUNDATION OFFICE. ALL GRANTEES WHO ARE AWARDED GRANTS ARE REQUIRED TO SUBMIT A NARRATIVE AND FINANCIAL REPORT AT THE END OF THE FUNDING CYCLE DESCRIBING THE USES OF THE FUNDS AND THE OUTCOMES. THESE REPORTS ARE REVIEWED BY PROGRAM STAFF TO ASSURE COMPLIANCE WITH TERMS OF THE GRANT AWARDED, AND ANY ISSUES THAT ARISE AS A RESULT OF THIS REVIEW ARE FOLLOWED UP WITH THE GRANTEES. IF THE FOUNDATION LEARNS OF ANY IMPROPER EXPENDITURE OF ITS GRANT FUNDS, IT WILL PURSUE CORRECTION WITH THE GRANTEE. DONOR ADVISED FUND GRANTS ARE RECOMMENDED BY THE DONOR OF THE FUND, AND THE PROGRAM STAFF REVIEWS REQUESTS TO VERIFY 501(C)(3) STATUS AND OTHER LEGAL REQUIREMENTS. UPON VERIFICATION, DONOR ADVISED FUND GRANTS ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL. NO FINAL REPORTS ARE REQUIRED FOR DONOR ADVISED GRANTS.

Additional Data

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization? . . . . If "Yes," on line 5a or 5b, describe in Part III.	**5b**		No
6	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?	**6a**		No
b	Any related organization? . . . . If "Yes," on line 6a or 6b, describe in Part III.	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured 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	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not 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-2, 1099-MISC compensation, and/or 1099-NEC (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 FELICIA BLAKLEY PRESIDENT & CEO	(i)	247,738	0	0	0	0	247,738	0
	(ii)	0	0	0	0	17,028	17,028	0
2 LINDA WAGNER CHIEF OPERATING OFFICER	(i)	149,416	0	0	0	0	149,416	0
	(ii)	0	0	0	0	13,885	13,885	0

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.

Return Reference	Explanation

Additional Data

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ 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 the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Part 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	(d) Method of determining noncash contribution amounts
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 .				
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .	X	10	1,019,938	MARKET VALUE
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . . .				
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 . . .				
25 Other ▶ (____________)				
26 Other ▶ (____________)				
27 Other ▶ (____________)				
28 Other ▶ (____________)				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	NUMBER OF CONTRIBUTIONS IS NUMBER OF DONORS.

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
CHICAGO FOUNDATION FOR WOMEN

Employer identification number
36-3348160

Return Reference	Explanation
FORM 990, PART III, LINE 1	CFW TAKES A THREE-PRONGED APPROACH TO ACHIEVE ITS MISSION: 1) ADVOCATING FOR UNDERSERVED WOMEN AND GIRLS; 2) PROVIDING GRANT SUPPORT TO BOTH EMERGING AND ESTABLISHED ORGANIZATIONS; 3) OFFERING AN INNOVATIVE ARRAY OF LEADERSHIP DEVELOPMENT AND CAPACITY BUILDING PROGRAMMING. SERVING AS A BACKBONE ORGANIZATION, CFW CONVENES AND COORDINATES THE EFFORTS OF DIVERSE ORGANIZATIONS WORKING TO BETTER THE LIVES OF WOMEN, GIRLS, TRANS, AND GENDER NONBINARY INDIVIDUALS. THROUGH COLLECTIVE IMPACT, CFW SEEKS TO ACHIEVE LARGE-SCALE SYSTEMIC CHANGE.
FORM 990, PART VI, SECTION A, LINE 1A	THE BY-LAWS OF CHICAGO FOUNDATION FOR WOMEN STATE, IN ARTICLE VI, SECTION 2A., THAT THE EXECUTIVE COMMITTEE SHALL (I)HAVE AND EXCERCISE THE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE FOUNDATION BETWEEN MEETINGS OF THE BOARD AND (II) REVIEW ANNUALLY THE SALARY AND PERFORMANCE OF THE PRESIDENT. THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE CHAIR, THE PAST CHAIR OR CHAIR-ELECT AND THE COMMITTEE CHAIRS, OTHER THAN THE AUDIT COMMITTEE CHAIR, OF THE FOUNDATION. ADDITIONAL DIRECTORS MAY BE ADDED TO THE EXECUTIVE COMMITTEE UPON NOMINATION BY THE CHAIR AND A RESOLUTION ADOPTED BY A MAJORITY OF THE BOARD(THE "APPOINTED DIRECTORS").
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD OF DIRECTORS PASSED A RESOLUTION IN FY 2012 STATING THAT "THE BOARD OF DIRECTORS SHALL HAVE AN OPPORTUNITY TO REVIEW A FINAL DRAFT OF THE IRS FORM 990, AND THAT, AFTER SUCH REVIEW, THE AUDIT COMMITTEE CHAIR, ON ADVICE AND CONSENT OF THE AUDIT COMMITTEE, SHALL REVIEW, REVISE AS APPROPRIATE, AND APPROVE FOR SIGNATURE AND FILING, BY AN OFFICER OF CHICAGO FOUNDATION FOR WOMEN, THE IRS FORM 990 (AND APPROPRIATE STATE FILINGS)." ANNUALLY, ALL BOARD MEMBERS ARE INVITED TO A PRESENTATION OF THE IRS FORM 990 PRIOR TO SEEKING THEIR APPROVAL OF THE DOCUMENT.
FORM 990, PART VI, SECTION B, LINE 12C	PRIOR TO THE FIRST BOARD MEETING OF EACH FISCAL YEAR, ALL DIRECTORS ARE ASKED TO FILL OUT AND SIGN A CONFLICT OF INTEREST POLICY FORM. WHEN RELEVANT, COMMITTEE MEMBERS AND STAFF ARE ALSO REQUESTED TO COMPLETE THE CONFLICT OF INTEREST POLICY FORM. BEFORE ANY VOTE BY THE BOARD ON GRANTS, THE CHAIR SPECIFICALLY ASKS IF ANY VOTING MEMBER HAS ANY CONFLICT AS TO ANY ORGANIZATION THAT IS THE SUBJECT OF THE VOTE.
FORM 990, PART VI, SECTION B, LINE 15	DURING FY 2023, THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS REVIEWED THE PERFORMANCE OF THE PRESIDENT AND RECOMMENDED A COMPENSATION LEVEL BASED ON COMPARATIVE NATIONAL DATABASE INFORMATION, EDUCATION, YEARS OF EXPERIENCE, BUDGET RESPONSIBILITY AND OVERALL RESULTS FOR THE REPORTING PERIOD. THE COMPENSATION RECOMMENDATION WAS SUBMITTED TO AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST. AUDITED FINANCIAL STATEMENTS AND IRS FORM 990 CAN BE FOUND ON OUR WEBSITE AT WWW.CFW.ORG.

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