EXTENDED TO MAY 15, 2024

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Α	For the	2022 calendar year, or tax year beginning $$ $$ $$ $$ $$ $$ $$ $$ $$	UL 1, 2022 and	dending J	<u>JUN 30, 2023</u>					
В	Check if applicable	C Name of organization			D Employer identific	cation number				
	Addres	CHICAGO ARTS PARTNERSH	TPS IN EDUCATIO	N						
	Name change				36-39693	34				
	Initial return Final return/	Number and street (or P.O. box if mail is not deli 1010 W 35TH ST	vered to street address)	Room/suite 697	E Telephone numbe 312-870-					
	termin- ated		ZIP or foreign postal code	1	G Gross receipts \$	2,717,529.				
	Ameno				H(a) Is this a group re					
	Application		E JOHNSON		for subordinates					
	pendin	g SAME AS C ABOVE			H(b) Are all subordinates in					
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1)	or 527	7	list. See instructions				
J	Websit	e: WWW.CAPECHICAGO.ORG	, , , , ,		H(c) Group exemptio	n number				
K	Form of	organization: X Corporation Trust Ass	sociation Other	L Year		∧ State of legal domicile: IL				
	art I	Summary								
-	1	Briefly describe the organization's mission or most	significant activities: CAPE	INCRE	EASES STUDEN	TS'				
Activities & Governance		CREATIVITY AND CRITICAL T	HINKING THROUGH	THE A	ARTS.					
rus	2	Check this box if the organization discor	ntinued its operations or dispo	osed of more	e than 25% of its net as	ssets.				
Š	3	Number of voting members of the governing body	(Part VI, line 1a)		3	13				
ر ح	4	Number of independent voting members of the gov				13				
es 8	5	Total number of individuals employed in calendar y				14				
Ϋ́	6	Total number of volunteers (estimate if necessary)				40				
Ę	7 a	Total unrelated business revenue from Part VIII, col	lumn (C), line 12		7a	0.				
_	b	Net unrelated business taxable income from Form				0.				
					Prior Year	Current Year				
<u>•</u>	8	Contributions and grants (Part VIII, line 1h)			2,018,843.	2,088,942.				
Revenue	9				750,155.	619,124.				
ě	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)		11,314.	7,057.				
ш.	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)		34.	2,406.				
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		2,780,346.	2,717,529.				
	13	Grants and similar amounts paid (Part IX, column (A	A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15	Salaries, other compensation, employee benefits (F		·	706,769.	778,462.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), li	ne 11e)		0.	0.				
ď	b b	Total fundraising expenses (Part IX, column (D), line	e 25) 71,0)58.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		1,982,536.					
	18	Total expenses. Add lines 13-17 (must equal Part I)	K, column (A), line 25)		2,689,305.					
	19	Revenue less expenses. Subtract line 18 from line	12		91,041.					
Net Assets or Find Balances				Ве	eginning of Current Year	End of Year				
Sset	20	Total assets (Part X, line 16)			1,136,349.	1,476,136.				
et A	21				147,982.	396,797.				
	22	Net assets or fund balances. Subtract line 21 from	line 20		988,367.	1,079,339.				
_	art II	Signature Block								
		Ities of perjury, I declare that I have examined this return,				y knowledge and belief, it is				
true	e, correc	t, and complete. Declaration of preparer (other than office	r) is based on all information of w	vnich preparei	r nas any knowledge.					
٠.		Signature of officer			l Date					
Sig		KYLE JOHNSON, PRESIDENT			Date					
He	re	Type or print name and title								
		** *	Dronararia cianatura	11	Date Check	PTIN				
Pai	_{id}	Print/Type preparer's name HUGH ELLIOTT	Preparer's signature	[if L					
	parer Only	1000			FIIII S EIN 3	0 2000403				
USE	Unity	Firm's address 4320 WINFIELD ROAL WARRENVILLE, IL 60			Dhono no 63	0-665-4440				
N/-	v tha IF	RS discuss this return with the preparer shown abo			Priorie ilo. 0 3	X Yes No				
ivid	y ule it	io aiscuss ii iis retuitti witti tile preparer shown add	ve: 0cc ii isti uctio(15			∟≛⊒ 1€5 ∟INO				

	990 (2022) CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 2
Pal	t 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: CAPE INCREASES EQUITY FOR ARTS EDUCATION BY SERVING STUDENTS IN
	UNDER-RESOURCED SCHOOLS. CAPE BUILDS STUDENTS' CONFIDENCE BY ENABLING
	THEM TO EXPRESS THEMSELVES THROUGH THE ARTS, LEADING TO MORE
	PERSISTENCE AND ENGAGEMENT IN SCHOOL.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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 \$2,237,058. including grants of \$) (Revenue \$) (Revenue \$)
	CAPE WORKS WITH 50 CHICAGO AND SUBURBAN PUBLIC SCHOOLS TO FOSTER
	COLLABORATIONS AMONG PROFESSIONAL TEACHING ARTISTS, CLASSROOM TEACHERS,
	AND ARTS TEACHERS WHO INTEGRATE THE ARTS ACROSS THE CURRICULUM.
	COLLABORATIONS CAN TAKE PLACE DURING THE SCHOOL DAY OR AFTER SCHOOL,
	AND HAVE BEEN ONGOING IN SOME SCHOOLS FOR AS LONG AS 25 YEARS. CAPE
	SERVES SCHOOLS IN NEED, MOSTLY SCHOOLS THAT SERVE LOW-INCOME STUDENTS
	IN ACADEMICALLY STRUGGLING SCHOOLS. CAPE'S APPROACH TO TEACHING
	ENHANCES LEARNING IN THE ARTS AS WELL AS IN OTHER CORE ACADEMIC AREAS
	SUCH AS READING, MATH, SCIENCE, AND SOCIAL STUDIES. IN ADDITION, CAPE'S
	PROGRAMS IMPROVE SOCIAL-EMOTIONAL LEARNING AND CRITICAL THINKING
	SKILLS.
	(Code:) (Expenses \$ 36,152. including grants of \$) (Revenue \$
4b	(Code:) (Expenses \$ 36,152. including grants of \$) (Revenue \$) PROFESSIONAL DEVELOPMENT FOR TEACHERS, ARTS TEACHERS, AND TEACHING
	ARTISTS IS A CORE COMPONENT OF ALL PROGRAMS AND PROJECTS. CAPE BELIEVES
	THAT BUILDING THE CAPACITY OF EDUCATORS IS ESSENTIAL FOR LONG-TERM
	SUCCESS AND SUSTAINABILITY. PROFESSIONAL DEVELOPMENT PROGRAMS TAKE
	PLACE OVER MULTIPLE SESSIONS (USUALLY OF 12 TO 15 HOURS OVER A SCHOOL
	YEAR) AND EMPHASIZE PEER TO-PEER REFLECTION AND CRITIQUE. TEACHERS AND
	TEACHING ARTISTS ARE PROVIDED WITH STRATEGIES AND FRAMEWORKS FOR
	DEVELOPING AND PLANNING INNOVATIVE INSTRUCTION THAT MEETS NATIONAL,
	STATE AND/OR LOCAL LEARNING STANDARDS.
4c	(Code:) (Expenses \$ 49,249 • including grants of \$) (Revenue \$
	CAPE IS CONTINUALLY LEARNING AND INCORPORATING NEW STRATEGIES FOR
	IMPROVING EDUCATIONAL OPPORTUNITIES FOR ALL STUDENTS. EACH CAPE
	PROGRAM INITIATIVE INCLUDES A SUBSTANTIAL RESEARCH AND EVALUATION
	COMPONENT DESIGNED TO BUILD THE CAPACITY OF PARTICIPANTS. CAPE HAS
	BROUGHT A NEW LEVEL OF UNDERSTANDING AND INNOVATION TO THE FIELD OF
	LEARNING THROUGH THE ARTS. CAPE'S RESEARCH HAS DEMONSTRATED THAT ARTS
	LEARNING PROVIDES MULTIPLE BENEFITS FOR STUDENTS, TEACHERS, AND
	SCHOOLS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses 2,322,459.
	Form 990 (2022)

232002 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334 Page **3**

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		x
44	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10		
11	as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	- 114		
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			Х
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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	45		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- ''		 -
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

232003 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 4

Pa	rt IV Checklist of Required Schedules (continued)			ago
			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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			۱
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			۱
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3,5
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	l		v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_^
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?			x
07	If "Yes," complete Schedule R, Part V, line 2	36		_^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	_ 30		
	Check if Schedule O contains a response or note to any line in this Part V			
	Selection of Selection at Sepeciation in the manner and the selection at the selecti		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 286	5		.,,
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
•	(gambling) winnings to prize winners?	1c		
		_		

232004 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334

Page **5**

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

				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 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other $\frac{1}{2}$	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
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 A	ccounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	ا مم ا			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	100			
11	· · · · · ·	140			
a h	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against	11a			
b	amounts due or received from them.)	11b			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	IZU		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	nt income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		L_
	If "Yes." complete Form 6069.				

232005 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
h	Enter the number of voting members included on line 1a, above, who are independent1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_		2		Х
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		Х
4	of officers, directors, trustees, or key employees to a management company or other person?	4		X
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	ь		- 21
/a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	- -		Х
	more members of the governing body?	7a		Λ
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	- .		Х
_	persons other than the governing body?	7b		Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		Х	
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
40-	Did the consequence is the second sec	40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		21
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401-		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Ha	21	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	IZD	21	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	100	Х	
40	on Schedule O how this was done	12c 13	X	
13	Did the organization have a written whistleblower policy?	14	X	
14	Did the organization have a written document retention and destruction policy?	14	21	
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?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a		Х
D	Other officers or key employees of the organization	15b		Λ
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
Iba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		Х
	taxable entity during the year?	16a		Λ
D	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	401-		
800	exempt status with respect to such arrangements?	16b		
	List the states with which a copy of this Form 990 is required to be filed IL			
17 10		e only	\ avail	able
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3) for public inspection, Indicate how you made those available. Check all that apply	s only	avalla	auie
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O)			
40		al £".∞ -		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u tinat	icial	
20	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 GILES LEMMENS - 312-870-6140			
	1010 W. 35TH ST SUITE 697. CHICAGO. IL 60609			

232006 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334

Page 7

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

_	and the distributed for the order in which to liet the persons above.												
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.													
	(A)	(B)	(C)	(D)	(E)	(F)							
	Name and title	Average	Position (do not check more than one	Reportable	Reportable	Estimated							
		hours per	box, unless person is both an	compensation	compensation	amount of							
		week	officer and a director/trustee)	from	from related	other							

Name and title	Average hours per	box	not c	Pos heck ss pe	more	than	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) AMY RASMUSSEN	40.00									
EXECUTIVE DIRECTOR	1 00			Х				83,693.	0.	15,289.
(2) KEVIN MCGOWAN	1.00								_	
DIRECTOR		Х						6,435.	0.	0.
(3) WILLIAM ESTRADA	2.00								_	_
SECRETARY		Х		Х				6,215.	0.	0.
(4) JOSH NATHAN	2.00									
BOARD PRESIDENT		Х		Х				0.	0.	0.
(5) MARGARET KOREMAN	2.00									
BOARD VICE PRESIDENT		Х		Х				0.	0.	0.
(6) CAROL EASTIN	2.00									
TREASURER		Х		Х				0.	0.	0.
(7) RICHARD ASSMUS	1.00									
DIRECTOR		Х						0.	0.	0.
(8) L. TIMOTHY HALLERON	1.00									
DIRECTOR		Х						0.	0.	0.
(9) AMY NATHAN	1.00									
DIRECTOR		Х						0.	0.	0.
(10) KARRIE SULLIVAN	1.00									
DIRECTOR		Х						0.	0.	0.
(11) PHIL COTTON	1.00									
DIRECTOR		Х						0.	0.	0.
(12) KYLE JOHNSON	1.00									
DIRECTOR		Х						0.	0.	0.
(13) KIRTI PARAKH	1.00									
DIRECTOR		Х						0.	0.	0.
(14) ADAM ENGLE	1.00									
DIRECTOR		Х						0.	0.	0.
										_
		1								
		1								
		L								

232007 12-13-22

CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 8

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghes	t C	Compensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week (list any	Position (do not check more than or box, unless person is both officer and a director/truste					ne an	(D) Reportable compensation from	(E) Reportable compensation from related		Estir amo of	mated ount of ther
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	D/	fror orgar and	ensation m the nization related izations
			ul lu	드	Of	Ke	王旨	요					
											\dashv		
С	Subtotal Total from continuation sheets to Part VI	I, Section A							96,343. 0. 96,343.		0. 0.		,289. 0. ,289.
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but no compensation from the organization								<u> </u>		-		0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for so			-	-	-		_	hest compensated emp	-	ſ	3 Y	res No
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportable),000? If "Yes,	le co	mple	ensa ete S	atior Sche	and adule	otl <i>J f</i>	her compensation from for such individual	the organization		4	Х
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comption B. Independent Contractors	-				-		elat	ed organization or indivi	dual for services		5	X
1	Complete this table for your five highest conthe organization. Report compensation for t								n the organization's tax		ensa		om
	(A) Name and business	address	NO	ONE	<u> </u>				(B) Description of s	ervices	Co	(C) empens	ation
								-					
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	-	ot lii	mite	d to		se lis	tec	I above) who received m	nore than			
	+ , see er eempensation nom the organiz										F	orm 9 9	90 (2022)

CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 9

Pa	rt VI		atement of Re								
		Che	eck if Schedule O	contai	ns a respo	onse	or note to any li	ne in this Part VIII			
								(A)	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
								Total revenue	function revenue	business revenue	for a second and
											sections 512 - 514
nts nts	1 a	a Federat	ted campaigns		1a						
ar our	k	M embe	rship dues		1b						
S, G			ising events								
a #			l organizations								
s, C			ment grants (conti			1,	728,903.				
ioi			contributions, gifts,								
the later			mounts not included				360,039.				
E O	ç		contributions included in		··· —						
Contributions, Gifts, Grants and Other Similar Amounts			Valatities and and disk					2,088,942.			
							Business Code				
g	2 8	PROG	RAM SERVI	CE			611710	619,124.	619,124.		
ار کن	_ t					_		•			
Ser						_					
an eve						_					
Program Service Revenue	•					_					
P			r program service	reveni	Je	_					
			Add lines 2a-2f					619,124.			
	3		nent income (inclu								
	other similar amounts)					7,057.			7,057.		
	4		from investment								
	5	Royaltie	es								
					(i) Rea		(ii) Personal				
	6 a	Gross r	ents	6a							
	k	Less: re	ental expenses	6b							
	(Rental i	income or (loss)	6с							
	c	Net ren	tal income or (loss	<u> </u>							
	7 a	Gross ar	mount from sales of		(i) Securit	ies	(ii) Other				
		assets o	ther than inventory	7a							
	k	Less: 00	ost or other basis								
Jue		and sale	s expenses	7b							
Revenue	c	Gain or	(loss)	7с							
	(d Net gair	n or (loss)			<u></u>					
her	8 8	Gross in	come from fundraisi	ng ever	nts (not						
튐		includir	ng \$		of						
			utions reported on		•						
			line 18			8a					
			irect expenses			8b					
			ome or (loss) from		-						
	9 a		ncome from gamin			:					
			line 19			9a					
			irect expenses			9b					
			ome or (loss) from	-	-	s	 I				
	10 a		sales of inventory,								
			owances			10a		-			
			ost of goods sold			10b					
\dashv		Net inc	ome or (loss) from	sales	ot invento	ry	Business Code				
sn		MTCC	ELLANEOUS	י סד	יז דאים 77י	7	900099	2,406.	2,406.		
nec iue		-		, 1/1	. A TIAOI	<u>-</u>	700099	2,400.	2,400.		
ella	k					_		1			
Miscellaneous Revenue			r revenue			_					
Σ			Add lines 11a-11d				ı	2,406.			
	12		venue. See instruction					2,717,529.		0.	7,057.
		•									

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334 Page 10

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			Ŭ i	
	and domestic governments. See Part IV, line 21				
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,	00 002	20 216	40 465	20 202
	trustees, and key employees	98,983.	28,216.	42,465.	28,302.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	E 4 1 0 0 4	404 000	25 151	22 575
7	Other salaries and wages	541,824.	484,098.	35,151.	22,575.
8	Pension plan accruals and contributions (include	16,179.	13,063.	1,883.	1 122
_	section 401(k) and 403(b) employer contributions)	73,655.	64,517.	5,551.	1,233. 3,587.
9	Other employee benefits	47,821.	38,609.	5,567.	3,587.
10	Payroll taxes	41,041.	30,003.	5,301.	3,043.
11	Fees for services (nonemployees):				
	Management		-		
	Legal	16,888.		16,888.	
	Accounting	10,000.		10,000.	
	Lobbying Professional fundamining convices See Part IV line 17				
_	Professional fundraising services. See Part IV, line 17				
f	Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A), amount, list line 11g expenses on Sch 0.)	751,003.	750,083.	320.	600.
10	Advertising and promotion	10,582.	2,226.	4,425.	600. 3,931.
12 13	Office expenses	78,912.	10,943.	61,729.	6,240.
14	Information technology	, 0 , 5 2 2 0	20,5200	0277234	0,2100
15	Royalties				
16	Occupancy	68,419.		68,419.	
17	Travel	44,040.	31,527.	11,568.	945.
18	Payments of travel or entertainment expenses	,	, ,	,	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,164.		7,164.	
23	Insurance	16,816.		16,816.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A).				
	amount, list line 24e expenses on Schedule 0.)				
а	ARTIST FEES	784,729.	784,729.		
b	SUPPLIES AND MATERIALS	65,199.	65,199.		
С	RESEARCH AND DEVELOPMEN	49,249.	49,249.		
d	BAD DEBT	3,320.		3,320.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,674,783.	2,322,459.	281,266.	71,058.
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)				Farm 990 (2022

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

36-3969334 Page **11**

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 248,281. 341,445. Cash - non-interest-bearing 1 6,231. 6,212. 2 Savings and temporary cash investments 240,847. 270,860. Pledges and grants receivable, net 3 131,736. 126,430. Accounts receivable, net **5** Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 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 Inventories for sale or use R 365. 3,217. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 76,394. basis. Complete Part VI of Schedule D _____ 10a 43,652. 7,895. b Less: accumulated depreciation 10b 10c 410,284. 465,411. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 297,231. 14 Intangible assets 12,388. 0. Other assets. See Part IV, line 11 15 15 1,136,349. 1,476,136. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 147,982. 80,101. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, -iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 316,696. 147,982. 396,797. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 960,081. 897,068. Net assets without donor restrictions 27 27 91,299. 119,258. Net assets with donor restrictions 28 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 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 988,367. 1,079,339. Total net assets or fund balances 32 32 1,136,349. 1,476,136. Total liabilities and net assets/fund balances ...

Form	1 990 (2022) CHICAGO ARTS PARTNERSHIPS IN EDUCATION	36-	3969	334	Pa	ge 12
Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
	· · · · · · · · · · · · · · · · · · ·					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,71	7,5	29.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,67	4,7	83.
3	Revenue less expenses. Subtract line 2 from line 1	3		4	2,7	46.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		98	8,3	67.
5	Net unrealized gains (losses) on investments	5		4	8,2	26.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	1	,07	9,3	39.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
	· · · · · · · · · · · · · · · · · · ·				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:		,			
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit.				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	-				
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ					

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2022

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

Employer identification number 36-3969334

D -	1			AKINEKSIIIFS				0-3909334		
Ра	rt I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	See instructions.			
he (organ	ization is not a private found	•		•					
1	Щ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	Щ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3	Ш	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		llege or university owner	d or opera	ted by a g	overnmental unit describ	ped in		
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6	Щ	A federal, state, or local gov	vernment or governn	nental unit described in s	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	lly receives a substa	ntial part of its support f	rom a gov	ernmental	unit or from the general	public described in		
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)							
8	Щ	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a land-grant	college		
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the colleg	je or		
		university:								
10	X	An organization that norma	Ily receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, membership fees, a	nd gross receipts from		
		activities related to its exem	npt functions, subjec	et to certain exceptions;	and (2) no	more than	n 33 1/3% of its support	from gross investment		
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.		
		See section 509(a)(2). (Cor	mplete Part III.)							
11	Ш	An organization organized a	and operated exclus	ively to test for public sa	fety. See	section 50)9(a)(4).			
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	e purposes of one or		
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 509(a)(3). (Check the box on		
		lines 12a through 12d that	describes the type o	of supporting organizatio	n and con	nplete lines	s 12e, 12f, and 12g.			
а			anization operated, s	upervised, or controlled	by its sup	ported org	ganization(s), typically by	giving giving		
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting		
		organization. You must c	complete Part IV, Se	ections A and B.						
b			anization supervised	or controlled in connec	tion with it	s support	ed organization(s), by ha	aving		
		control or management o	f the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported		
	_	organization(s). You mus	t complete Part IV,	Sections A and C.						
С			grated. A supporting	g organization operated	in connec	tion with, a	and functionally integrat	ed with,		
		its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.			
d			/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organ	ization(s)		
		that is not functionally int	egrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	iveness		
		requirement (see instructi	•	-						
е		☐ Check this box if the orga					a Type I, Type II, Type III			
		functionally integrated, or		nally integrated support	ing organi	zation.				
f		er the number of supported of	•					,		
g		vide the following information i) Name of supported	about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other		
	,	organization	(II) EIIV	(described on lines 1-10	in your governi	ng document?	support (see instructions)	support (see instructions)		
		g		above (see instructions))	Yes	No				

Schedule A (Form 990) 2022 CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 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	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support			1	1		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	•				12	
13	First 5 years. If the Form 990 is for the	•		•	•	. , . ,	
800	organization, check this box and stor	here	roontogo				<u></u>
	ction C. Computation of Publ			(6)			0/
	Public support percentage for 2022 (14	<u>%</u>
	Public support percentage from 2021 33 1/3% support test - 2022. If the co						%
Iba							
h	stop here. The organization qualifies						
D	33 1/3% support test - 2021. If the condition have						
170	and stop here. The organization qual 10% -facts-and-circumstances tes						
17 a							
	and if the organization meets the fact meets the facts-and-circumstances to					_	
h	10% -facts-and-circumstances tes	-		*	-	17a and line 15 is	
D	more, and if the organization meets the	-					1070 UI
	organization meets the facts-and-circ						
18	Private foundation. If the organization		-	•			ns
	ato roandation. It the organizatio	did Hot offect a	SON OF HIS TO, TO	رم, ۱۵۵, ۱۲۵, ۱۲۵ ا	S, OHOUR THIS DUX ((Form 990) 2022
						20 Wait /1	,

232022 12-09-22

Schedule A (Form 990) 2022

CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 3

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.)

	qualify under the tests listed b	elow, please comp	lete Part II.)					
Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1,583,417.	1,502,601.	2,202,882.	2,018,843.	2,088,942.	9,396,685.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	130,895.	35,700.	312,033.	750,155.	619,124.	1,847,907.	
3	Gross receipts from activities that	-	-	-	-	-	<u> </u>	
_	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
·	ization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 5	1,714,312.	1,538,301.	2,514,915.	2,768,998.	2,708,066.	11,244,592.	
7 <i>a</i>	Amounts included on lines 1, 2, and		16 500	00 050	00 004		102 106	
	3 received from disqualified persons	6,094.	16,500.	23,250.	29,904.	27,448.	103,196.	
t	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						0.	
	Add lines 7a and 7b	6,094.	16,500.	23,250.	29,904.	27,448.	103,196.	
	Public support. (Subtract line 7c from line 6.)			,	,	,	11,141,396.	
	ction B. Total Support							
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 6	1,714,312.	1,538,301.	2,514,915.	2,768,998.	2,708,066.	11,244,592.	
	Gross income from interest,	_,:==,:==•	_,===,===•	_,,•		_,,		
	dividends, payments received on securities loans, rents, royalties, and income from similar sources	10,609.	8,110.	12,819.	11,314.	7,057.	49,909.	
b	Unrelated business taxable income						_	
	(less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b	10,609.	8,110.	12,819.	11,314.	7,057.	49,909.	
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.)	9,946.	2.	503.	34.	2,406.	12,891.	
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,734,867.	1,546,413.	2,528,237.	2,780,346.	2,717,529.	11,307,392.	
14	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,	
	check this box and stop here				<u></u>	<u></u>		
Sec	ction C. Computation of Publ	ic Support Per	centage					
15	Public support percentage for 2022 (ine 8, column (f), di	vided by line 13,	column (f))		15	98.53 %	
16 Public support percentage from 2021 Schedule A, Part III, line 15							98.34 %	
Sec	ction D. Computation of Inves	stment Income	Percentage				_	
17	Investment income percentage for 20	22 (line 10c, colum	ın (f), divided by li	ne 13, column (f))		17	.44 %	
18								
19a	33 1/3% support tests - 2022. If the					3 1/3%, and line 1		
	more than 33 1/3%, check this box a						v	
b	33 1/3% support tests - 2021. If the							
	line 18 is not more than 33 1/3%, che	-						
20	Private foundation. If the organization							

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	_		
	1		
	2		
	За		
	sa		
	3b		
	3с		
	4a		
	4b		
	4c		
	70		
	5a		
_	5b		
	5c		
	6		
	0		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	401		
	10b /Eorr	n 990	2022

232024 12-09-22

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c be	elow, the governing body of a supported organization?	11a		
b	A fami	ily member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sect	ion E	3. Type I Supporting Organizations			
		1		Yes	No
1		e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	_	ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	•	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		If how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sect		vised, or controlled the supporting organization. C. Type II Supporting Organizations			
-		7. Typo ii capporting organizationo		Yes	No
1	Were:	a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sect		D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organi	ization'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			
	organi	ization'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			
	organi	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
		cant voice in the organization's investment policies and in directing the use of the organization's			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Soci		orted organizations played in this regard. Type III Functionally Integrated Supporting Organizations	3		
1 a		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). The organization satisfied the Activities Test. Complete line 2 below.	•		
b		The organization satisfied the Activities rest. <i>Complete line 2 bolow.</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns)	
2		ties Test. Answer lines 2a and 2b below.		Yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		ipported 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 th	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		It the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
		t of Supported Organizations. Answer lines 3a and 3b below.			
		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each	01-		
	OT ITS S	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		l

232025 12-09-22

Sche	edule A (Form 990) 2022 CHICAGO ARTS PARTNERSH	IPS II	N EDUCATION	36-3969334 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust o	n Nov. 20, 1970 (e <i>xplain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complet	te Sections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
_4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check have if the current year is the arganization's first as a non-functions	ally into ave	tad Tupa III augnostina ar	anization (and

Schedule A (Form 990) 2022

instructions).

Schedule A (Form 990) 2022 CHICAGO ARTS PARTNERSHIPS IN EDUCATION 36-3969334 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ued)	•
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ıs	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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 to	he organization is responsive	Э		
	(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	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
<u>_i</u>	Carryover from 2017 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
_	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
<u>C</u>	Excess from 2020				

Schedule A (Form 990) 2022

d Excess from 2021e Excess from 2022

Schedule A	(Form 990) 2022	CHICAGO	ARTS	PARTNER	SHIPS	IN	EDUCATIO	N 36-3969334 _F	Page 8
	Supplemental Information Part IV, Section A, lines 1	mation. Provi , 2, 3b, 3c, 4b, 4 lines 2 and 3; Pa	de the exp c, 5a, 6, 9a art IV, Sect	lanations require a, 9b, 9c, 11a, 1 ion E, lines 1c, 2	ed by Part 1b, and 11 2a, 2b, 3a,	II, line c; Parl and 3b	10; Part II, line 1 : IV, Section B, li o; Part V, line 1; F	7a or 17b; Part III, line 12; nes 1 and 2; Part IV, Section (Part V, Section B, line 1e; Part	 O,
	(See instructions.)								

232028 12-09-22 Schedule A (Form 990) 2022

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

Open to Public Inspection

Name of the organization

CHICAGO ARTS PARTNERSHIPS IN EDUCATION

Employer identification number 36-3969334

Pai		ed Funds or Other Similar Funds	or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lin						
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in		d funds				
	are the organization's property, subject to the organization's	_					
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor of						
	impermissible private benefit?		Yes No				
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	rt IV, line 7.				
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).					
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a	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 quali	fied conservation contribution in the form of					
	day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c				
d	Number of conservation easements included in (c) acquired						
	historic structure listed in the National Register						
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	organization during the tax				
	year						
4	Number of states where property subject to conservation ea						
5	Does the organization have a written policy regarding the pe						
_	violations, and enforcement of the conservation easements i						
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation easements during the year				
7	Amount of expanses incurred in monitoring inspecting have	dling of violations, and enforcing concernation	on accoments during the year				
7	Amount of expenses incurred in monitoring, inspecting, hand	diling of violations, and emorcing conservation	on easements during the year				
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170/h)(4)(B)(i)				
Ü	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservati						
5	balance sheet, and include, if applicable, the text of the footi	•					
	organization's accounting for conservation easements.	note to the organization of financial statement	its that describes the				
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	ner Similar Assets.				
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	d balance sheet works				
	of art, historical treasures, or other similar assets held for pul	· ·					
	service, provide in Part XIII the text of the footnote to its final						
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and ba	alance sheet works of				
	art, historical treasures, or other similar assets held for public						
	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		' <u>-</u>				
2	If the organization received or held works of art, historical tre						
	the following amounts required to be reported under FASB A						
а	Revenue included on Form 990, Part VIII, line 1		\$				
	Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Form 990) 2022				

232051 09-01-22

		ARTS PART						36-39			e 2
	t III Organizations Maintaining C									ued)	
3	Using the organization's acquisition, access	on, and other recor	ds, check an	of the	following tha	t make	significa	ant use of its			
	collection items (check all that apply):										
а	Public exhibition	•			hange progra						
b	Scholarly research	•	Othe	er							
С	<u> </u>										
4											
5	During the year, did the organization solicit of		•						7		
D	to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Pai	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, custod		-						٦		
	on Form 990, Part X?							L	」Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table	:					A		
							<u> </u>		Amount		
	Beginning balance										
	Additions during the year										
	Distributions during the year							_			
	Ending balance						<u>1</u> 1	f	T		
	Did the organization include an amount on F	•	•					L	Yes		No
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII										
Pai	Elidowillent Fullus. Complete							ee years back	(a) Four	voare he	nok
		(a) Current year	(b) Prior	year	(C) TWO year	5 Dack	(a) 11116	ee years back	(e) 1 oui	ytais na	ICK
	Beginning of year balance								 		
	Contributions								—		
	Net investment earnings, gains, and losses								<u> </u>		
	Grants or scholarships								<u> </u>		
е	Other expenditures for facilities								İ		
	and programs										
f	Administrative expenses										
g	End of year balance								<u> </u>		
2	Provide the estimated percentage of the cur	•		olumn (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С		%									
	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ession of the organiz	zation that are	e held a	nd administe	ered for t	the		Г	V 1	
	organization by:									Yes I	No_
	(i) Unrelated organizations								3a(i)		
_	(ii) Related organizations								3a(ii)		
	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		owment fund	S.							
Pai	t VI Land, Buildings, and Equipm		0 David IV II:a	- 11 - 0	` F 000) D-4 V	: line 10	,			
	Complete if the organization answere										
	Description of property	(a) Cost or o			or other		ccumul		(d) Book	value	
		basis (invest	ment)	basis ((otner)	de	preciati	on			
	Land										
	Buildings										
	Leasehold improvements			2	2 172		20	260		20	
	Equipment				3,473.			268.		,20	
	Other		· · · · · · · · · · · · · · · · · · ·		2,921.		4,	474.		3,44 3,65	
rotal	. Add lines 1a through 1e. (Column (d) must e	guai Form 990, Par	. л. coiumn (E	5), IINE 1	UC.)				4.3	,, 00	4•

Schedule D (Form 990) 2022

	S PARTNERSHII	S IN EDUCATION	36-3969334 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost o	r end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost o	r end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 900 Part IV line	a 11d Soc Form 990 Part V line 15	
	Description	FITA. Gee Form 990, Fart X, line 13.	(b) Book value
(1)			(2) 2001. 14.40
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, lin	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			216 606
(2) OPERATING LEASE LIABILITY			316,696.
(3)			
(4)			
(5) (6)			
<u>(6)</u>			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		316,696.
	,	*********	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

_	dule D (Form 990) 2022 CHICAGO ARTS PARTNERSHIPS				3969334	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statem		Revenue per R	Return		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				2 765	7
1	Total revenue, gains, and other support per audited financial statements			1	2,765	,/55.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	10 226			
a	Net unrealized gains (losses) on investments		48,226.	-		
b	Donated services and use of facilities			-		
	Recoveries of prior year grants			-		
	Other (Describe in Part XIII.) Add lines 2a through 2d			1	48	,226.
_	•			2e 3	2,717	529.
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	4,717	, 525.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)			-		
	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line 12.</i>)			5	2,717	
	t XII Reconciliation of Expenses per Audited Financial Stater					,
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12					
1	Total expenses and losses per audited financial statements			1	2,674	,783.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
	Prior year adjustments					
С	Other losses					
d	Other (Describe in Part XIII.)					
	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	2,674	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					•
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIII.)					
	Add lines 4a and 4b			4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,674	
	t XIII Supplemental Information.					
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt 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 ac	dditional inforn	nation.			
PAI	RT X, LINE 2:					
CAI	PE FILES INCOME TAX RETURNS IN THE U.S. F	EDERAL	JURISDICTI	ON Z	AND	
			~			
ТГТ	INOIS. WITH FEW EXCEPTIONS, CAPE IS NO	LONGER	SUBJECT TO	0.8	5. FEDE	RAL,
ст	THE AND LOCAL OF MONTHS TAKENDED AVERAL	MTNTN MTO	MC DV MAV	7 TTMT		a
517	TTE AND LOCAL, OR NON-U.S. INCOME TAX EXAM	MINATIO.	NS BY TAX	AUTI	10RTTLE	5
₽∩I	YEARS BEFORE 2020. CAPE DOES NOT EXPECT	у Муш е.	DIAI NEM C	ינו א אזר	ים דאז	
FUI	TIEARS BEFORE 2020. CAPE DOES NOT EXPECT	A MAIL	KIAL NEI C	MAIN	3C IN	
TINI	RECOGNIZED TAX BENEFITS IN THE NEXT TWELVE	г м∩мтн	Q			
OIVI	RECOGNIZED TAX DENEFTIS IN THE NEXT IMEDIA	E MONTH	.			
-						
-						

Schedule D (Form 990) 2022

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 Form 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 ARTS PARTNERSHIPS IN EDUCATION

Employer identification number 36-3969334

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS PRESENTED TO THE BOARD OF DIRECTORS BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

MEMBERS ARE REQUIRED TO SIGN A FORM STATING THAT THEY ARE NEITHER IN

VIOLATION OF THE CONFLICT OF INTEREST POLICY, NOR FORESEE ANY VIOLATIONS

WITHIN THE TERMS PRESENTED IN THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15A:

A SPECIAL BOARD COMMITTEE REVIEWS THE EXECUTIVE DIRECTOR'S PERFORMANCE AND USES DATA FROM NON-PROFIT ORGANIZATIONS OF COMPARABLE SIZE AND STRUCTURE TO DETERMINE COMPENSATION.

LINE 15B: THE EXECUTIVE DIRECTOR DECIDES SALARY AND PAY RAISES FOR ALL MEMBERS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION C, LINE 19:

SOME GOVERNING DOCUMENTS MAY BE VIEWED ON THE WEBSITE OF CHICAGO ARTS

PARTNERSHIPS IN EDUCATION. ALL OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

TEACHER STIPENDS:

PROGRAM SERVICE EXPENSES 535,239.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 535,239.

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization CHICAGO ARTS PARTNERSHIPS IN EDUCATION	Employer identification number 36-3969334
NON-TEACHING PERSONNEL AND PRESENTERS:	
PROGRAM SERVICE EXPENSES	214,844.
MANAGEMENT AND GENERAL EXPENSES	320.
FUNDRAISING EXPENSES	600.
TOTAL EXPENSES	215,764.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	751,003.
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PREVIOUS YEARS.	

Schedule O (Form 990) 2022 232212 10-28-22

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE & FIXTURES														
4	FURNITURE AND FIXTURES	VARIOUS	SL	5.00		16	23,525.				23,525.			3,504.	3,504.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES						23,525.				23,525.	0.		3,504.	3,504.
	MACHINERY & EQUIPMENT														
3	COMPUTER EQUIPMENT	VARIOUS	SL	5.00		16	33,473.				33,473.	25,578.		2,690.	28,268.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						33,473.				33,473.	25,578.		2,690.	28,268.
	OTHER														
5	LEASEHOLD IMPROVEMENTS	VARIOUS	SL	5.00	ļ	16	19,396.				19,396.			970.	970.
	* 990 PAGE 10 TOTAL OTHER						19,396.				19,396.	0.		970.	970.
	* GRAND TOTAL 990 PAGE 10 DEPR						76,394.				76,394.	25,578.		7,164.	32,742.

228111 04-01-22

⁽D) - Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone