

Form 990

Return of Organization Exempt From Income Tax

2000

Department of the Treasury Internal Revenue Service

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2000 calendar year, OR tax year period beginning and ending

B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return. C Name of organization: THE CHICAGO PUBLIC EDUCATION FUND. D Employer identification number: 36-4279013. E Telephone number: (312) 263-5333. F Check if application pending.

G Organization type (check only one): [X] 501(c)(03) (insert no) [] 527 OR [] 4947(a)(1)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

J Accounting method: [] Cash [X] Accrual [] Other (specify)

K Check here [] if the organization's gross receipts are normally not more than \$25,000. L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Table with 21 rows and 3 columns: Description, Sub-description, Amount. Includes revenue from contributions (1,031,406), program service revenue (56,644), and total revenue (1,088,050). Expenses total 1,636,428. Net assets at end of year: 2,795,439.

RECEIVED DEC 11 2003

POSTMARK DATE DEC 02 2003

REVENUE SCANNED

Expenses Net Assets

613-20 25

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash \$881,000 • noncash \$	22 881,000.	881,000.	STATEMENT 4	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 142,000.	120,700.	8,520.	12,780.
26 Other salaries and wages	26 171,601.	145,861.	10,296.	15,444.
27 Pension plan contributions	27 12,544.	10,662.	754.	1,128.
28 Other employee benefits	28 6,781.	5,764.	406.	611.
29 Payroll taxes	29 19,416.	16,503.	1,166.	1,747.
30 Professional fundraising fees	30			
31 Accounting fees	31 15,876.	12,383.	2,223.	1,270.
32 Legal fees	32			
33 Supplies	33 11,819.	9,219.	1,654.	946.
34 Telephone	34 8,526.	6,650.	1,194.	682.
35 Postage and shipping	35 7,012.	5,470.	981.	561.
36 Occupancy	36 52,386.	40,861.	7,334.	4,191.
37 Equipment rental and maintenance	37 7,624.	5,947.	1,067.	610.
38 Printing and publications	38			
39 Travel	39			
40 Conferences conventions and meetings	40 7,586.	5,917.	1,062.	607.
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 10,000.	7,800.	1,400.	800.
43 Other expenses (itemize)				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 2	43e 282,257.	128,800.	40,948.	112,509.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1,636,428.	1,403,537.	79,005.	153,886.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)

a EDUCATIONAL LEADERSHIP PROGRAMS				
	(Grants and allocations \$	881,000.)		881,000.
b TECHNICAL ASSISTANCE PROGRAMS				
	(Grants and allocations \$			522,537.
c				
	(Grants and allocations \$			
d				
	(Grants and allocations \$			
e Other program services (attach schedule)				
	(Grants and allocations \$			
f Total of Program Service Expenses (should equal line 44, column (B), Program services)				1,403,537.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	972,509.	45	1,384,499.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	47a 1,522,600.		
	b Less allowance for doubtful accounts	47b	47c	1,522,600.
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	4,355.	53	
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment basis	57a 37,288.			
b Less accumulated depreciation STMT 5	57b 11,000.	57c	26,288.	
58 Other assets (describe ▶ DEPOSITS)		58	4,476.	
59 Total assets (add lines 45 through 58) (must equal line 74)	3,377,285.	59	2,937,863.	
Liabilities	60 Accounts payable and accrued expenses	33,468.	60	142,424.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶)		65	
66 Total liabilities (add lines 60 through 65)	33,468.	66	142,424.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	1,418,910.	67	1,618,031.
	68 Temporarily restricted	1,924,907.	68	1,177,408.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	3,343,817.	73	2,795,439.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	3,377,285.	74	2,937,863.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information

Table with columns: Question, N/A, Yes, No. Rows include questions 76-91 regarding organizational activities, financials, and governance.

91 The books are in care of WILLIAM WILBANKS Telephone no (312) 263-5333 Located at 200 W. ADAMS STREET, CHICAGO, IL ZIP code 60606

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	56,644.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		56,644.	0.
105 Total (add line 104, columns (B), (D), and (E))					56,644.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a
- Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

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 furnished to preparer.

Signature of officer: *Sanford Knapp* 11-11-00 Date

Preparer's signature: *Chill Buck*

Preparer's Use Only

Firm's name (or yours if self-employed) and address, and ZIP code: ODELL HICKS & COMPANY, 180 N. STETSON AVENUE, CHICAGO, ILLINOIS 60601-

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **THE CHICAGO PUBLIC EDUCATION FUND** Employer identification number **36 4279013**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SONYA CHOE MILLER ----- 200 W ADAMS ST, STE 2011, CHICAGO, IL	PROG DIRECTOR 40 HRS/WK	96,000.	3,840.	

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
CREATIVE RESOURCE DEVELOPMENT ----- 777 W. LAKE ST., RIVER FOREST, IL 60305	MANAGEMENT & FUNDRAISING ASSI	68,696.

Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities

		Yes	No
1	During the year, has the organization attempted to influence national state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e	Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ?		X
4 a	Do you have a section 403(b) annuity plan for your employees?		X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See page 2 of the instructions)		

SEE STATEMENT 7

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12 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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total		
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,091,949.				1,091,949.		
16 Membership fees received							
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose							
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	24,001.				24,001.		
19 Net income from unrelated business activities not included in line 18							
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.							
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.							
23 Total of lines 15 through 22	1,115,950.	0.	0.	0.	1,115,950.		
24 Line 23 minus line 17	1,115,950.				1,115,950.		
25 Enter 1% of line 23	11,160.						
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 22,319.		
	b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts. SEE STATEMENT 8				26b 777,909.		
	c Total support for section 509(a)(1) test. Enter line 24, column (e)				26c 1,115,950.		
	d Add Amounts from column (e) for lines	18 24,001.	19	22 777,909.	26d 801,910.		
	e Public support (line 26c minus line 26d total)				26e 314,040.		
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 28.1410%		
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year (1999) N/A (1998) (1997) (1996)						
	b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. N/A (1999) (1998) (1997) (1996)						
	c Add Amounts from column (e) for lines	15	16	17	20	21	27c N/A
	d Add Line 27a total and line 27b total				27d N/A		
	e Public support (line 27c total minus line 27d total)				27e N/A		
	f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)				27f N/A		
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g N/A %		
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h N/A %		

28 Unusual Grants For an organization described in line 10, 11, or 12, that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 5 of the instructions.)

NONE

Part V

Private School Questionnaire

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Schedule A (Form 990 or 990-EZ) 2000

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

- Check here If the organization belongs to an affiliated group
 Check here If you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table -	} 41	
If the amount on line 40 is -			
The lobbying nontaxable amount is -			
Not over \$500,000	20% of the amount on line 40		
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		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

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 instructions for lines 45 through 50 on page 9 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Name of organization

Employer identification number

THE CHICAGO PUBLIC EDUCATION FUND

36-4279013

Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
30	WASHINGTON MUTUAL FOUNDATION 8725 W. HIGGINS ROAD CHICAGO, IL	\$ 20,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
31	ARIEL CAPITAL MANAGEMENT 200 E. RANDOLPH CHICAGO, IL 60601	\$ 6,667.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
32	ANNENBERG FOUNDATION 2308 PARK PLACE EVANSTON, IL 60201	\$ 955,149.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
33	CHICAGO TRIBUNE 435 N. MICHIGAN CHICAGO, IL 60611	\$ 200,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
34	MACARTHUR FOUNDATION 140 S. DEARBORN, SUITE 1100 CHICAGO, IL 60603	\$ 20,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
35	NEW PROSPECT FOUNDATION 1420 SHERIDAN RD., #9A WILMETTE, IL 60091	\$ 25,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	FURNITURE	110199	SL	3.00	19	6,300.			6,300.	350.		2,100.
2	EQUIPMENT	120199	SL	3.00	19	11,570.			11,570.	650.		3,860.
3	EQUIPMENT	060100	SL	3.00	15A	19,418.			19,418.			4,040.
* TOTAL 990 PAGE 2 DEPR						37,288.		0.	37,288.	1,000.	0.	10,000.

FOOTNOTES

STATEMENT 1

AMENDED RETURN

FORM 990 IS BEING AMENDED TO CORRECT SCHEDULE A, PART IV-A. THE ORIGINAL SCHEDULE A, PART IV-A, WAS NOT REPORTED ON THE CASH BASIS. LINE 15, COLUMN (A) 1999 WAS AMENDED TO REPORT CASH BASIS AMOUNT OF \$1,091,949.

FORM 990	OTHER EXPENSES			STATEMENT 2
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
COMMUNICATION MATERIAL & PRINTING	36,780.		18,390.	18,390.
COMMUNICATION ADVERTISING	54,900.			54,900.
COMMUNICATION EVENTS	25,992.			25,992.
CONSULTANTS	121,854.	95,046.	17,060.	9,748.
TEMP. EMPLOYMENT	2,462.	1,920.	345.	197.
LEGAL AND AUDIT FEES	16,704.	13,029.	2,339.	1,336.
UTILITIES	1,513.	1,180.	212.	121.
REPAIRS AND MAINTENANCE	7,361.	5,742.	1,030.	589.
DUES AND SUBSCRIPTIONS	5,122.	3,996.	716.	410.
INSURANCE	2,154.	1,680.	302.	172.
PAYROLL/BANK FEES	1,274.	994.	178.	102.
MISCELLANEOUS	100.	78.	14.	8.
TRAINING	6,041.	5,135.	362.	544.
TOTAL TO FM 990, LN 43	282,257.	128,800.	40,948.	112,509.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 3
PART III

EXPLANATION

TO INCREASE COMMUNITY INVESTMENT AND ACT AS A CATALYST IN IMPROVING CHICAGO'S SCHOOLS. THE FUND IDENTIFIES, INVESTS, AND "PARTNERS" WITH PROGRAMS THAT CAN SIGNIFICANTLY IMPROVE STUDENT PERFORMANCE.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 4

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
EDUCATIONAL LEADERSHIP PROGRAMS	TEACH FOR AMERICA	350 N. OGDEN AVE., STE 410, CHICAGO, IL 60607	NONE	120,000.
EDUCATIONAL LEADERSHIP PROGRAMS	GOLDEN APPLE FOUNDATION	8 S. MICHIGAN AVE., CHICAGO, IL 60603	NONE	100,000.

EDUCATIONAL LEADERSHIP PROGRAMS	TEACHER RECRUITMENT INITIATIVE	BANK ONE PLAZA, STE 3120, CHICAGO, IL 60603	NONE	60,000.
EDUCATIONAL LEADERSHIP PROGRAMS	CHICAGO PUBLIC SCHOOLS	125 S. CLARK ST., CHICAGO, IL 60603	NONE	100,000.
EDUCATIONAL LEADERSHIP PROGRAMS	CHICAGO TEACHERS UNION QUEST CENTER	222 MERCHANDISE MART, CHICAGO, IL 60603	NONE	150,000.
EDUCATIONAL LEADERSHIP PROGRAMS	LEADERSHIP ACADEMY & URBAN NETWORK	221 N. LASALLE ST., CHICAGO, IL 60602	NONE	200,000.
EDUCATIONAL LEADERSHIP PROGRAMS	ILLINOIS STATE UNIVERSITY	NORMAL, IL 61790	NONE	100,000.
EDUCATIONAL LEADERSHIP PROGRAMS	CHICAGO PUBLIC SCHOOLS-17 TEACHERS	125 S. CLARK ST., CHICAGO, IL 60603	NONE	51,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				<u>881,000.</u>

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 5

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE	6,300.	2,450.	3,850.
EQUIPMENT	11,570.	4,510.	7,060.
EQUIPMENT	19,418.	4,040.	15,378.
TOTAL TO FORM 990, PART IV, LN 57	<u>37,288.</u>	<u>11,000.</u>	<u>26,288.</u>

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 6

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID GOMEZ 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
ANNE HALLETT 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR, SECRETARY AS REQUIRED	0.	0.	0.
MELLODY HOBSON 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
LEON JACKSON 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR, TREASURER AS REQUIRED	0.	0.	0.
MARTIN J. KOLDYKE 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
JOHN W. MCCARTER, JR. 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
CLARE MUNANA 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
PENNY PRITZKER 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
TIM SCHWERTFEGER 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
ADELE SIMMONS 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR AS REQUIRED	0.	0.	0.
SCOTT SMITH 200 W. ADAMS ST. CHICAGO, IL 60606	DIRECTOR, CHAIRMAN AS REQUIRED	0.	0.	0.

JANET M. KNUPP 200 W. ADAMS ST. CHICAGO, IL 60606	PRESIDENT 40 HRS/WK	142,000.	5,680.	0.
TOTALS INCLUDED ON FORM 990, PART V		142,000.	5,680.	0.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH DIRECTORS, TRUSTEES, PRINCIPAL OFFICERS OR CREATOR PART III, LINE 2 STATEMENT 7

SEE STATEMENT 6

SCHEDULE A IDENTIFICATION OF EXCESS CONTRIBUTIONS INCLUDED ON PART IV, LINE 26B STATEMENT 8

*** NOT OPEN TO PUBLIC INSPECTION ***

CONTRIBUTOR'S NAME	TOTAL CONTRIBUTION	EXCESS CONTRIBUTION
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Depreciation and Amortization (Including Information on Listed Property) 990

See separate instructions Attach this form to your return

Name(s) shown on return: THE CHICAGO PUBLIC EDUCATION FUND
Business or activity to which this form relates: FORM 990 PAGE 2
Identifying number: 36-4279013

Part I Election To Expense Certain Tangible Property (Section 179) Note

1 Maximum dollar limitation: 20,000
2 Total cost of section 179 property placed in service
3 Threshold cost of section 179 property before reduction in limitation: \$200,000
4 Reduction in limitation: 0
5 Dollar limitation for tax year: 0

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost

7 Listed property: 0
8 Total elected cost of section 179 property: 0
9 Tentative deduction: 0
10 Carryover of disallowed deduction from 1999: 0
11 Business income limitation: 0
12 Section 179 expense deduction: 0
13 Carryover of disallowed deduction to 2001: 0

Note Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement) Instead, use Part V for listed property

Part II MACRS Depreciation For Assets Placed in Service Only During Your 2000 Tax Year (Do not include listed property) Section A - General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box: []

Section B - General Depreciation System (GDS) (See instructions)

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction

Section C - Alternative Depreciation System (ADS) (See instructions)

Table with 4 columns: (a) Class life, (b) Recovery period, (c) Convention, (d) Method

Part III Other Depreciation (Do not include listed property) (See instructions)

17 GDS and ADS deductions for assets placed in service in tax years beginning before 2000: 0
18 Property subject to section 168(f)(1) election: 0
19 ACRS and other depreciation: 5,960

Part IV Summary (See instructions)

20 Listed property: 0
21 Total: 10,000
22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs: 0

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)
Note For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution See instructions for limits for passenger automobiles)

23a Do you have evidence to support the business/investment use claimed? Yes No **23b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
24 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
25 Property used 50% or less in a qualified business use								
		%				S/L		
		%				S/L		
		%				S/L		
26 Add amounts in column (h) Enter the total here and on line 20, page 1							26	
27 Add amounts in column (i) Enter the total here and on line 7, page 1								27

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
 If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
28 Total business/investment miles driven during the year (DO NOT include commuting miles)												
29 Total commuting miles driven during the year												
30 Total other personal (noncommuting) miles driven												
31 Total miles driven during the year Add lines 28 through 30												
32 Was the vehicle available for personal use during off-duty hours?												
33 Was the vehicle used primarily by a more than 5% owner or related person?												
34 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners		
37 Do you treat all use of vehicles by employees as personal use?		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
39 Do you meet the requirements concerning qualified automobile demonstration use? Note If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 2000 tax year					
41 Amortization of costs that began before 2000					41
42 Total Add amounts in column (f) See instructions for where to report					42