Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

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

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

A For	the 2018 cale	ndar year, or tax year beginning July 1 , 2018, and	ending	June	e 30	, 20 19	S. S. S. Carlott (S. C.					
		C Name of organization Chatham Education Foundation				er identification n	umber					
	ress change	Doing business as				22-3285022						
	ne change		oom/suite		E Telephor	and the second second						
	-	P. O. Box 81 973-635-0906										
	return/terminated	City or town, state or province, country, and ZIP or foreign postal code				0,0 000 000						
		Chatham, NJ 07928			G Gross re	ceints \$	368,511					
		F Name and address of principal officer: Amanda Feeman, President		COLUMN TO SHARE THE PARTY OF TH		subordinates? Yes						
L Appi		P. O. Box 81, Chatham NJ 07928	4.9			included? Yes						
			527	1 4 5		list. (see instruction						
	exempt status:	v.chathamedfoundation.org		H(c) Group			,					
			f formation:		Transferred at	of legal domicile:	NJ					
Part			i ioiiiatioii.	1004	IVI Otate	or legal dorniche.	110					
1		scribe the organization's mission or most significant activities:										
1000		ducational excellence in the School District of the Chathams through	narent a	nd commi	inity don:	ations						
Activities & Governance 4 9 9 6 7 8 7	Support	ducational excellence in the oction District of the orientalia through	parenta	iid commit	mity dom							
e 2	Chook thi	s box ▶ ☐ if the organization discontinued its operations or dispo	osed of n	nore than	25% of	ite not accate						
000 3					3	its fict assets.	25					
∞ 4		of voting members of the governing body (Fait VI, line ra)			4		25					
se 5		nber of individuals employed in calendar year 2018 (Part V, line 2a			5		0					
ž į					6		12					
6 ctiv		nber of volunteers (estimate if necessary)			7a		0					
		ated business taxable income from Form 990-T, line 38			7b		0					
-	b Net unrela	Prior Ye		Current Y	urrent Year							
	Contribut	ions and grants (Part VIII. line 1h)	180516	- Carrone 1	273154							
8 E		ions and grants (Part VIII, line 1h)			0		0					
Revenue		service revenue (Part VIII, line 2g)			3987		7743					
§ 10		nt income (Part VIII, column (A), lines 3, 4, and 7d)					manage of the same of					
11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	57(42.00%)		36762		45712 326609					
12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 1			221266		104266					
13		nd similar amounts paid (Part IX, column (A), lines 1–3)			104637		104200					
14	and the second s	paid to or for members (Part IX, column (A), line 4)	2.000									
န္မ 15		other compensation, employee benefits (Part IX, column (A), lines 5–1			0		0					
<u>ଞ୍ଚ</u> 16		nal fundraising fees (Part IX, column (A), line 11e)	THE REAL PROPERTY.		0		0					
.5		draising expenses (Part IX, column (D), line 25)	642		00004		00000					
17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)			23391		28286					
18		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)			128028		132552					
19	Revenue	less expenses. Subtract line 18 from line 12		inning of Cur	93237	End of Ye	194058					
ets or lances		, (D - 1 V L' 40)	beg	inning of Cur	CONTRACTOR CONTRACTOR	Elia di Te						
20 Balan		ets (Part X, line 16)	.		374631	-	570070					
Net Asse Fund Bala 52		ilities (Part X, line 26)	.		0 374631		570070					
Part		s or fund balances. Subtract line 21 from line 20			374031		370070					
		ry, I declare that I have examined this return, including accompanying schedules and	nd statemen	ate, and to th	no host of n	ny knowledge, and	helief it is					
true, co	rrect, and comple	ete. Declaration of preparer (other than officer) is based on all information of which p	oreparer ha	s any knowle	edge.	ny knowledge and	Delier, it is					
-		100 / H			January	10, 2020						
Sign	Signa	ature of officer		Dat		10, 2020						
Here	1	an Routh, Vice President										
		or print name and title					-					
		pe preparer's name Preparer's signature	Date		Oh - 1	PTIN						
Paid					Check L							
Prepa		ame ►		Firm	's EIN ▶							
Use C		ddress ►			ne no.							
May th		s this return with the preparer shown above? (see instructions) .				Te	s 🗌 No					

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
	Support educational excellence in the School District of the Chathams through parent and community donations
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.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	Chatham Middle School grants:
	\$23,910 Furniture for classrooms of the future for a mathematics classroom ("vertical classroom")
	\$6,225 Furniture for classrooms of the future for a science classroom
	\$2,136 Furniture for classrooms of the future for an English Language Arts classroom
	\$501 Books for a classroom library
	\$317 Books for a Spanish class
4b	(Code:) (Expenses \$ 16,475 including grants of \$ 16,475) (Revenue \$ 0)
	School District of the Chathams district grants:
	\$8,800 TEDx Chatham
	\$7,675 Building voices: a summer experience for Chatham educators
4c	(Code:) (Expenses \$ 15,615 including grants of \$ 15,615) (Revenue \$ 0)
	Chatham High School grants:
	\$5,993 See the world through virtual reality \$5,175 Digital pen tablets for graphic design and visual art
	\$2,484 Book club sets for 12th grade reading workshop
	\$1,964 Furniture for classrooms of the future
4d	Other program services (Describe in Schedule O.)
- u	(Expenses \$ 39,088 including grants of \$ 39,088) (Revenue \$ 0)
4e	Total program service expenses ► \$104.266

Part I	V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
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		1
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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	1	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
	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	1	

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		√
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		\
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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	✓	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	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? 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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	✓	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			V
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1		13	3 (4)
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	

Form 98	10 (2016)			Page -
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	Fatou the number of appleases reported on Form W.C. Transmitted of West and Tou		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
L	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	Oh		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2b		
2-	그는 맛있는 아내지 하다 하는 것이 되었다면 그리고 하다 나를 하는 것이 되었다. 그리고 아내리는 그리고 아내리는 그리고 아내리는 그리고 아내리는 그리고 아내리는 그리고 아내리는 그리고 그리고 있다.	20		,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		/
b		30		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country:	4a		V I
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
~	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			1000
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	1	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
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 contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		- C - C - C - C - C - C - C - C - C - C
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:			
11				
a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes," complete Form 4720, Schedule O.			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched				
	Check if Schedule O contains a response or note to any line in this Part VI				ions.
Secti	on A. Governing Body and Management				
125				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	25			
	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				
720	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with			
•	any other officer, director, trustee, or key employee?		2		/
3	Did the organization delegate control over management duties customarily performed by or under the supervision of officers, directors, or trustees, or key employees to a management company or other person?	direct	•		,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	12	3 4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's asset		5		1
6	Did the organization have members or stockholders?	·	6	-	1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	nnoint			_
	one or more members of the governing body?		7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) mer	-			
	stockholders, or persons other than the governing body?		7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken				
	the year by the following:	- 1			
а	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach				,
Casti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		✓
Secu	on B. Policies (This Section B requests information about policies not required by the Internal	Revenu	ie C	Yes	
10a	Did the organization have local chapters, branches, or affiliates?	ſ	10a	res	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha		iva		· ·
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purpos		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the		11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	[12a	1	Contraction of
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to col	nflicts?	12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"			
	describe in Schedule O how this was done		12c	✓	
13	Did the organization have a written whistleblower policy?]	13	✓	
14	Did the organization have a written document retention and destruction policy?		14	✓	
15	Did the process for determining compensation of the following persons include a review and approinted independent persons, comparability data, and contemporaneous substantiation of the deliberation and deciberation and deciberation are contemporaneous.				
а	The organization's CEO, Executive Director, or top management official		15a		
b	Other officers or key employees of the organization		15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang with a taxable entity during the year?		16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safegua				
Casti	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed New Jersey				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, an (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	u 990-1	(260	uon 5	ou I(C)
	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict	ct of inte	erest	nolicy	/ and
.5	financial statements available to the public during the tax year.	or or mite		Cono	, and
20	State the name, address, and telephone number of the person who possesses the organization's books	and rec	ords		
	Alan Routh, PO Box 81, Chatham, NJ 07928, telephone 973-635-0906				

orm 990 (2018)	Page	. 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

			33	95.37				20 2		
Check this box if neither the organization needs	or any relate	d org	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per	box,	unles	Pos neck ss pe	rson	e than o is both or/trust	an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Amanda Feeman, President	13.5	1		1				0	0	0
(2) Diane Rooney, Vice President	10.0	1		1				0	0	0
(3) Alan Routh, Vice President and Treasurer	18.5	1		1				0	0	0
(4) Cheryl Whitney, Secretary	6.0	1		1				0	0	0
(5) Sally Allen, Trustee	1.5	1						0	0	0
(6) Laura Bojanowski, Trustee	2.0	1						0	0	0
(7) Amy Coates, Trustee	4.0	1						0	0	0
(8) Allison Eckles, Trustee	1.5	1						0	0	0
(9) Ron Epstein, Trustee	0.3	1						0	0	0
(10) Ananya Holland, Trustee	1.5	1						0	0	0
(11) Zahrah Khan, Trustee	7.7	1						0	0	0
(12) Wendy Kuppenheimer, Trustee	1.9	1						0	0	0
(13) Jessica Lakin, Trustee	1.5	1						0	0	0
(14) Nona LeRoux, Trustee	3.2	1						0	0	0

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (contin	nued)		-3
,						C)							
	(A)	(B)	(do n	ot ch		ition more	than c	one	(D)	(E)	_	(F)	
	Name and title	Average hours per					is both or/trust		Reportable compensation	Reportable compensation from	0.03000	imated ount of	
		week (list any hours for						· '	from the	related organizations		ther ensation	n
		related	direc	titut	Officer	y em	ples	Former	organization	(W-2/1099-MISC)	fro	m the	
		organizations below dotted	al tr	onal		Key employee	ee		(W-2/1099-MISC)			nization related	88
		line)	Individual trustee or director	Institutional trustee		ee	pens				organ	nizations	3
			(b)	lee			Highest compensated employee						
(15) H	Canchana Leung, Trustee	1.2											
			✓						0	0			0
(16) J	ennifer McNally, Trustee	1.0	,						_				_
(17) F	rik Metviner, Trustee	4.2	✓						0	0			0
1111	TIK Metviller, Trustee	7.2	1						0	0			0
(18) J	ennifer Rowland, Trustee	0.8											
			✓						0	0			0
(19) F	Rosalinda Rubio Williams, Trustee	0.5	,										
(20)	Christine Sterling, Trustee	1.5	✓						0	0			0
(20)	omistine Stermig, Trustee	1.5	1						0	0			0
(21) \$	Sara Zuckerman, Trustee	1.0											
			✓						0	0			0
(22) J	ulie Lee, Trustee	1.4	,										
(23)	Stephanie Yarcheski, Trustee	1.2	✓						0	0			0
(20)	nepriame raicheski, rrustee	1.2	1						0	o			0
(24) 1	roy Hamilton, Trustee	0.0											
			1						0	0			0
(25) E	Barbara Delaney, Trustee	1.0	,										_
	Sub-total		V						0				0
C	Total from continuation sheets to Part	VII. Sectio	n A					•	0				0
d	Total (add lines 1b and 1c)								0	0			0
2	Total number of individuals (including but		d to th	ose	list	ed	above	e) w	ho received m	ore than \$100,00	00 of		
	reportable compensation from the organi	zation >							0			V	Ne
2	Did the organization list any former of	ficer direc	tor c	r tr	uct	20	kov	mr	alovos or high	act compansate	od	Yes	No
3	employee on line 1a? If "Yes," complete	Schedule J	for si	uch	indi	se, ividi	ual				3		1
4	For any individual listed on line 1a, is the							n a	nd other comp	ensation from the	ne		
	organization and related organizations	greater th	an \$7	150,	000	? /	f "Ye	s, "	complete Sch	edule J for suc	ch		
	individual			٠.			•				4		/
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or individu	_		1
Section	on B. Independent Contractors	. 11 100, 0	7011101	0.0	00.	,000	1001	0, 0	suon percen				
1	Complete this table for your five highest												
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	h or within the o	rganizati	on's ta	ax
0	year.							T	(B)		(C)		
	(A) Name and business add	Iress							Description of s	ervices	Compen		
Sec													
-					-			-					
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot I	limit	ted to	o th	nose listed abo	ove) who			
	received more than \$100,000 of compens							- 200	0				14/6-3
											For	m 990	(2018)

Part	t VIII	Statement of Reve	enue						
		Check if Schedule C	contains	a resp	oonse or note to				🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
nts	1a	Federated campaigns	s	1a	0	100			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	0				
s, G	С	Fundraising events .		1c	56267				
Sift lar /	d	Related organizations	s	1d	0				
imil	е	Government grants (cor		1e	0				
tior er S	f	All other contributions, g							
ig a		and similar amounts not inc	cluded above	1f	216887				
d C	g	Noncash contributions include			68000				
	h	Total. Add lines 1a-1	f			273154			
Program Service Revenue					Business Code				
evel	2a								
e B	b								
Σġ	C								
Se	d								
ran	e	A.II A.I							
rog	f	All other program ser							
	3	Total. Add lines 2a–2 Investment income				***			
	١	and other similar amo	(2)		AV	7866	7866	o	
	4	Income from investmen	60			0	0	0	
	5	Royalties				0	0	0	
	"	rioyanies	(i) Rea		(ii) Personal				
	6a	Gross rents		0	0				
	b	Less: rental expenses		0	0				
	c	Rental income or (loss)		0	0				
	d	Net rental income or	(loss) .			0	0	0	
	7a	Gross amount from sales of	(i) Securit		(ii) Other				
	,	assets other than inventory		2888	0				
	b	Less: cost or other basis							
	2750	and sales expenses .		3011	0				
	С	Gain or (loss)		(123)	0				
	d	Net gain or (loss) .			▶	(123)			
4									
evenue	8a	Gross income from fu	undraising						
Ş.		events (not including \$	562						
		of contributions reporte							
Other R	342	See Part IV, line 18 .			12118				
₹	b				12118				
		Net income or (loss) f		-	events . ►	0			
	9a	Gross income from ga							
		See Part IV, line 19 .			72485				
	b	Less: direct expenses			26772	4574			
		Net income or (loss) f Gross sales of in			vities ▶	45713			
	IUa	returns and allowance			0				
	h	Less: cost of goods s		100000	0				
		Net income or (loss) f			-	0			
	_	Miscellaneous F		01 1111	Business Code				
	11a	Tribodita iooda i							
	b								
	C								
	d	All other revenue .				0	0	0	
	e	Total. Add lines 11a-			▶	0			
	12	Total revenue. See i				326609	7866		

Part IX Statement of Functional Expenses

_	2.4	-		12			-					141	751	\neg										101	
		(Check	if Sched	dule	0	COI	ntain	is a	re	spor	ise or note to any	ine in this Part IX												
Sect	ion 5	01(0	c)(3) an	d 501(c)	(4)	org	aniz	atior	ns n	nus	st cor	mplete all columns.	All other organization	ons	s m	ust	co	mp	lete	9 CC	olur	nn	(A)	•	

10 10 10 10 10 10 10 10	Do no	t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B)	(C)	(D)
and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 12 Grants and other assistance to foreign organizations, foreign governments, and foreign organizations, foreign governments, and foreign organizations, foreign governments, and foreign individuals. See Part IV, line 13 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(n)/(8) and persons described in section 4958(n)/(8) and 495(n) and 495(n	8b, 9b	, and 10b of Part VIII.	l otal expenses	Program service expenses	Management and general expenses	Fundraising expenses
2 Grants and other assistance to domestic individuals. See Part IV, line 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1		104266	104266		
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2					
organizations, foreigin governments, and foreign individuals. See Part IV, line 17 on 0 on		individuals. See Part IV, line 22	0	0		
individuals. See Part IV, lines 15 and 16 . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3					
## Benefits paid to or for members						
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(R)(R)) and persons described in section 4958(R)(R)(R) and 403(R) employer contributions (include section 401(R) and 403(R) employer contributions) 7 Cother employee benefits 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	200				
trustees, and key employees				· ·		
persons (as defined under section 4958(pt(1)) and persons described in section 4958(c)(3)(8) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.0-200		0	0	0	0
persons described in section 4956(c)(3)(8)	6	Compensation not included above, to disqualified				
Other salaries and wages						
B Pension plan accruals and contributions (include section 401 (k) and 403 (b) employer contributions) 0	_	- Barrier		0		0
section 401(k) and 403(b) employer contributions) Other employee benefits			0	0	0	0
9 Other employee benefits	0		0	0	0	0
10 Payroll taxes	9			0		0
a Management			0	0	0	0
b Legal	11	Fees for services (non-employees):				
C Accounting 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	а	Management		0	0	0
d Lobbying d Lobbying e Professional fundraising services. See Part IV. line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 2 Advertising and promotion 3 Office expenses 4 Information technology 4 Information technology 5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 10 Linterest 10 Depreciation, depletion, and amortization 11 Insurance 12 Payments to affiliates 20 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule O.) a credit card processing fees 5 Total functional expenses. Add lines 1 through 24e 6 Jint 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 (SSC 958-70)	b					0
e Professional fundraising services. See Part IV. line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 2 Advertising and promotion 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	888			0		0
f Investment management fees g Other. (if fine 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion				U		0
9 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 0 0 0 0 0 0 0 0 0	19000	The state of the s		0	0	0
12 Advertising and promotion						
13 Office expenses 9470 0 0 9471 14 Information technology 12002 0 4126 787 15 Royalties 0 0 0 0 0 0 16 Occupancy 0 0 0 0 0 0 17 Travel 0 0 0 0 0 0 0 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 0 0 0 19 Conferences, conventions, and meetings 0 0 0 0 0 20 Interest 0 0 0 0 0 0 0 21 Payments to affiliates 0 0 0 0 0 0 22 Depreciation, depletion, and amortization 1 surrance 1 1354 0 1354 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 2		(A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
14 Information technology	12			0		0
15 Royalties				0		
16 Occupancy				0		0
17 Travel		The same of the sa		-		0
for any federal, state, or local public officials 19		1	0	0	0	0
19 Conferences, conventions, and meetings	18					
Interest			0	0	0	0
21 Payments to affiliates 0 0 0 22 Depreciation, depletion, and amortization 0 0 0 23 Insurance 1354 0 1354 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 0 0 0 129 a credit card processing fees 1296 0 0 0 129 b NJEFP membership 200 200 200 200 200 250 250 0 250 250 0 250 0 250 0 250 0 250 0 250 0				0		0
Depreciation, depletion, and amortization Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Compared to the control of th		AND THE RESERVE AND THE RESERV				0
23 Insurance						0
Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a credit card processing fees 1296 0 0 129 b NJEFP membership 200 200 c NJ fees 250 0 250 d TEDx expenses 3714 3714 0 e All other expenses 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 132552 107980 5930 1864 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 (m) if following SOP 98-2 (ASC 958-720)					1354	0
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a credit card processing fees b NJEFP membership c NJ fees d TEDx expenses e All other expenses. Add lines 1 through 24e 250 250 250 250 250 250 250 25	24	Other expenses. Itemize expenses not covered				
(A) amount, list line 24e expenses on Schedule O.) a credit card processing fees 1296 0 0 129 b NJEFP membership 200 200 c NJ fees 250 0 250 d TEDx expenses 3714 3714 0 e All other expenses 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 132552 107980 5930 1864 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)						
a credit card processing fees b NJEFP membership c NJ fees d TEDx expenses e All other expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 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)						
b NJEFP membership c NJ fees d TEDx expenses e All other expenses. Add lines 1 through 24e 250 250 250 250 250 250 250 25	_	35335	1206	0	0	1296
C NJ fees d TEDx expenses e All other expenses. Add lines 1 through 24e 250 O 0 O 0 25 Total functional expenses. Add lines 1 through 24e 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)	200000			0		0
d TEDx expenses 3714 3714 0 e All other expenses 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 132552 107980 5930 1864 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)				0		0
25 Total functional expenses. Add lines 1 through 24e 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)				3714	100	C
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)	е					0
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)	_		132552	107980	5930	18642
	26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				

Part X Balance Sheet

	aitA	Check if Schedule O contains a response or note to any line in this Par	+ X		П
		onedkii doneddio o dontains a response of note to any line in this f al	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	191967	1	174845
	2	Savings and temporary cash investments	0	2	2931
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0		0
As	8	Inventories for sale or use	0		0
	9	Prepaid expenses and deferred charges	966		0
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	181696	11	392294
	12	Investments – other securities. See Part IV, line 11	0	12	0
	13	Investments-program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	374630		570070
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0		0
	19	Deferred revenue	0		0
	20 21	Tax-exempt bond liabilities	0		0
S	22	Loans and other payables to current and former officers, directors,		21	0
Liabilities	22	trustees, key employees, highest compensated employees, and			
ig		disqualified persons. Complete Part II of Schedule L	0	22	0
Ë,	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0	26	0
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	374630	27	465205
Ba	28	Temporarily restricted net assets	0	28	26216
р	29	Permanently restricted net assets	0	29	78649
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34.			
sts	30	Capital stock or trust principal, or current funds	0	30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	0		
ťΑ	32	Retained earnings, endowment, accumulated income, or other funds .	0		
Š	33	Total net assets or fund balances	374630		570070
_	34	Total liabilities and net assets/fund balances	374630	34	570070

Form 9	90 (2018)			Pa	ge 12
Par	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		33	26609
2	Total expenses (must equal Part IX, column (A), line 25)	2		1:	32552
3	Revenue less expenses. Subtract line 2 from line 1	3		19	94058
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	74630
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1383
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	101 NO 10	10		5	70070
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," expl Schedule O.	lain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were compil	led or			
	reviewed on a separate basis, consolidated basis, or both:				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	on a			
	separate basis, consolidated basis, or both:				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight			
	of the audit, review, or compilation of its financial statements and selection of an independent accoun-	tant?	2c	1	100

If the organization changed either its oversight process or selection process during the tax year, explain in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

3b | Form 990 (2018)

За

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018 **Open to Public**

Inspection Name of the organization Employer identification number Chatham Education Foundation 22-3285022 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization listed in your governing (v) Amount of monetary (vi) Amount of (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . revenues levied for the organization's benefit and either paid to or expended on its behalf . . . 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)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support						
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	- 15	3.5			12	501()(0)
13	First five years. If the Form 990 is for the organization, check this box and stop he				D		
Socti	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line 6			1 column (fl)	277 200 200 200	14	%
15	Public support percentage from 2017 Sch					15	%
16a	331/3% support test—2018. If the organi						
	box and stop here. The organization qua	lifies as a publ	icly supported	organization			▶ 🗆
b	331/3% support test-2017. If the organi						5):
	this box and stop here. The organization	• • • • • • • • • • • • • • • • • • • •					
17a	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization of the control of the c	ation meets the neets the "fac	e "facts-and-c ts-and-circums	circumstances' stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see
	instructions						▶ 🗆

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	on A. Public Support					,	-
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	155847	127581	139221	180516	273154	876320
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	26594	23316	67988	74807	87491	280197
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	182441	150898	207209	255324	360645	1156516
/a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3	1					
	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	0	0	0	0	0
c	Add lines 7a and 7b	0	0	0	0	0	0
8	line 6.)						
Secti	on B. Total Support						1156516
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	182441	150898	207209	255324	360645	1156516
10a	Gross income from interest, dividends,	102441	130696	207209	255324	360643	1130310
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	1266	1387	2882	3952	7866	17354
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	o	0	0	0	0	0
С	Add lines 10a and 10b	1266	1387	2882	3952	7866	17354
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets			1			
	(Explain in Part VI.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	183707	152285	210091	259275	368511	1173870
14	First five years. If the Form 990 is for the organization, check this box and stop her						
Socti	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8			3 column (fl)		15	00.50.04
16	Public support percentage from 2017 Sch					16	98.52 % 98.98 %
	on D. Computation of Investment Inc			• • • • •		10	96.96 70
17	Investment income percentage for 2018 (I			v line 13. colur	mn (fl)	17	1.48 %
18	Investment income percentage from 2017					18	1.02 %
19a	33½% support tests—2018. If the organi						
500 - TO	17 is not more than 331/3%, check this box						
b	331/3% support tests-2017. If the organiz						
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization die	d not check a b	oox on line 14,	19a, or 19b, c	heck this box	and see instruc	tions 🕨 🗌

Part IV **Supporting Organizations**

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

Section A. All Supporting Orga	anizations
--------------------------------	------------

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

-	on A. All Supporting Organizations		Yes	NIC
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	res	NC
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	10.53	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
с 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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? <i>If "Yes," provide detail in Part VI.</i>	5c		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
l0a	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			

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

10a

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Secti	on C. Type II Supporting Organizations	2		
36011	on C. Type if Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
	or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
•		_1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nstru	ctions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		4 4	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
92	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
•	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6	4	
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	lv int	tegrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D—Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		15	
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

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

	······
	······································
***************************************	······································
•	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Chatham Education Foundation 22-3285022 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: \$

Assets included in Form 990, Part X . . .

-	le D (Form 990) 2018			0.1 0. 1	Page 2
Part 3	Using the organizations Maintaining Co Using the organization's acquisition, acc collection items (check all that apply):				
а	☐ Public exhibition	d	☐ Loan or exchan	ge programs	
b	☐ Scholarly research			go programo	
С	☐ Preservation for future generations				
4	Provide a description of the organization XIII.	s collections and expla	ain how they further	the organization's ex	empt purpose in Part
5	During the year, did the organization sol assets to be sold to raise funds rather that				
Part	Complete if the organization an		m 990, Part IV, lin	e 9, or reported an	amount on Form
1a	990, Part X, line 21. Is the organization an agent, trustee, cu	stadian or other intern	nadiany for contribu	tions or other assets	not
Ia	included on Form 990, Part X?				
b	If "Yes," explain the arrangement in Part				la les la No
~	ii ree, explain the arrangement in rate.	and domplete are re	moving table.		Amount
С	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount o	n Form 990, Part X, line	e 21, for escrow or c	ustodial account liabi	lity? 🗌 Yes 🗌 No
And the same of the	If "Yes," explain the arrangement in Part	(III. Check here if the e	xplanation has beer	provided on Part XIII	🗆
Par	Endowment Funds.			W128	
	Complete if the organization an				
720	See a second		or year (c) Two yea	111	
772	Beginning of year balance	181696	107437	- 11	52265
b	Contributions	202774	70000	10000	0 40000
С	Net investment earnings, gains, and losses	7000	4050	0.400	005
٨	Grants or scholarships	7823	4259		0 827
d e	Other expenditures for facilities and	0	0	0	U
•	programs	o	0	0	0
f	Administrative expenses	0	0	0	0 0
g	End of year balance	392294	181696		1957 93092
2	Provide the estimated percentage of the				33032
a	Board designated or quasi-endowment	S. Contraction of the Contractio	, , , , , , , , , , , , , , , , , , ,	-,,,	
	Permanent endowment ► 14				
С	Temporarily restricted endowment ▶	4%			
	The percentages on lines 2a, 2b, and 2c s	should equal 100%.			
3a	Are there endowment funds not in the poorganization by:	essession of the organi	zation that are held	and administered for	the Yes No
	(i) unrelated organizations	* * * * * * *		* * * * * * *	. 3a(i) ✓
	(ii) related organizations			* * * * * * *	. 3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related organ				. 3b
4	Describe in Part XIII the intended uses of		owment funds.		
Part	Land, Buildings, and Equipme Complete if the organization an		m 990, Part IV, lin	e 11a. See Form 99	0, Part X, line 10.
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value

Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (c) Accumulated depreciation (d) Book value to Buildings c Leasehold improvements d Equipment e Other Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII	Investments – Other Securities.	rad "Vaa" on Farr	n 000 Dort IV line	a 11h Coo Form	000 Part V line 12
0	Complete if the organization answer	ed Yes on For			
	(a) Description of security or category (including name of security)		(b) Book value		nod of valuation: of-year market value
(1) Financial	derivatives				
(2) Closely-h	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total, (Column (t	n) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII	Investments-Program Related.				
	Complete if the organization answer	red "Yes" on Forr	n 990, Part IV, line	e 11c. See Form	990, Part X, line 13.
a -	(a) Description of investment		(b) Book value	(c) Met	hod of valuation: of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	o) must equal Form 990, Part X, col. (B) line 13.)			Mark Control	
Part IX	Other Assets.				
THE PARTY OF THE P	Complete if the organization answer	red "Yes" on Form	n 990. Part IV. line	e 11d. See Form	990. Part X. line 15.
p -	· · · · · · · · · · · · · · · · · · ·	escription			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
_(7)					
(8)					
(9)	mn (b) must equal Form 990, Part X, col. ((B) line 15.)			
Part X	Other Liabilities.	D) III (6 13.)			
FaitA	Complete if the organization answe	rod "Voe" on For	m 000 Part IV lin	a 11a or 11f Sec	Form 990 Part Y
	line 25.		11 990, Fait IV, III		eromi 990, rait A,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.) ▶				
2. Liability for	uncertain tax positions. In Part XIII, provide	the text of the footno	te to the organization	n's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 358778 Total revenue, gains, and other support per audited financial statements . . . 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 21434 a Net unrealized gains (losses) on investments **b** Donated services and use of facilities 2b Recoveries of prior year grants 2c 10734 Other (Describe in Part XIII.) 32169 2e e Add lines 2a through 2d 326609 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b . 4a **c** Add lines **4a** and **4b** 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 326609 5 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 129025 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a **b** Prior year adjustments c Other losses 2c 3527 2d Other (Describe in Part XIII.) 3527 2e 3 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b . 4b Other (Describe in Part XIII.) Add lines **4a** and **4b** Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 5 5 132,552 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Audited financial statements are on accrual basis. Tax return is on cash basis. Revenue line 2d and Expenses line 2d include accrued revenues and expenses, respectively.

Schedule D (Fo	rm 990) 2018	Page 5
Part XIII	m 990) 2018 Supplemental Information (continued)	
		•

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

	am Education Foundation					22-	-3285022
Par	Form 990-EZ filers are	not required to	complete	this part.			line 17.
1	Indicate whether the organizati	on raised funds	2.2		-		
а	✓ Mail solicitations e ✓ Solicitation of non-government grants						
b	Internet and email solicitation	ons	f		ion of governmen		
С	✓ Phone solicitations		g	✓ Special :	fundraising events	3	
d	In-person solicitations						
2a	Did the organization have a wri	n 990, Part VII) o	or entity in c	onnection v	with professional	fundraising services	? ☐ Yes ☑ No
b	If "Yes," list the 10 highest pair compensated at least \$5,000 b			draisers) pı	ursuant to agreem	nents under which th	ne fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				>			
3 New J	List all states in which the organistration or licensing.	anization is regis	stered or lic	ensed to s	olicit contribution	s or has been notifi	ed it is exempt from
INCW 3							

Sche	edule G	(Form 990 or 990-EZ) 2018				Page 2
Pa	art II	Fundraising Events. Cor than \$15,000 of fundraising gross receipts greater that	ng event contributions	ion answered "Yes" o and gross income on	n Form 990, Part IV, li Form 990-EZ, lines 1	ne 18, or reported more
			(a) Event #1 Casino Royale Aucti	(b) Event #2 Trivia Night	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	40,175	28,210		68,385
ш	2	Less: Contributions	34,050	22,218		56,267
	3	Gross income (line 1 minus line 2)	6,125	5,992		12,118
	4	Cash prizes	0	0		C
	5	Noncash prizes	2,867	0		2,867
Direct Expenses	6	Rent/facility costs	0	1,904		1,904
	7	Food and beverages	0	164		164
Direc	8	Entertainment	0	0		C
	9	Other direct expenses .	3,258	3,925		7,183
	10 11	Direct expense summary. Ac Net income summary. Subtra	•			12,118
Pa	rt III	Gaming. Complete if th \$15,000 on Form 990-E2	e organization answe			or reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue			72,485	72,485
ses	2	Cash prizes			0	C
Expens	3	Noncash prizes			0	C
Direct Expenses	4	Rent/facility costs			16,180	16,180
	5	Other direct expenses .			10,592	
			☐ Yes %	☐ Yes %	✓ Yes 75 %	

ā∣		_					
	5	Other direct expenses .			10,592		10,592
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	✓ Yes 75 % No		
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)			26,772
	8	Net gaming income summary	. Subtract line 7 from li	ne 1, column (d)			45,713
9 a b	ls i	ter the state(s) in which the or the organization licensed to co 'No," explain:				🗸 Yes	□ No
10a b		ere any of the organization's g 'Yes," explain:	aming licenses revoked	I, suspended, or termina	ated during the tax year	? . □ Yes	☑ No
					Schedul	le G (Form 990 or 990)-EZ) 2018

Schedu	ile G (Form 990 or 990-EZ) 2018		Page 3
11	Does the organization conduct gaming activities with nonmembers?	✓ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	_ Yes	
13	Indicate the percentage of gaming activity conducted in:		0.000
а	The organization's facility		0 %
b	An outside facility		100 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ► Alan Routh		
	Address ► P. O. Box 81, Chatham, NJ 07928		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
		☐ Yes	✓ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ▶		
	Address ►		
16	Gaming manager information:		
	Name ► Wendy Kuppenheimer		
	Gaming manager compensation ▶ \$0		
	Description of services provided ► Manages Casino Royale event		
	✓ Director/officer		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
0.70	retain the state gaming license?	✓ Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year ▶ \$ 45.713		
Part		ii) and (al infori	v); and mation
Vet ga	ming income distributed to the School District of the Chathams through grants from Chatham Education Foundation.		

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identification number			
Chatham Education Foundation							22-3285022		
Part I General Information on Grants and Assistance									
	9 9								
the selection criteria used to	_							· Yes N	0
2 Describe in Part IV the organ									
Part II Grants and Other A 990, Part IV, line 21,				Part II can be d	uplicated if addit			red "Yes" on Form	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista		(h) Purpose of grant or assistance	
(1) School District of the Chathams 259 Lafayette Ave, Chatham NJ	22/2833844		\$104,266	•				inhanaa nublia aduaati	
(2)	22/2033044		\$104,200					nhance public educati	on
	-								
(3)	-								
(4)	-								
(5)	-								
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)	-								
2 Enter total number of section	n 501(c)(3) and gov	ernment organiza	tions listed in the li	ine 1 table					
3 Enter total number of other of								0	

Schedule I I	Form 990) (2017)					Page
Part III	Grants and Other Assistance to D Part III can be duplicated if addition			e organization answ	ered "Yes" on Form 990,	the state of the s
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7 Part IV	Supplemental Information. Provide	e the information	equired in Part I. lin	ne 2: Part III. columr	(b): and any other additi	onal information.
	es for monitoring the use of grant funds: Gran					onar mormation.
	are approved by the Chatham Education Fou					annually by an independent auditor.
The Scho	ol District periodically reviews individual gran	t accounts and retur	ns any unused grant fu	inds to Chatham Educa	ation Foundation.	
All grant	ecipients are required to submit a Final Grant	Report to Chatham	Education Foundation	approximately one yea	r after their grant was accept	ed.
The repor	t describes grant project outcomes, material i	mprovements in tead	hing or learning, and s	shows the expenditure	of funds.	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Employer identification number

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Chatham Education Foundation 22-3285022 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art 1 1 \$600 FMV provided by donor 2 Art - Historical treasures . . . 3 Art - Fractional interests . . . 4 Books and publications . 5 Clothing and household goods 6 Cars and other vehicles . . . 7 Boats and planes Intellectual property 8 9 Securities-Publicly traded . . 10 Securities-Closely held stock . Securities-Partnership, LLC, 11 or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution - Historic structures . . . 14 Qualified conservation contribution-Other 15 Real estate-Residential . . . 16 Real estate—Commercial 17 Real estate—Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . . 24 Archeological artifacts 25 Other ▶ (Auction items 124 \$40,000 FMV provided by donor Other ▶ (Raffle items 26 V 60 \$14,000 FMV provided by donor Other ► (27 28 Other ▶ (29 Number of Forms 8283 received by the organization during the tax year for contributions for

	Trainible of Forms 6200 received by the organization during the tax year for contributions for			
	which the organization completed Form 8283, Part IV, Donee Acknowledgement 29	0		
			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required			
	to be used for exempt purposes for the entire holding period?	30a		~
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard			
	contributions?	31	V	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		V
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Schedule M (Form 990) 2018 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Fundraising event includes a silent auction and a raffle, with most items donated by the community.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Chatham Education Foundation

Employer identification number

22-3285022

Form 990 Part VI Section B. Policies 11b Process used to review this Form 990: Form 990 is reviewed and approved by
the Chatham Education Foundation Finance Committee, Executive Committee, and Board of Trustees.
Form 990 Part VI Section B. Policies 12c - Chatham Education Foundation monitors and enforces its conflict of interest policy by having
each Trustee annually sign a conflict of interest statement, and reviews any issues raised by Trustees
Form 990 Part VI Section C. Disclosure 19 Chatham Education Foundation makes it's governing documents and conflict of interest policy
available to the public on it's website www.chathamedfoundation.org under the "governance" tab. IRS Form 990 includes
financial statements in Part I (summary of revenue and expenses), Part VIII (statement of revenue), Part IX (statement of functional expenses)
Part X (Balance Sheet), Schedule D (Supplemental Financial Statements, Part V Endowment Funds), and
Schedule G (Supplemental Information Regarding Fundraising or Gaming Activities.)
Form 990 Part XI - Reconciliation of Net Assets, line 9, other changes in net assets or fund balances: \$1,383 returned to
Chatham Education Foundation from the School District of the Chathams, representing unused grant funds
Form 990 part II Statement of Program Services Accomplishments, line 4d, Other program services, total \$39,088 for K-3 schools:
Washington Avenue School grants \$15,245:
\$10,092 furniture for classrooms of the future
\$3,080 books for "enchncing our classroom libraries with non-fiction texts"
\$906 for books for "we both read" program for students and parents
\$700 for books for non-fiction "how to" books
\$466 for differentiated mini-math activities
3400 for differentiated mini-matri activities
Coulthour Boulevard Cohool area 644 400.
Southern Boulevard School grants \$11,439:
\$6,917 for "Don't walk the halls, a path to success" project
\$2,479 for "the calm workspace" project
\$2,043 for "books to bloom social emotional learning" project

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
Chatham Education Foundation	22-3285022
Milton Avenue School grants \$10,100:	
\$6,373 for library furniture	
\$1,960 for "learning takes flexibility" project	
\$1,767 for Boogle Boards	
VI,707 for bodgle boards	
K-3 schools grant \$2,305 for "flexible seating for flexible minds" project	