

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

**A** For the 2019 calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1250 HANCOCK STREET 803N</b> City or town, state or province, country, and ZIP or foreign postal code <b>QUINCY, MA 02169</b> <b>F</b> Name and address of principal officer: <b>JOHN H. JACKSON</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number  <b>04-3457065</b> <b>E</b> Telephone number <b>(617) 876-7700</b> <b>G</b> Gross receipts \$ <b>5,990,778.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.SCHOTTFOUNDATION.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1999</b> <b>M</b> State of legal domicile: <b>MA</b>

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
<b>Activities &amp; Governance</b>	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	<b>9</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	<b>9</b>
	<b>5</b>	Total number of individuals employed in calendar year 2019 (Part V, line 2a) .....	<b>5</b>	<b>13</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) .....	<b>6</b>	<b>9</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	<b>0.</b>
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 39 .....	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h) .....	<b>Prior Year</b> 2,264,348.	<b>Current Year</b> 4,181,008.
	<b>9</b>	Program service revenue (Part VIII, line 2g) .....	0.	0.
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	222,687.	201,840.
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	455.	507.
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	2,487,490.	4,383,355.
	<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	1,661,980.
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	1,395,454.	1,420,464.
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) .....	0.	0.
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>900,112.</b>		
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	886,359.	1,009,006.
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	3,943,793.	3,473,425.
<b>Net Assets or Fund Balances</b>	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12 .....	-1,456,303.	909,930.
	<b>20</b>	Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b> 6,505,240.	<b>End of Year</b> 7,733,688.
	<b>21</b>	Total liabilities (Part X, line 26) .....	192,005.	397,398.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 .....	6,313,235.	7,336,290.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>JOHN H. JACKSON, PRESIDENT AND CEO</b> Type or print name and title	Date _____		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>JOYCE RIPIANZI, CPA</b>	Preparer's signature <b>JOYCE RIPIANZI, CPA</b>	Date <b>05/06/21</b>	Check <input type="checkbox"/> if self-employed PTIN <b>P00548581</b>
	Firm's name ▶ <b>AAFCPAS, INC.</b>		Firm's EIN ▶ <b>04-2571780</b>	
	Firm's address ▶ <b>50 WASHINGTON STREET WESTBOROUGH, MA 01581</b>		Phone no. <b>508-366-9100</b>	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE O

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 1,510,108. including grants of \$ 1,043,955. ) (Revenue \$ ) OPPORTUNITY TO LEARN - THE OPPORTUNITY TO LEARN PHILANTHROPIC STRATEGY IS AN EFFORT TO INCREASE RESOURCE ACCOUNTABILITY AND ENSURE THAT RACE IS NO LONGER A SIGNIFICANT PREDICTOR OF EDUCATIONAL RESOURCE ACCESS OR OUTCOMES. SCHOTT WILL BUILD THE CAPACITY OF THE EDUCATION JUSTICE MOVEMENT TO ACCOMPLISH THESE OBJECTIVES THROUGH INCREASING PHILANTHROPIC RESOURCES TO THE OPPORTUNITY TO LEARN NETWORK, EXECUTING A GRANTMAKING STRATEGY USING EMPLOYING A RACE AND GENDER LENSE, AND PROVIDING ADVOCACY AND OPERATIONS TECHNICAL ASSISTANCE TO NATIONAL EDUCATION JUSTICE NETWORKS.

4b (Code: ) (Expenses \$ 206,225. including grants of \$ ) (Revenue \$ ) HLLC PROVIDES A FRAMEWORK INCLUDING EDUCATION, HEALTH, SAFETY, SCHOOL CLIMATE, COMMUNITY POWER, ETC. TO EQUIP PARENTS, STUDENTS AND PUBLIC SCHOOL SYSTEMS TO CREATE HEALTHY COMMUNITY CLIMATES THAT ARE JUST AND FAIR. THE OBJECTIVES OF THE HLLC INITIATIVE ARE THREE-FOLD: 1) ASSESS COMMUNITIES' CROSS-CUTTING CAPACITY TO MEET THE WHOLE CHILD NEEDS, 2) PROVIDE RECOMMENDATIONS AND PRESCRIPTIONS FOR NEEDED SUPPORTS, AND 3) SUPPORT THE COMMUNITY ACTIONS AND PARTNERSHIPS THAT HAVE PROVEN TO LEAD TO SUSTAINABLE SYSTEMIC CHANGE. MORE THAN 25 CITIES AND COMMUNITIES ACROSS THE NATION WILL BE ENGAGED IN THE HLLC INITIATIVE.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,716,333.

THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

Part IV Checklist of Required Schedules

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

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

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> 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> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	X	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

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

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

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

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

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **MA, NY**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**  
**JOHN H. JACKSON - (617)876-7700**  
**1250 HANCOCK STREET, NO. 803N, QUINCY, MA 02169**

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

Check if Schedule O contains a response or note to any line in this Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CAROLINA ESPINAL CHAIR	1.00	X		X				0.	0.	0.
(2) MAISIE CHIN VICE-CHAIR	1.00	X		X				0.	0.	0.
(3) MARK PALEY TREASURER	1.00	X		X				0.	0.	0.
(4) CARLOS ROJAS ALVAREZ CLERK	1.00	X		X				0.	0.	0.
(5) JULIAN VASQUEZ HEILIG BOARD DIRECTOR	1.00	X						0.	0.	0.
(6) ALANDRA WASHINGTON BOARD DIRECTOR	1.00	X						0.	0.	0.
(7) MICHAEL S. WOTORSON BOARD DIRECTOR	1.00	X						0.	0.	0.
(8) KYLE SERRETTE BOARD DIRECTOR	1.00	X						0.	0.	0.
(9) JACKIE JENKINS-SCOTT BOARD DIRECTOR	1.00	X						0.	0.	0.
(10) SUSAN TAYLOR BATTEN BOARD DIRECTOR	1.00	X						0.	0.	0.
(11) AMIR WINDOM BOARD DIRECTOR	1.00	X						0.	0.	0.
(12) EILEEN DE LOS REYES BOARD DIRECTOR	1.00	X						0.	0.	0.
(13) VALERIA DO VALE BOARD DIRECTOR	1.00	X						0.	0.	0.
(14) DORIAN BURTON BOARD DIRECTOR	1.00	X						0.	0.	0.
(15) JOHN H. JACKSON PRESIDENT AND CEO	40.00			X				382,352.	0.	47,367.
(16) EDGAR G. VILLANUEVA SENIOR VP OF PROGRAMS AND ADVOCACY	40.00				X			160,938.	0.	22,525.

**THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position <small>(do not check more than one box, unless person is both an officer and a director/trustee)</small>						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Subtotal</b> .....							543,290.	0.	69,892.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							543,290.	0.	69,892.	

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

		Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....	<b>3</b>		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	<b>4</b>	<b>X</b>	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....	<b>5</b>		<b>X</b>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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



THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>	810,000.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	3,371,008.				
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f .....			4,181,008.			
	<b>Program Service Revenue</b>	<b>2 a</b> _____	<b>Business Code</b>				
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> _____							
<b>e</b> _____							
<b>f</b> All other program service revenue .....							
<b>g Total.</b> Add lines 2a-2f .....							
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		208,559.			208,559.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	1,600,704.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	1,607,423.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	-6,719.				
	<b>d</b> Net gain or (loss) .....			-6,719.		-6,719.	
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> OTHER INCOME	<b>Business Code</b>	900099	507.		507.	
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			507.			
<b>12 Total revenue.</b> See instructions .....			4,383,355.	0.	0.	202,347.	

**THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION**

Form 990 (2019)

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**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,041,955.	1,041,955.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	2,000.	2,000.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	458,798.	133,052.	178,931.	146,815.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	739,240.	176,115.	125,684.	437,441.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	56,320.	12,903.	20,005.	23,412.
<b>9</b> Other employee benefits	90,642.	21,863.	32,822.	35,957.
<b>10</b> Payroll taxes	75,464.	19,375.	18,766.	37,323.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	1,080.		1,080.	
<b>c</b> Accounting	182,710.		182,710.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	29,320.		29,320.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	384,024.	176,431.	86,250.	121,343.
<b>12</b> Advertising and promotion	1,517.		733.	784.
<b>13</b> Office expenses	27,238.	8,303.	10,247.	8,688.
<b>14</b> Information technology	35,022.	6,345.	10,052.	18,625.
<b>15</b> Royalties				
<b>16</b> Occupancy	137,957.	37,398.	51,851.	48,708.
<b>17</b> Travel	113,572.	58,670.	48,340.	6,562.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	43,004.	9,362.	33,642.	
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	27,406.	4,155.	16,588.	6,663.
<b>23</b> Insurance	10,730.	3,004.	3,112.	4,614.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> PAYROLL SERVICE FEES	9,832.	3,030.	3,625.	3,177.
<b>b</b> OFFICE EQUIPMENT	2,996.	2,372.	624.	
<b>c</b> LICENSES AND FEES	1,512.		1,512.	
<b>d</b> DUES AND MEMBERSHIPS	610.		610.	
<b>e</b> All other expenses	476.		476.	
<b>25</b> Total functional expenses. Add lines 1 through 24e	3,473,425.	1,716,333.	856,980.	900,112.
<b>26</b> 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)

THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	243,990.	<b>1</b>	424,529.
	<b>2</b> Savings and temporary cash investments .....	549,847.	<b>2</b>	1,336,445.
	<b>3</b> Pledges and grants receivable, net .....	306,880.	<b>3</b>	300,000.
	<b>4</b> Accounts receivable, net .....	9,437.	<b>4</b>	2,209.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	27,214.	<b>9</b>	26,637.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 127,738.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 92,936.	55,987.	<b>10c</b> 34,802.
	<b>11</b> Investments - publicly traded securities .....	5,292,005.	<b>11</b>	5,589,186.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	19,880.	<b>15</b>	19,880.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	6,505,240.	<b>16</b>	7,733,688.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	157,005.	<b>17</b>	130,340.
	<b>18</b> Grants payable .....	35,000.	<b>18</b>	267,058.
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	192,005.	<b>26</b>	397,398.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	655,050.	<b>27</b>	1,187,633.
	<b>28</b> Net assets with donor restrictions .....	5,658,185.	<b>28</b>	6,148,657.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	6,313,235.	<b>32</b>	7,336,290.
<b>33</b> Total liabilities and net assets/fund balances .....	6,505,240.	<b>33</b>	7,733,688.	

**THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION**

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	4,383,355.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	3,473,425.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	909,930.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	6,313,235.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	113,125.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	7,336,290.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2a</b>	<b>X</b>
<b>b</b> Were the organization's financial statements audited by an independent accountant? _____ 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2b</b>	<b>X</b>
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>2c</b>	<b>X</b>
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	<b>3a</b>	<b>X</b>
<b>b</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 on Schedule O and describe any steps taken to undergo such audits _____	<b>3b</b>	

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

2019

Open to Public Inspection

Name of the organization THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION
Employer identification number 04-3457065

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 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.
10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions.
11 An organization organized and operated exclusively to test for public safety.
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).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s).
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support.

Total

THE SCHOTT FOUNDATION FOR PUBLIC

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	5,253,010.	4,528,600.	4,364,720.	2,264,348.	4,181,008.	20,591,686.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	5,253,010.	4,528,600.	4,364,720.	2,264,348.	4,181,008.	20,591,686.
<b>5</b> 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) .....						7,777,711.
<b>6 Public support.</b> Subtract line 5 from line 4.						12,813,975.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b> Amounts from line 4 .....	5,253,010.	4,528,600.	4,364,720.	2,264,348.	4,181,008.	20,591,686.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	301,307.	190,686.	230,712.	154,035.	208,559.	1,085,299.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...	10,000.	10,000.	10,000.	0.	0.	30,000.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....		21,600.	292.	455.	507.	22,854.
<b>11 Total support.</b> Add lines 7 through 10						21,729,839.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	

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

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	58.97 %
<b>15</b> Public support percentage from 2018 Schedule A, Part II, line 14 .....	<b>15</b>	67.16 %

**16a 33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test - 2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**17a 10% -facts-and-circumstances test - 2019.** 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 - 2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2018 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2018 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**Part IV Supporting Organizations**

(Complete only if you checked a box 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 Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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 <b>Part VI</b> 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.		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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? Provide details in <b>Part VI</b> .		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
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	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2019 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
<b>1</b> Distributable amount for 2019 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<b>i</b> Carryover from 2014 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2019 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2015			
<b>b</b> Excess from 2016			
<b>c</b> Excess from 2017			
<b>d</b> Excess from 2018			
<b>e</b> Excess from 2019			

**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 A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

FUNDRAISING EVENT INCOME

2016 AMOUNT: \$ 21,600.

OTHER INCOME

2017 AMOUNT: \$ 292.

2018 AMOUNT: \$ 455.

2019 AMOUNT: \$ 507.



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2019**

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public Inspection**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

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

Name of organization <b>THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION</b>	Employer identification number <b>04-3457065</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	35,000.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	0.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b)	35,000.													
<b>d</b>	Other exempt purpose expenditures	3,438,425.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d)	3,473,425.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	323,671.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f)	80,918.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total	
<b>2a</b>	Lobbying nontaxable amount	343,710.	398,350.	340,514.	323,671.	1,406,245.
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))					2,109,368.
<b>c</b>	Total lobbying expenditures	10,000.	50,000.	35,000.	35,000.	130,000.
<b>d</b>	Grassroots nontaxable amount	85,928.	99,588.	85,129.	80,918.	351,563.
<b>e</b>	Grassroots ceiling amount (150% of line 2d, column (e))					527,345.
<b>f</b>	Grassroots lobbying expenditures	10,000.	50,000.	35,000.	35,000.	130,000.

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

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

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

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

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

**Part IV Supplemental Information**

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

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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

2019

Open to Public Inspection

Name of the organization THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION Employer identification number 04-3457065

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Conservation contribution details (table with 2a-2d). 3. Modified, transferred, released, extinguished, or terminated easements. 4. Number of states where property is located. 5. Written policy regarding monitoring. 6. Staff and volunteer hours. 7. Expenses incurred. 8. Section 170(h)(4)(B)(i) and (ii) requirements. 9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a, 1b, and 2. 1a: Reporting requirements for art, historical treasures, or other similar assets held for public exhibition. 1b: Reporting requirements for art, historical treasures, or other similar assets held for public exhibition. 2: Reporting requirements for art, historical treasures, or other similar assets for financial gain.



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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,717,041.	5,873,039.	6,595,847.	6,165,965.	6,937,057.
b Contributions					
c Net investment earnings, gains, and losses	285,645.	241,002.	413,928.	763,110.	-95,092.
d Grants or scholarships					
e Other expenditures for facilities and programs		397,000.	1,136,736.	333,228.	676,000.
f Administrative expenses					
g End of year balance	6,002,686.	5,717,041.	5,873,039.	6,595,847.	6,165,965.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  7.36 %
  - b Permanent endowment  %
  - c Term endowment  92.64 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| (i) Unrelated organizations  |     | X  |
| (ii) Related organizations   |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? |     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		18,662.	8,720.	9,942.
d Equipment		109,076.	84,216.	24,860.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				34,802.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (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 footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	4,467,160.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	113,125.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	113,125.	
3	Subtract line 2e from line 1	3	4,354,035.	
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	29,320.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	29,320.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,383,355.	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,444,105.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	3,444,105.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	29,320.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	29,320.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,473,425.	

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2:**

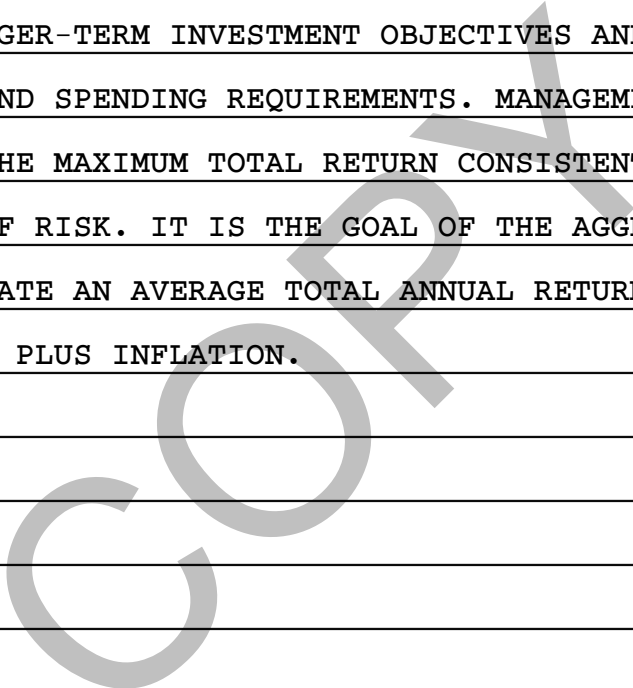
THE FOUNDATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. THE FOUNDATION HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AND ITS DECISIONS TO CLASSIFY REVENUES AS EXEMPT AS ITS ONLY SIGNIFICANT TAX POSITIONS. HOWEVER, THE FOUNDATION HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY REQUIRING

**Part XIII** Supplemental Information (continued)

RECOGNITION. THE  
FOUNDATION IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION.  
ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR THE PAST  
THREE YEARS.

PART V, LINE 4:

THE SCHOTT FOUNDATION ENDOWMENT WAS CREATED TO PROVIDE LONG-TERM FINANCIAL  
SUPPORT FOR THE SCHOTT FOUNDATION. ACCORDINGLY, THESE FUNDS ARE MANAGED  
WITH DISCIPLINED LONGER-TERM INVESTMENT OBJECTIVES AND STRATEGIES DESIGNED  
TO MEET CASH FLOWS AND SPENDING REQUIREMENTS. MANAGEMENT OF THE ASSETS IS  
DESIGNED TO ATTAIN THE MAXIMUM TOTAL RETURN CONSISTENT WITH ACCEPTABLE AND  
AGREED UPON LEVELS OF RISK. IT IS THE GOAL OF THE AGGREGATE LONG-TERM  
INVESTMENTS TO GENERATE AN AVERAGE TOTAL ANNUAL RETURN THAT EXCEEDS THE  
SPENDING/PAYOUT RATE PLUS INFLATION.



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization **THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION**

**Employer identification number  
04-3457065**

**Part I General Information on Grants and Assistance**

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

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

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
AFRICAN AMERICAN COMMUNITY TRUST NFP - 5113 S. HARPER AVE. - CHICAGO, IL 60615	47-5681832		5,000.	0.			TO SUPPORT LUGENIA BURNS HOPE CENTER'S COVID-19 RESPONSE WORK IN CHICAGO ILLINOIS
AGITARTE PO BOX 391791 CAMBRIDGE, MA 02139	04-3420465		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN PUERTO RICO
ARKANSAS COMMUNITY INSTITUTE 2101 SOUTH MAIN ST. LITTLE ROCK, AR 72206	72-1072223		4,000.	0.			TO SUPPORT GRASSROOTS ARKANSAS'S COVID-19 RESPONSE WORK IN LITTLE ROCK, ARKANSAS
ARKANSAS COMMUNITY INSTITUTE 2101 SOUTH MAIN ST. LITTLE ROCK, AR 72206	72-1072223		10,000.	0.			TO SUPPORT GRASSROOTS ARKANSAS'S CAMPAIGN FOR PUBLIC EDUCATION EQUITY IN ARKANSAS
ARKANSAS COMMUNITY INSTITUTE 2101 SOUTH MAIN ST. LITTLE ROCK, AR 72206	72-1072223		4,500.	0.			TO SUPPORT GRASSROOTS ARKANSAS EQUITY AND SUSTAINABLE COMMUNITY SCHOOLS ASSESSMENTS IN
BLOCKS TOGETHER 3711W. CHICAGO CHICAGO, IL 60651	36-3983087		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN CHICAGO, ILLINOIS

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

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

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

Schedule I (Form 990) (2019)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

Schedule I (Form 990)

04-3457065

Page 1

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROCKTON INTERFAITH COMMUNITY INC 1350 PLEASANT ST. BROCKTON, MA 02301	22-3135464		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN BROCKTON, MASSACHUSETTS
CALIFORNIANS FOR JUSTICE EDUCATION FUND - 1961 LAS PLUMAS AVENUE - SAN JOSE, CA 95133	94-3256009		20,000.	0.			TO SUPPORT THE RELATIONSHIP CENTERED SCHOOLS CAMPAIGN TO TRANSFORM SCHOOL CLIMATE
CENTER FOR LABOR EDUCATION AND RESEARCH (AKA MA JOBS WITH JUSTICE) - 375 CENTRE STREET - BOSTON, MA 02130	22-2604923		25,000.	0.			TO SUPPORT PARENT-LED ORGANIZING AND PARENT LEADERSHIP DEVELOPMENT TO ADVOCATE FOR EQUITABLE
CENTER FOR LABOR EDUCATION AND RESEARCH (AKA MA JOBS WITH JUSTICE) - 375 CENTRE STREET - BOSTON, MA 02130	22-2604923		10,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN MASSACHUSETTS
CENTER FOR POPULAR DEMOCRACY, INC. 449 TROUTMAN STREET, SUITE A BROOKLYN, NY 11237	45-3813436		40,000.	0.			TO SUPPORT THE ALLIANCE TO RECLAIM OUR SCHOOLS' WE CHOOSE EQUITY, FUND OUR FUTURE CAMPAIGN
CENTER FOR POPULAR DEMOCRACY, INC. 449 TROUTMAN STREET, SUITE A BROOKLYN, NY 11237	45-3813436		4,000.	0.			TO SUPPORT ONE PENNSYLVANIA'S COVID-19 RESPONSE WORK IN PITTSBURGH, PENNSYLVANIA
CENTER FOR POPULAR DEMOCRACY, INC. 449 TROUTMAN STREET, SUITE A BROOKLYN, NY 11237	45-3813436		1,000.	0.			TO SUPPORT ONE PENNSYLVANIA'S COVID-19 RESPONSE WORK IN PITTSBURGH, PENNSYLVANIA
CENTER FOR RESILIENT INDIVIDUALS FAMILIES AND COMMUNITIES - P.O. BOX 52843 - NEW ORLEANS, LA 70152	37-1945001		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN NEW ORLEANS, LOUISIANA
CLINTON HILL COMMUNITY ACTION 625 BROAD ST STE 240 NEWARK, NJ 07102-4417	84-2816101		5,000.	0.			TO SUPPORT PULSE'S COVID-19 RESPONSE WORK IN NEW JERSEY

Schedule I (Form 990)

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

Schedule I (Form 990)

04-3457065

Page 1

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY ASSET DEVELOPMENT REDEFINING EDUCATION - 8410 SOUTH BROADWAY - LOS ANGELES, CA 90003	26-4753821		5,000.	0.			TO SUPPORT PARENT ORGANIZING WORK IN LOS ANGELES, CALIFORNIA
COMMUNITY ORGANIZING AND FAMILY ISSUES - 2245 S MICHIGAN AVE, SUITE 200 - CHICAGO, IL 60616	36-4044632		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN CHICAGO, ILLINOIS
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012	95-4302067		5,000.	0.			TO SUPPORT CALIFORNIA NATIVE VOTE PROJECT'S COVID-19 RESPONSE WORK IN CALIFORNIA
COMMUNITY PARTNERS 1000 N. ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012	95-4302067		20,000.	0.			TO SUPPORT CALIFORNIA NATIVE VOTE PROJECT'S WORK TO ADVANCE THE INDIGENOUS EDUCATION NOW
F&L ORGANIZATIONAL SUPPORT SERVICES INC (FLOSS) - PO BOX 872436 - NEW ORLEANS, LA 70187	47-3451951		15,000.	0.			TO SUPPORT THE EXPANSION OF THE PARENT ORGANIZING FOR EQUITABLE PUBLIC EDUCATION AT STEP UP
F&L ORGANIZATIONAL SUPPORT SERVICES INC (FLOSS) - PO BOX 872436 - NEW ORLEANS, LA 70187	47-3451951		4,000.	0.			TO SUPPORT STEP UP LOUISIANA'S COVID-19 RESPONSE WORK IN NEW ORLEANS, LOUISIANA
F&L ORGANIZATIONAL SUPPORT SERVICES INC (FLOSS) - PO BOX 872436 - NEW ORLEANS, LA 70187	47-3451951		1,000.	0.			TO SUPPORT STEP UP LOUISIANA'S COVID-19 RESPONSE WORK IN NEW ORLEANS, LOUISIANA
FAMILIES AND FRIENDS OF LOUISIANA'S INCARCERATED CHILDREN - 1307 ORETHA C. HALEY BLVD, STE. 303 - NEW ORLEANS, LA 70113	20-5924561		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN LOUISIANA
FAMILIES AND FRIENDS OF LOUISIANA'S INCARCERATED CHILDREN - 1307 ORETHA C. HALEY BLVD, STE. 303 - NEW ORLEANS, LA 70113	20-5924561		25,000.	0.			TO SUPPORT A CAMPAIGN TO BRING ATTENTION TO INEQUITIES IN TECHNOLOGY RESOURCES IN PUBLIC

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRLS FOR GENDER EQUITY INC 25 CHAPEL STREET, SUITE 1006 BROOKLYN, NY 11201	04-3697166		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN NEW YORK
GIRLS FOR GENDER EQUITY INC 25 CHAPEL STREET, SUITE 1006 BROOKLYN, NY 11201	04-3697166		40,000.	0.			TO CENTER BLACK GIRLS IN EFFORTS TO END SCHOOL PUSHOUT AND BRING TRANSFORMATIVE CHANGE TO
GSA NETWORK 300 FRANK H. OGAWA PLAZA #9 OAKLAND, CA 94612	20-5367752		35,000.	0.			TO SUPPORT DIGNITY IN SCHOOLS CAMPAIGN CALIFORNIA TO ALIGN FIVE REGIONS IN A STATEWIDE
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		5,000.	0.			TO SUPPORT JOURNEY FOR JUSTICE ALLIANCE'S PUBLIC EDUCATION ADVOCACY LEARNING EXCHANGE IN
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		4,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK CHICAGO, ILLINOIS
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		95,000.	0.			TO SUPPORT JOURNEY FOR JUSTICE ALLAINCE'S "EQUITY OR ELSE" CAMPAIGN THAT WILL PUSH FOR
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		5,000.	0.			TO SUPPORT BLACK SWAN ACADEMY'S COVID-19 RESPONSE WORK IN THE DISTRICT OF COLUMBIA
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		5,000.	0.			TO SUPPORT FEDERACION DE MAESTROS DE PUERTO RICOS COVID-19 RESPONSE WORK IN PUERTO RICO
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		1,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN CHICAGO, ILLINOIS

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KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN CHICAGO, ILLINOIS
KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S COTTAGE GROVE AVE - CHICAGO, IL 60653	36-2598637		5,000.	0.			TO SUPPORT COLEMAN ADVOCATES FOR CHILDREN & YOUTH'S COVID-19 RESPONSE WORK IN SAN FRANCISCO,
KIDS RETHINK NEW ORLEANS SCHOOLS 705 FLOOD STREET NEW ORLEANS, LA 70117	33-1203055		25,000.	0.			TO ENGAGE YOUNG PEOPLE IN A CAMPAIGN TO ELIMINATE POLICE FROM SCHOOLS AND EMPLOY CULTURALLY
LIVING CITIES, INC. 1040 AVENUE OF THE AMERICAS NEW YORK, NY 10018	26-0003950		54,115.	0.			FOR FRONTLINE SOLUTIONS INTERNATIONAL, LLC TO SUPPORT EXPANDING EDUCATION JUSTICE
MARGARITA MUNIZ ACADEMY FOUNDATION INC. - 20 CHILD STREET - JAMAICA PLAIN, MA 02130	80-0827704		5,000.	0.			BOARD DISCRETIONARY GRANT
MASSACHUSETTS BUDGET AND POLICY CENTER - ONE STATE STREET, SUITE 1250 - BOSTON, MA 02109	04-2967537		20,000.	0.			TO PROVIDE EDUCATION FINANCE POLICY RESEARCH AND ANALYSIS TO LOCAL AND STATEWIDE COMMUNITY AND
MASSACHUSETTS COMMUNITIES ACTION NETWORK - 14 CUSHING AVENUE - DORCHESTER, MA 02125	04-2863903		20,000.	0.			TO SUPPORT FAITH AND COMMUNITY ENGAGEMENT EFFORTS TO ADVOCATE FOR EQUITABLE PUBLIC SCHOOL
MASSACHUSETTS COMMUNITIES ACTION NETWORK - 14 CUSHING AVENUE - DORCHESTER, MA 02125	04-2863903		10,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN MASSACHUSETTS
NACA-INSPIRED SCHOOLS NETWORK P.O. BOX 40334 ALBUQUERQUE, NM 87196	47-2981893		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN NEW MEXICO

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NATIONAL BLACK CHILD DEVELOPMENT INSTITUTE. INC - 8455 COLESVILLE RD STE 910 - SILVER SPRING, MD 20910	52-0908178		5,000.	0.			TO SUPPORT BREAKING OUR CHAINS' COVID-19 RESPONSE WORK IN DENVER, COLORADO
NATIONAL BLACK WOMEN'S JUSTICE INSTITUTE - 2703 7TH STREET, SUITE 109 - BERKELEY, CA 94710	46-3198451		15,000.	0.			TO SUPPORT COMMUNITY ENGAGEMENT OF THE FILM PUSHOUT: THE CRIMINALIZATION OF BLACK
NATIONAL ECONOMIC & SOCIAL RIGHTS INIT. - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		95,000.	0.			TO SUPPORT THE DIGNITY IN SCHOOLS CAMPAIGN, WORKING TO END THE
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT PARENTS FOR PUBLIC EDUCATION'S COVID-19 RESPONSE WORK IN GUILFORD COUNTY, NORTH
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT THE WOMAN OF GOD'S DESIGN'S COVID-19 RESPONSE WORK IN CHICAGO, ILLINOIS
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT MINNESOTA PARENT UNION'S COVID-19 RESPONSE WORK IN MINNEAPOLIS AND ST. PAUL,
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT VIRGINIA COUNCIL ON LGBTQ ADVOCACY'S COVID-19 RESPONSE WORK IN VIRGINIA
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT ELITE EDUCATIONAL CONSULTING'S COVID-19 RESPONSE WORK IN VIRGINIA
NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038	73-1714118		5,000.	0.			TO SUPPORT PARENTS ACROSS AMERICA OREGON'S COVID-19 RESPONSE WORK IN OREGON

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE VOICE, INC. 1072 J.R. LYNCH STREET, SUITE #7 JACKSON, MS 39203	02-0787550		5,000.	0.			TO SUPPORT FANNIE LOU HAMER CENTER FOR CHANGE'S COVID-19 RESPONSE WORK IN MISSISSIPPI
ONE VOICE, INC. 1072 J.R. LYNCH STREET, SUITE #7 JACKSON, MS 39203	02-0787550		30,000.	0.			TO PROVIDE LEADERSHIP DEVELOPMENT AND TRAINING TO PARENTS, STUDENTS, SCHOOL DISTRICT LEADERS
PADRES UNIDOS INC 4130 TEJON ST. SUITE C. DENVER, CO 80211	84-1426652		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN DENVER, COLORADO
PATERSON EDUCATION FUND INC. 451 VAN HOUTEN STREET PATERSON, NJ 07501	22-2464316		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN PATERSON, NEW JERSEY
PROJECT SOUTH THE INSTITUTION FOR THE ELIMINATION POVERTY & GENOCIDE - 9 GAMMON ST SE - ATLANTA, GA 30315	58-1956686		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN ATLANTA, GEORGIA
PUBLIC POLICY AND EDUCATION FUND OF NEW YORK INC - 94 CENTRAL AVE - ALBANY, NY 12206	13-3364209		1,500.	0.			"PRESIDENTIAL DISCRETIONARY GRANT FOR ALLIANCE FOR QUALITY EDUCATION, INC.
PUBLIC POLICY AND EDUCATION FUND OF NEW YORK INC - 94 CENTRAL AVE - ALBANY, NY 12206	13-3364209		5,000.	0.			TO SUPPORT ALLIANCE FOR QUALITY EDUCATION'S COVID-19 RESPONSE WORK IN NEW YORK STATE
PUBLIC POLICY AND EDUCATION FUND OF NEW YORK INC - 94 CENTRAL AVE - ALBANY, NY 12206	13-3364209		25,000.	0.			TO INCREASE OPPORTUNITIES FOR EQUITABLE EDUCATION THROUGH GREATER INVESTMENT IN EDUCATIONAL
RACIAL JUSTICE NOW 18 FARMCREST COURT SILVER SPRING, MD 20905	81-2721208		5,000.	0.			TO SUPPORT WEST DAYTON YOUTH TASK FORCE'S COVID-19 RESPONSE WORK IN DAYTON, OHIO

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RACIAL JUSTICE NOW 18 FARMCREST COURT SILVER SPRING, MD 20905	81-2721208		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN DAYTON, OHIO
RE:POWER FUND 2639 NICOLLET AVE MINNEAPOLIS, MN 55408	35-2191193		20,000.	0.			TO PROVIDE STRATEGIC PLANNING AND COACHING SUPPORT TO MASSACHUSETTS GRANTEE PARTNERS WORKING
RESIST 259 ELM STREET, #201 SOMERVILLE, MA 02144	04-2433182		5,000.	0.			TO SUPPORT BOSTON EDUCATION JUSTICE ALLIANCE'S PARENT, STUDENT, COMMUNITY, AND
ROCKEFELLER PHILANTHROPY ADVISORS 6 W. 48TH ST. 10TH FL NEW YORK, NY 10036	13-3615533		20,000.	0.			TO SUPPORT THE EXECUTIVES ALLIANCE TO EXPAND OPPORTUNITIES FOR BOYS AND MEN OF COLOR, WORKING
SOUL SISTERS LEADERSHIP COLLECTIVE INC - 1951 NW 7TH AVE #600 - MIAMI, FL 33136	47-3108951		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN MIAMI, FLORIDA AND NEW YORK CITY
SOUTHERN ECHO INC 1350 LIVINGSTON LANE JACKSON, MS 39213	64-0819311		30,000.	0.			TO PROVIDE CAMPAIGN SUPPORT TO IMPROVE PUBLIC EDUCATION IN MISSISSIPPI
SOUTHERN ECHO INC 1350 LIVINGSTON LANE JACKSON, MS 39213	64-0819311		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN MISSISSIPPI
TEACHERS UNITE INC 411 E 10TH ST APT 15H NEW YORK, NY 10009	11-3826739		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN NEW YORK CITY
TENANTS AND WORKERS UNITED 3801 MT VERNON AVENUE ALEXANDRIA, VA 22305	54-1515305		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN NORTHERN VIRGINIA

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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TIDES CENTER PO BOX 29907 SAN FRANCISCO, CA 94129	94-3213100		5,000.	0.			TO SUPPORT NYC COALITION FOR EDUCATIONAL JUSTICE'S COVID-19 RESPONSE WORK IN NEW YORK CITY
TIDES CENTER PO BOX 29907 SAN FRANCISCO, CA 94129	94-3213100		1,000.	0.			TO EMERGING PRACTITIONERS IN PHILANTHROPY TO ADVANCE EFFECTIVE SOCIAL JUSTICE PHILANTHROPY
TRANSFORMATIVE CULTURE PROJECT 100R WARREN STREET ROXBURY, MA 02119	80-0214659		20,000.	0.			TO SUPPORT PA'LANTE RESTORATIVE JUSTICE TO PROVIDE HEALING JUSTICE SPACE FOR EDUCATION
UNITY COMMUNITY CENTER OF SOUTH JERSEY INCORPORATED - 1544 MOUNT EPHRAIM AVE - CAMDEN, NJ 08104	52-1666574		4,000.	0.			TO SUPPORT CAMDEN PARENTS UNION'S COVID-19 RESPONSE WORK IN CAMDEN, NEW JERSEY
UNITY COMMUNITY CENTER OF SOUTH JERSEY INCORPORATED - 1544 MOUNT EPHRAIM AVE - CAMDEN, NJ 08104	52-1666574		1,000.	0.			TO SUPPORT CAMDEN PARENTS UNION'S COVID-19 RESPONSE WORK IN CAMDEN, NEW JERSEY
WOMEN ENCOURAGING EMPOWERMENT INC. 50 WALNUT AVE REVERE, MA 02151	04-3286531		5,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN REVERE, MASSACHUSETTS
WORCESTER INTERFAITH 111 PARK AVENUE WORCESTER, MA 01609	04-3158699		20,000.	0.			TO SUPPORT PARENT, STUDENT, COMMUNITY, AND LABOR PARTNERSHIPS IN WORCESTER AND ACROSS
WORCESTER INTERFAITH 111 PARK AVENUE WORCESTER, MA 01609	04-3158699		6,000.	0.			TO SUPPORT COVID-19 RESPONSE WORK IN MASSACHUSETTS
XAVIER UNIVERSITY OF LOUISIANA C/O OFFICE OF INSTITUTIONAL ADVANCEMENT, 1 DREXEL DR. BOX 66 - NEW ORLEANS,	72-0635884		5,000.	0.			TO SUPPORT EDUCATION

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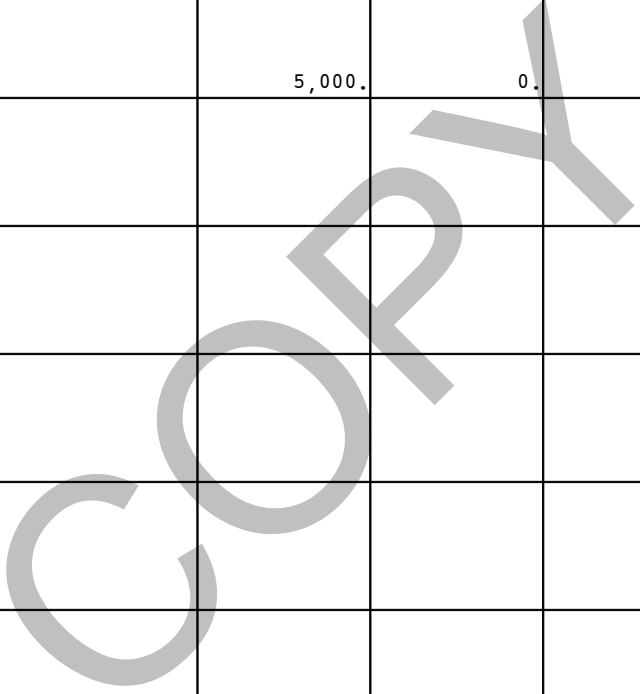
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTHBUILD USA, INC 58 DAY STREET SOMERVILLE, MA 02144	22-3076454		20,000.	0.			TO SUPPORT YOUTH ON BOARD TO PROVIDE YOUTH LEADERSHIP AND YOUTH ORGANIZING CAPACITY
YOUTHBUILD USA, INC 58 DAY STREET SOMERVILLE, MA 02144	22-3076454		5,000.	0.			TO SUPPORT YOUTH ON BOARD'S COVID-19 RESPONSE WORK IN MASSACHUSETTS



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ARKANSAS COMMUNITY INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRASSROOTS ARKANSAS

EQUITY AND SUSTAINABLE COMMUNITY SCHOOLS ASSESSMENTS IN ARKANSAS IN AN  
EFFORT TO ADVANCE EQUITY IN PUBLIC EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIANS FOR JUSTICE EDUCATION FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE RELATIONSHIP CENTERED

**Part IV** Supplemental Information

SCHOOLS CAMPAIGN TO TRANSFORM SCHOOL CLIMATE BY INVESTING IN SCHOOL  
STAFF, VALUING STUDENT VOICE, AND CREATING SPACES FOR RELATIONSHIP  
BUILDING IN CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT:

CENTER FOR LABOR EDUCATION AND RESEARCH (AKA MA JOBS WITH JUSTICE)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PARENT-LED ORGANIZING AND  
PARENT LEADERSHIP DEVELOPMENT TO ADVOCATE FOR EQUITABLE PUBLIC EDUCATION  
IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR POPULAR DEMOCRACY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE ALLIANCE TO RECLAIM  
OUR SCHOOLS' WE CHOOSE EQUITY, FUND OUR FUTURE CAMPAIGN FOCUSED ON THE  
BUILDING AND STRENGTHENING OF COMMUNITY COALITIONS TO PUSH FOR AND WIN  
GREATER EQUITY IN PUBLIC EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY PARTNERS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT CALIFORNIA NATIVE VOTE  
PROJECT'S WORK TO ADVANCE THE INDIGENOUS EDUCATION NOW COALITION AND TO  
ADDRESS THE HUMAN RIGHTS OF NATIVE AND INDIGENOUS STUDENTS IN PUBLIC  
SCHOOLS IN LOS ANGELES, CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT:

F&L ORGANIZATIONAL SUPPORT SERVICES INC (FLOSS)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE EXPANSION OF THE  
PARENT ORGANIZING FOR EQUITABLE PUBLIC EDUCATION AT STEP UP LOUISIANA

NAME OF ORGANIZATION OR GOVERNMENT:



Part IV Supplemental Information

FAMILIES AND FRIENDS OF LOUISIANA'S INCARCERATED CHILDREN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT A CAMPAIGN TO BRING ATTENTION TO INEQUITIES IN TECHNOLOGY RESOURCES IN PUBLIC EDUCATION IN LOUISIANA

NAME OF ORGANIZATION OR GOVERNMENT: GIRLS FOR GENDER EQUITY INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CENTER BLACK GIRLS IN EFFORTS TO END SCHOOL PUSHOUT AND BRING TRANSFORMATIVE CHANGE TO PUBLIC EDUCATION AT THE LOCAL, NEW YORK STATE, AND NATIONAL LEVEL

NAME OF ORGANIZATION OR GOVERNMENT: GSA NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT DIGNITY IN SCHOOLS CAMPAIGN CALIFORNIA TO ALIGN FIVE REGIONS IN A STATEWIDE MOVEMENT FOR SYSTEMIC CHANGES THAT DISMANTLE THE SCHOOL TO PRISON/DEPORTATION PIPELINE AND CREATE HEALTHY SCHOOL CLIMATES AND JUSTICE FOR CALIFORNIA YOUTH

NAME OF ORGANIZATION OR GOVERNMENT:

KENWOOD OAKLAND COMMUNITY ORGANIZATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT JOURNEY FOR JUSTICE ALLIANCE'S PUBLIC EDUCATION ADVOCACY LEARNING EXCHANGE IN PUERTO RICO

NAME OF ORGANIZATION OR GOVERNMENT:

KENWOOD OAKLAND COMMUNITY ORGANIZATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT JOURNEY FOR JUSTICE ALLIANCE'S "EQUITY OR ELSE" CAMPAIGN THAT WILL PUSH FOR EQUITABLE EDUCATION POLICY AT THE LOCAL AND FEDERAL LEVEL BY EXPOSING RACIAL INEQUITY IN PUBLIC EDUCATION

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

KENWOOD OAKLAND COMMUNITY ORGANIZATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT COLEMAN ADVOCATES FOR CHILDREN & YOUTH'S COVID-19 RESPONSE WORK IN SAN FRANCISCO, CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT: KIDS RETHINK NEW ORLEANS SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ENGAGE YOUNG PEOPLE IN A CAMPAIGN TO ELIMINATE POLICE FROM SCHOOLS AND EMPLOY CULTURALLY RESPONSIVE EDUCATION IN NEW ORLEANS, LOUISIANA

NAME OF ORGANIZATION OR GOVERNMENT: LIVING CITIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR FRONTLINE SOLUTIONS INTERNATIONAL, LLC TO SUPPORT EXPANDING EDUCATION JUSTICE MOVEMENT WORK IN THE SOUTHERN UNITED STATES

NAME OF ORGANIZATION OR GOVERNMENT:

MASSACHUSETTS BUDGET AND POLICY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EDUCATION FINANCE POLICY RESEARCH AND ANALYSIS TO LOCAL AND STATEWIDE COMMUNITY AND LABOR PARTNERSHIP TABLES IN MASSACHUSETTS TO ADVANCE EQUITABLE EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT:

MASSACHUSETTS COMMUNITIES ACTION NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT FAITH AND COMMUNITY ENGAGEMENT EFFORTS TO ADVOCATE FOR EQUITABLE PUBLIC SCHOOL RESOURCES IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT:

Part IV Supplemental Information

NATIONAL BLACK WOMEN'S JUSTICE INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT COMMUNITY ENGAGEMENT OF THE FILM PUSHOUT: THE CRIMINALIZATION OF BLACK GIRLS IN SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL ECONOMIC & SOCIAL RIGHTS INIT.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE DIGNITY IN SCHOOLS CAMPAIGN, WORKING TO END THE DECRIMINALIZATION AND PUSH OUT OF STUDENTS OF COLOR AND PROMOTE RESTORATIVE AND CULTURALLY RELEVANT SCHOOL CLIMATES IN OVER 20 DISTRICTS AND STATES

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PARENTS FOR PUBLIC EDUCATION'S COVID-19 RESPONSE WORK IN GUILFORD COUNTY, NORTH CAROLINA

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT MINNESOTA PARENT UNION'S COVID-19 RESPONSE WORK IN MINNEAPOLIS AND ST. PAUL, MINNESOTA

NAME OF ORGANIZATION OR GOVERNMENT: ONE VOICE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE LEADERSHIP DEVELOPMENT AND TRAINING TO PARENTS, STUDENTS, SCHOOL DISTRICT LEADERS AND OTHER STAKEHOLDERS TO STRENGTHEN THEIR EFFECTIVENESS IN CHALLENGING THE INEQUITIES IN PUBLIC EDUCATION IN MISSISSIPPI

NAME OF ORGANIZATION OR GOVERNMENT:

Part IV Supplemental Information

PUBLIC POLICY AND EDUCATION FUND OF NEW YORK INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO INCREASE OPPORTUNITIES FOR EQUITABLE EDUCATION THROUGH GREATER INVESTMENT IN EDUCATIONAL EQUITY, EXPANSION OF PRE-K, POSITIVE SCHOOL CLIMATE AND CULTURALLY AFFIRMING EDUCATION FOR NEW YORK STUDENTS

NAME OF ORGANIZATION OR GOVERNMENT: RE:POWER FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE STRATEGIC PLANNING AND COACHING SUPPORT TO MASSACHUSETTS GRANTEE PARTNERS WORKING TO ADVANCE EQUITY IN PUBLIC EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT: RESIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT BOSTON EDUCATION JUSTICE ALLIANCE'S PARENT, STUDENT, COMMUNITY, AND LABOR PARTNERSHIPS IN BOSTON AND ACROSS MASSACHUSETTS TO ADVANCE EQUITY IN PUBLIC EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT: ROCKEFELLER PHILANTHROPY ADVISORS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE EXECUTIVES ALLIANCE TO EXPAND OPPORTUNITIES FOR BOYS AND MEN OF COLOR, WORKING TO REMOVE SOCIAL AND SYSTEMIC BARRIERS TO OPPORTUNITIES FOR MALES OF COLOR

NAME OF ORGANIZATION OR GOVERNMENT: TRANSFORMATIVE CULTURE PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PA'LANTE RESTORATIVE JUSTICE TO PROVIDE HEALING JUSTICE SPACE FOR EDUCATION JUSTICE LEADERS IN MASSACHUSETTS WORKING TO STRENGTHEN COMMUNITY AND LABOR PARTNERSHIPS

NAME OF ORGANIZATION OR GOVERNMENT: WORCESTER INTERFAITH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PARENT, STUDENT,

**Part IV** Supplemental Information

COMMUNITY, AND LABOR PARTNERSHIPS IN WORCESTER AND ACROSS MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: YOUTHBUILD USA, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT YOUTH ON BOARD TO PROVIDE  
YOUTH LEADERSHIP AND YOUTH ORGANIZING CAPACITY BUILDING SUPPORT TO  
ESTABLISHED AND EMERGING EDUCATION JUSTICE COALITIONS IN MASSACHUSETTS

COPY

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2019**

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION** Employer identification number **04-3457065**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)        |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2019

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN H. JACKSON PRESIDENT AND CEO	(i)	382,352.	0.	0.	28,547.	18,820.	429,719.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) EDGAR G. VILLANUEVA SENIOR VP OF PROGRAMS AND ADVOCACY	(i)	160,938.	0.	0.	14,578.	7,947.	183,463.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

ALL EMPLOYEES, INCLUDING THE PRESIDENT AND CEO ARE ELIGIBLE TO BE  
REIMBURSED \$75 PER MONTH FOR HEALTH CLUB MEMBERSHIP.

COPY



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

Employer identification number  
04-3457065

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PURPOSE OF THE CORPORATION IS TO ENGAGE IN THE FOLLOWING

ACTIVITIES: (1) TO OPERATE EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL  
PURPOSES UNDER CODE SECTION 501(C)(3), (2) TO DEVELOP AND STRENGTHEN A  
BROAD-BASED AND REPRESENTATIVE MOVEMENT TO ACHIEVE FULLY RESOURCED,  
QUALITY PRE K-12 PUBLIC EDUCATION, AND (3) TO ENGAGE IN ANY AND ALL  
OTHER LAWFUL ACTIVITIES INCIDENTAL TO AND IN PURSUIT OF THE FOREGOING  
PURPOSES, EXCEPT AS SPECIFICALLY RESTRICTED BY THE ARTICLES OF  
ORGANIZATION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PURPOSE OF THE CORPORATION IS TO ENGAGE IN THE FOLLOWING

ACTIVITIES: (1) TO OPERATE EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL  
PURPOSES UNDER CODE SECTION 501(C)(3), (2) TO DEVELOP AND STRENGTHEN A  
BROAD-BASED AND REPRESENTATIVE MOVEMENT TO ACHIEVE FULLY RESOURCED,  
QUALITY PRE K-12 PUBLIC EDUCATION, AND (3) TO ENGAGE IN ANY AND ALL  
OTHER LAWFUL ACTIVITIES INCIDENTAL TO AND IN PURSUIT OF THE FOREGOING  
PURPOSES, EXCEPT AS SPECIFICALLY RESTRICTED BY THE ARTICLES OF  
ORGANIZATION.

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

THE FORM 990 IS PREPARED BY THE ORGANIZATION'S OUTSIDE ACCOUNTANTS AND IS  
PROVIDED TO THE BOARD VIA E-MAIL PRIOR TO BEING FILED.

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

ANNUALLY, ALL DIRECTORS REVIEW A LIST OF CURRENT GRANTEES AND VENDOR

Name of the organization	THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION	Employer identification number	04-3457065
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SIGNIFICANT PARTNERS AND DECLARE ANY CONFLICTS OR POTENTIAL CONFLICTS. THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED ANNUALLY. ALL OFFICERS AND DIRECTORS ARE REQUIRED TO SIGN AN ANNUAL ACKNOWLEDGEMENT THAT THEY HAVE RECEIVED A COPY OF THE POLICY, UNDERSTAND IT, AND AGREE TO ABIDE BY ITS TERMS.

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

THE PROCESS OF DETERMINING INITIAL COMPENSATION OF THE ORGANIZATION'S CHIEF EXECUTIVE OFFICER AND OTHER OFFICERS INCLUDES A REVIEW BY AN OUTSIDE SEARCH FIRM. A SET OF PARAMETERS INCLUDING SALARY AND JOB DESCRIPTION GUIDELINES IS CONVEYED TO THE RECRUITMENT FIRM. THE RECRUITMENT FIRM WILL SEEK OUT INDIVIDUALS WITH THE APPROPRIATE BACKGROUND AND ALSO MAKE RECOMMENDATIONS AS TO THE COMPARABLE SALARIES FOR SIMILAR POSITIONS. THE BASIS OF THE COMPENSATION DECISION IS DOCUMENTED AND BASED ON A DETERMINATION THAT THE AMOUNT PAID IS NO MORE THAN REASONABLE IN VIEW OF SERVICES RENDERED. THE EXECUTIVE COMMITTEE MANAGES THIS PROCESS AND MAKES A RECOMMENDATION TO THE FULL BOARD.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. AN INTERESTED PARTY MAY MAKE A REQUEST DIRECTLY TO THE ORGANIZATION. ADDITIONALLY, THE FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE VIA THE MASSACHUSETTS ATTORNEY GENERAL'S WEBSITE.

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

CONSULTANTS:

PROGRAM SERVICE EXPENSES

175,431.

Name of the organization	THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION	Employer identification number	04-3457065
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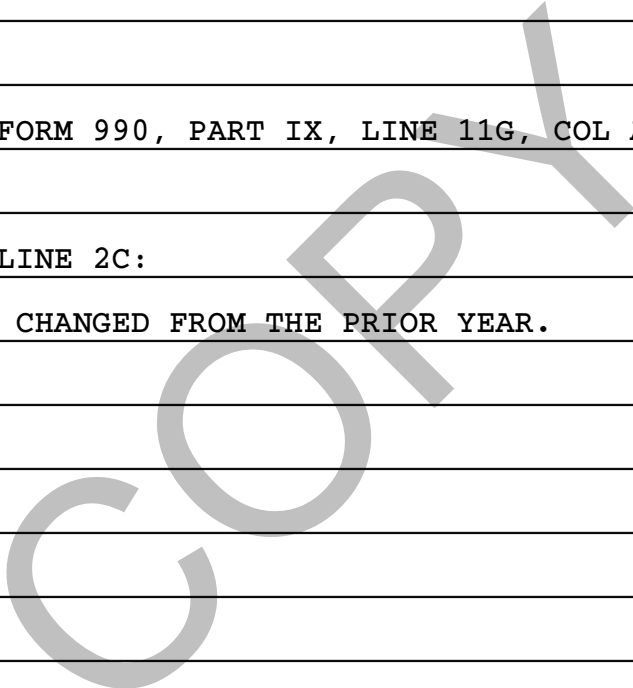
MANAGEMENT AND GENERAL EXPENSES	86,250.
FUNDRAISING EXPENSES	121,343.
TOTAL EXPENSES	383,024.

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	1,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	384,024.

FORM 990, PART XII, LINE 2C:

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization **THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION** Employer identification number **04-3457065**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
CAROLINE & SIGMUND SCHOTT FUND - 11-2856561 675 MASSACHUSETTS AVENUE, 8TH FL CAMBRIDGE, MA 02139	PRIVE GRANTMAKING FOUNDATION	DELAWARE	501(C)(3)	PF	THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION	X	
THE OPPORTUNITY TO LEARN ACTION FUND - 27-4836929, 675 MASSACHUSETTS AVENUE, 8TH FL, CAMBRIDGE, MA 02139	ADVOCACY ORGANIZATION - EDUCATIONAL	DELAWARE	501(C)(4)	N/A	THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION	X	

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

Schedule R (Form 990) 2019

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

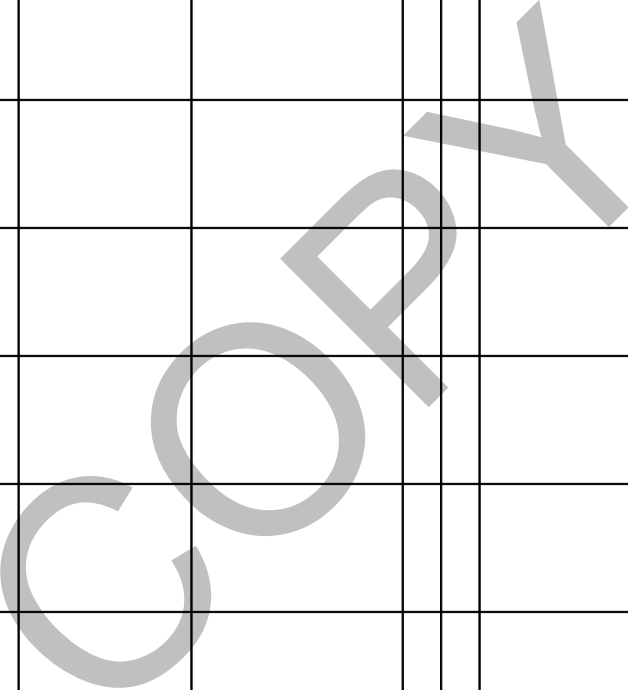
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CAROLINE & SIGMUND SCHOTT FUND	C	810,000.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**Part VI Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	



932164 09-10-19

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Lined area for supplemental information.





# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION</b>	Taxpayer identification number (TIN) <b>04-3457065</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1250 HANCOCK STREET, NO. 803N</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>QUINCY, MA 02169</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**JOHN H. JACKSON**

- The books are in the care of ▶ **1250 HANCOCK STREET, NO. 803N - QUINCY, MA 02169**  
Telephone No. ▶ **(617) 876-7700** Fax No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **MAY 17, 2021**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **JUL 1, 2019**, and ending **JUN 30, 2020**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.