

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

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

|  |   |  |
|--|---|--|
| <b>B</b> Check if applicable:<br><br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return/terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization<br><b>THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION</b><br>Doing business as<br>Number and street (or P.O. box if mail is not delivered to street address) Room/suite<br><b>ONE MIFFLIN STREET 400</b><br>City or town, state or province, country, and ZIP or foreign postal code<br><b>CAMBRIDGE, MA 02138</b><br><b>F</b> Name and address of principal officer: <b>JOHN H. JACKSON</b><br><b>SAME AS C ABOVE</b> | <b>D</b> Employer identification number<br><b>04-3457065</b><br><b>E</b> Telephone number<br><b>617-837-2488</b><br><b>G</b> Gross receipts \$ <b>14,096,379.</b><br><b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list. See instructions<br><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: <b>SEE SCHEDULE O</b>                                       |                    |                    |
| <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>12</b>          |
|                                    | <b>4</b>  | Number of independent voting members of the governing body (Part VI, line 1b)   | <b>4</b>           | <b>12</b>          |
|                                    | <b>5</b>  | Total number of individuals employed in calendar year 2021 (Part V, line 2a)  | <b>5</b>           | <b>18</b>          |
|                                    | <b>6</b>  | Total number of volunteers (estimate if necessary)  | <b>6</b>           | <b>12</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, Part I, line 11  | <b>7b</b>          | <b>0.</b>          |
| <b>Revenue</b>                     | <b>8</b>  | Contributions and grants (Part VIII, line 1h)   | <b>10,888,372.</b> | <b>13,616,907.</b> |
|                                    | <b>9</b>  | Program service revenue (Part VIII, line 2g)  | <b>0.</b>          | <b>0.</b>          |
|                                    | <b>10</b>   | Investment income (Part VIII, column (A), lines 3, 4, and 7d)   | <b>1,824,658.</b>  | <b>98,314.</b>     |
|                                    | <b>11</b>   | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | <b>2,405.</b>      | <b>3,710.</b>      |
|                                    | <b>12</b>   | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | <b>12,715,435.</b> | <b>13,718,931.</b> |
| <b>Expenses</b>                    | <b>13</b>   | Grants and similar amounts paid (Part IX, column (A), lines 1-3)  | <b>1,512,610.</b>  | <b>2,469,775.</b>  |
|                                    | <b>14</b>   | Benefits paid to or for members (Part IX, column (A), line 4)   | <b>0.</b>          | <b>0.</b>          |
|                                    | <b>15</b>   | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   | <b>1,804,511.</b>  | <b>2,414,374.</b>  |
|                                    | <b>16a</b>  | Professional fundraising fees (Part IX, column (A), line 11e)   | <b>0.</b>          | <b>0.</b>          |
|                                    | <b>b</b>  | Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,118,183.</b>   |                    |                    |
|                                    | <b>17</b>   | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)  | <b>754,849.</b>    | <b>1,162,698.</b>  |
| <b>18</b>                          | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | <b>4,071,970.</b>   | <b>6,046,847.</b>  |                    |
| <b>19</b>                          | Revenue less expenses. Subtract line 18 from line 12                      | <b>8,643,465.</b>   | <b>7,672,084.</b>  |                    |
| <b>Net Assets or Fund Balances</b> | <b>20</b>   | Total assets (Part X, line 16)  | <b>15,969,642.</b> | <b>22,732,419.</b> |
|                                    | <b>21</b>   | Total liabilities (Part X, line 26)   | <b>376,693.</b>    | <b>536,603.</b>    |
|                                    | <b>22</b>   | Net assets or fund balances. Subtract line 21 from line 20  | <b>15,592,949.</b> | <b>22,195,816.</b> |

**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<br><b>JOHN H. JACKSON, PRESIDENT AND CEO</b><br>Type or print name and title | Date   |                         |   |                          |
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br><b>JOYCE RIPIANZI, CPA</b>  | Preparer's signature<br><b>JOYCE RIPIANZI, CPA</b> | Date<br><b>05/15/23</b> | Check if self-employed <input type="checkbox"/> | PTIN<br><b>P00548581</b> |
|                               | Firm's name ▶ <b>AAFPCAS, 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 \$ 3,118,912. including grants of \$ 2,469,775. ) (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 \$ 86,481. 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 \$ 585,501. including grants of \$ ) (Revenue \$ ) SCHOTT FOUNDATION SERVES AS THE FISCAL SPONSOR TO TWO NATIONAL EDUCATION JUSTICE ORGANIZATIONS AS PART OF THE PACKAGE OF RESOURCE SUPPORTS PROVIDED BY SCHOTT TO OUR COMMUNITY PARTNERS ALIGNED WITH OUR WORK ON EDUCATION JUSTICE. SCHOTT SERVES AS THE LEGAL ENTITY FOR THESE ORGANIZATIONS AND PROVIDES ACCOUNTING, MANAGEMENT, TECHNICAL ASSISTANCE, LEADERSHIP DEVELOPMENT, AND OTHER ADMINISTRATIVE SERVICES WHILE VESTING DECISION-MAKING AUTHORITY WITHIN THE ORGANIZATIONS THEMSELVES.

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

4e Total program service expenses 3,790,894.

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)?<br><i>If "Yes," complete Schedule A</i>  | X   |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions  | 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 Rev. Proc. 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?<br><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> See instructions   |     | 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   |    |

THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**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? If "Yes," complete Schedule I, Parts I and III  |     | 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? If "Yes," complete Schedule J  | 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a  |     | 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II   |     | 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? If "Yes," complete Schedule L, Part III |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):   |     |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV  |     | X  |
| <b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV   |     | X  |
| <b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV  |     | X  |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   |     | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M   |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II   |     | 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? If "Yes," complete Schedule R, Part I   |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1   | 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)? If "Yes," complete Schedule R, Part V, line 2   |     | X  |
| <b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2   |     | 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? If "Yes," complete Schedule R, Part VI  |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?<br><b>Note:</b> All Form 990 filers are required to complete Schedule O   | X   |    |

**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 on 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   |    |

THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**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> 18   |            |    |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.                 | X          |    |
| <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<br>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?<br><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?<br>If "Yes," see the 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?<br>If "Yes," complete Form 4720, Schedule O.   | <b>16</b>  | X  |
| <b>17</b>  | <b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?<br>If "Yes," complete Form 6069. | <b>17</b>  |    |

**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<br>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 on 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 on 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 on 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 - 617-837-2488**  
**ONE MIFFLIN STREET, 400, CAMBRIDGE, MA 02138**

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

Form 990 (2021)

04-3457065 Page 7

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

| (A)<br>Name and title                                 | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |          | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>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) JOHN H. JACKSON<br>PRESIDENT AND CEO              | 40.00   |   |                       | X       |              |                              | 361,781. | 0.  | 39,551.  |   |
| (2) LAUREN HADI<br>SENIOR VP OF ADVANCEMENT           | 40.00   |   |                       | X       |              |                              | 169,241. | 0.  | 11,175.  |   |
| (3) MELISSA DAAR CARVAJAL<br>COMMUNICATIONS DIRECTOR  | 40.00   | X   |                       |         |              |                              | 121,613. | 0.  | 7,996.   |   |
| (4) DIANA TATE VERMEIRE<br>SENIOR VP OF STRATEGY      | 40.00   |   |                       | X       |              |                              | 110,172. | 0.  | 13,184.  |   |
| (5) MARIANNA ISLAM<br>DIRECTOR OF PROGRAMS & ADVOCACY | 40.00   | X   |                       |         |              |                              | 100,088. | 0.  | 13,823.  |   |
| (6) CAROLINA ESPINAL<br>CHAIR                         | 1.00  | X   | X                     |         |              |                              | 0.       | 0.  | 0.   |   |
| (7) MARK PALEY<br>TREASURER                           | 1.00  | X   | X                     |         |              |                              | 0.       | 0.  | 0.   |   |
| (8) CARLOS ROJAS ALVAREZ<br>CLERK                     | 1.00  | X   | X                     |         |              |                              | 0.       | 0.  | 0.   |   |
| (9) JULIAN VASQUEZ HEILIG<br>BOARD DIRECTOR           | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (10) ALANDRA WASHINGTON<br>BOARD DIRECTOR             | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (11) MICHAEL S. WOTORSON<br>BOARD DIRECTOR            | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (12) KYLE SERRETTE<br>BOARD DIRECTOR                  | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (13) SUSAN TAYLOR BATTEN<br>BOARD DIRECTOR            | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (14) AMIR WINDOM<br>BOARD DIRECTOR                    | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (15) EILEEN DE LOS REYES<br>BOARD DIRECTOR            | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (16) VALERIA DO VALE<br>BOARD DIRECTOR                | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |
| (17) DORIAN BURTON<br>BOARD DIRECTOR                  | 1.00  | X   |                       |         |              |                              | 0.       | 0.  | 0.   |   |





THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

Form 990 (2021)

04-3457065 Page 9

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 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a  | Federated campaigns  | 1a   |                                    |                            |  |
|  | b  | Membership dues  | 1b   |                                    |                            |  |
|  | c  | Fundraising events   | 1c   |                                    |                            |  |
|  | d  | Related organizations  | 1d   |                                    |                            |  |
|  | e  | Government grants (contributions)  | 1e   |                                    |                            |  |
|  | f  | All other contributions, gifts, grants, and similar amounts not included above | 1f   | 13,616,907.                        |                            |  |
|  | g  | Noncash contributions included in lines 1a-1f                                  | 1g   | \$                                 |                            |  |
|  | h Total. Add lines 1a-1f   |  |  | 13,616,907.                        |                            |  |
| Program Service Revenue                                |  |  | Business Code  |                                    |                            |  |
|  | 2 a  |  |  |                                    |                            |  |
|  | b  |  |  |                                    |                            |  |
|  | c  |  |  |                                    |                            |  |
|  | d  |  |  |                                    |                            |  |
|  | e  |  |  |                                    |                            |  |
|  | f All other program service revenue  |  |  |                                    |                            |  |
| g Total. Add lines 2a-2f                               |  |  |  |                                    |                            |  |
| Other Revenue  | 3  |  | Investment income (including dividends, interest, and other similar amounts) | 86,487.                            |                            | 86,487.  |
|  | 4  |  | Income from investment of tax-exempt bond proceeds                           |                                    |                            |  |
|  | 5  |  | Royalties  |                                    |                            |  |
|  | 6 a  | Gross rents  | (i) Real   |                                    |                            |  |
|  |  |  | (ii) Personal  |                                    |                            |  |
|  |  |  |  |                                    |                            |  |
|  | 6 b  | Less: rental expenses  |  |                                    |                            |  |
|  | 6 c  | Rental income or (loss)  |  |                                    |                            |  |
|  | d Net rental income or (loss)  |  |  |                                    |                            |  |
|  | 7 a  | Gross amount from sales of assets other than inventory                         | (i) Securities   | 389,275.                           |                            |  |
|  |  |  | (ii) Other   |                                    |                            |  |
|  |  |  |  |                                    |                            |  |
|  | 7 b  | Less: cost or other basis and sales expenses                                   | 377,448.   |                                    |                            |  |
|  | 7 c  | Gain or (loss)   | 11,827.  |                                    |                            |  |
|  | d Net gain or (loss)   |  |  | 11,827.                            |                            | 11,827.  |
| 8 a  | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 |  | 8a   |                                    |                            |  |
| 8 b  | Less: direct expenses  |  | 8b   |                                    |                            |  |
| c Net income or (loss) from fundraising events         |  |  |  |                                    |                            |  |
| 9 a  | Gross income from gaming activities. See Part IV, line 19  |  | 9a   |                                    |                            |  |
| 9 b  | Less: direct expenses  |  | 9b   |                                    |                            |  |
| c Net income or (loss) from gaming activities          |  |  |  |                                    |                            |  |
| 10 a   | Gross sales of inventory, less returns and allowances  |  | 10a  |                                    |                            |  |
| 10 b   | Less: cost of goods sold   |  | 10b  |                                    |                            |  |
| c Net income or (loss) from sales of inventory         |  |  |  |                                    |                            |  |
| Miscellaneous Revenue                                  | 11 a OTHER INCOME  |  | 900099   | 3,710.                             |                            | 3,710.   |
|  | b  |  |  |                                    |                            |  |
|  | c  |  |  |                                    |                            |  |
|  | d All other revenue  |  |  |                                    |                            |  |
|  | e Total. Add lines 11a-11d   |  |  | 3,710.                             |                            |  |
| 12 Total revenue. See instructions                     |  |  | 13,718,931.  | 0.                                 | 0.                         | 102,024.   |

**THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION**

Form 990 (2021)

04-3457065 Page **10**

**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

| <i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>   | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service expenses | <b>(C)</b><br>Management and general expenses | <b>(D)</b><br>Fundraising expenses |
|---|------------------------------|--|---|------------------------------------|
| <b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21   | 2,469,775.                   | 2,469,775.                             |   |                                    |
| <b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22  |                              |  |   |                                    |
| <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   | 513,614.                     | 154,084.                               | 205,446.                                      | 154,084.                           |
| <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   | 1,511,592.                   | 649,264.                               | 313,122.                                      | 549,206.                           |
| <b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   | 25,556.                      | 7,667.                                 | 10,222.                                       | 7,667.                             |
| <b>9</b> Other employee benefits  | 228,776.                     | 63,573.                                | 104,251.                                      | 60,952.                            |
| <b>10</b> Payroll taxes   | 134,836.                     | 50,637.                                | 42,305.                                       | 41,894.                            |
| <b>11</b> Fees for services (nonemployees):   |                              |  |   |                                    |
| <b>a</b> Management   |                              |  |   |                                    |
| <b>b</b> Legal  | 4,131.                       |  | 4,131.  |                                    |
| <b>c</b> Accounting   | 184,641.                     |  | 184,641.                                      |                                    |
| <b>d</b> Lobbying   | 50,000.                      | 50,000.                                |   |                                    |
| <b>e</b> Professional fundraising services. See Part IV, line 17  |                              |  |   |                                    |
| <b>f</b> Investment management fees   | 43,465.                      |  | 43,465.                                       |                                    |
| <b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)   | 491,148.                     | 273,381.                               | 64,459.                                       | 153,308.                           |
| <b>12</b> Advertising and promotion   |                              |  |   |                                    |
| <b>13</b> Office expenses   | 42,904.                      | 15,238.                                | 18,654.                                       | 9,012.                             |
| <b>14</b> Information technology  | 57,955.                      | 16,168.                                | 18,623.                                       | 23,164.                            |
| <b>15</b> Royalties   |                              |  |   |                                    |
| <b>16</b> Occupancy   | 13,377.                      | 6,015.                                 | 1,687.  | 5,675.                             |
| <b>17</b> Travel  | 86,245.                      | 20,744.                                | 58,058.                                       | 7,443.                             |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials  |                              |  |   |                                    |
| <b>19</b> Conferences, conventions, and meetings  | 130,535.                     | 5,783.                                 | 26,402.                                       | 98,350.                            |
| <b>20</b> Interest  |                              |  |   |                                    |
| <b>21</b> Payments to affiliates  |                              |  |   |                                    |
| <b>22</b> Depreciation, depletion, and amortization   | 6,535.                       | 2,026.                                 | 4,052.  | 457.                               |
| <b>23</b> Insurance   | 18,003.                      | 6,354.                                 | 5,913.  | 5,736.                             |
| <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> MISCELLANEOUS  | 30,093.                      | 25.                                    | 30,068.                                       |                                    |
| <b>b</b> DUES AND MEMBERSHIPS   | 3,666.                       | 160.                                   | 2,271.  | 1,235.                             |
| <b>c</b>  |                              |  |   |                                    |
| <b>d</b>  |                              |  |   |                                    |
| <b>e</b> All other expenses   |                              |  |   |                                    |
| <b>25</b> Total functional expenses. Add lines 1 through 24e  | 6,046,847.                   | 3,790,894.                             | 1,137,770.                                    | 1,118,183.                         |
| <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

Form 990 (2021)

04-3457065 Page 11

**Part X Balance Sheet**

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

|  |  | (A)                |             | (B)                |
|--|--|--------------------|-------------|--------------------|
|  |  | Beginning of year  |             | End of year        |
| Assets   | <b>1</b> Cash - non-interest-bearing .....   | 448,142.           | <b>1</b>    | 2,707,318.         |
|  | <b>2</b> Savings and temporary cash investments .....  | 3,923,357.         | <b>2</b>    | 12,345,057.        |
|  | <b>3</b> Pledges and grants receivable, net .....  | 5,065,000.         | <b>3</b>    | 1,583,430.         |
|  | <b>4</b> Accounts receivable, net .....  |                    | <b>4</b>    |                    |
|  | <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 .....   | 39,113.            | <b>9</b>    | 55,647.            |
|  | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   | <b>10a</b> 22,406. |             |                    |
|  | <b>b</b> Less: accumulated depreciation .....  | <b>10b</b> 8,761.  | 19,792.     | <b>10c</b> 13,645. |
|  | <b>11</b> Investments - publicly traded securities .....   | 6,457,358.         | <b>11</b>   | 6,011,488.         |
|  | <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 .....   | 16,880.            | <b>15</b>   | 15,834.            |
| <b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) ..... | 15,969,642.  | <b>16</b>          | 22,732,419. |                    |
| Liabilities  | <b>17</b> Accounts payable and accrued expenses .....  | 152,994.           | <b>17</b>   | 304,073.           |
|  | <b>18</b> Grants payable .....   | 223,699.           | <b>18</b>   | 232,530.           |
|  | <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</b> <b>Total liabilities.</b> Add lines 17 through 25 .....  | 376,693.           | <b>26</b>   | 536,603.           |
| Net Assets or Fund Balances  | <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 .....  | 8,607,028.         | <b>27</b>   | 18,166,768.        |
|  | <b>28</b> Net assets with donor restrictions .....   | 6,985,921.         | <b>28</b>   | 4,029,048.         |
|  | <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> <b>Total net assets or fund balances</b> .....   | 15,592,949.        | <b>32</b>   | 22,195,816.        |
| <b>33</b> <b>Total liabilities and net assets/fund balances</b> .....            | 15,969,642.  | <b>33</b>          | 22,732,419. |                    |

Form 990 (2021)

**Part XI Reconciliation of Net Assets**

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

|    |  |    |             |
|----|--|----|-------------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)  | 1  | 13,718,931. |
| 2  | Total expenses (must equal Part IX, column (A), line 25)   | 2  | 6,046,847.  |
| 3  | Revenue less expenses. Subtract line 2 from line 1   | 3  | 7,672,084.  |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | 4  | 15,592,949. |
| 5  | Net unrealized gains (losses) on investments   | 5  | -1,069,217. |
| 6  | Donated services and use of facilities   | 6  |             |
| 7  | Investment expenses  | 7  |             |
| 8  | Prior period adjustments   | 8  |             |
| 9  | Other changes in net assets or fund balances (explain on Schedule O)   | 9  | 0.          |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 22,195,816. |

**Part XII Financial Statements and Reporting**

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

|   |  | Yes | No |
|---|--|-----|----|
| 1   | Accounting method used to prepare the Form 990: <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 on Schedule O.   |  |     |    |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?  |     | X  |
| 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                 |  |     |    |
| 2b  | Were the organization's financial statements audited by an independent accountant?   | X   |    |
| 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      |  |     |    |
| 2c  | 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? | X   |    |
| If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   |  |     |    |
| 3a  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?   |     | X  |
| 3b  | 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     |     |    |

Form 990 (2021)



THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION

**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) 2017   | (b) 2018   | (c) 2019   | (d) 2020    | (e) 2021    | (f) Total   |
|--|------------|------------|------------|-------------|-------------|-------------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....  | 4,364,720. | 2,264,348. | 4,181,008. | 10,888,372. | 13,616,907. | 35,315,355. |
| <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 .....  | 4,364,720. | 2,264,348. | 4,181,008. | 10,888,372. | 13,616,907. | 35,315,355. |
| <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) ..... |            |            |            |             |             | 11,916,883. |
| <b>6 Public support.</b> Subtract line 5 from line 4.  |            |            |            |             |             | 23,398,472. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶  | (a) 2017   | (b) 2018   | (c) 2019   | (d) 2020    | (e) 2021    | (f) Total   |
|--|------------|------------|------------|-------------|-------------|-------------|
| <b>7</b> Amounts from line 4 .....   | 4,364,720. | 2,264,348. | 4,181,008. | 10,888,372. | 13,616,907. | 35,315,355. |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ... | 230,712.   | 154,035.   | 208,559.   | 276,054.    | 86,487.     | 955,847.    |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...                              | 10,000.    |            |            |             |             | 10,000.     |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....                              | 292.       | 455.       | 507.       | 2,405.      | 3,710.      | 7,369.      |
| <b>11 Total support.</b> Add lines 7 through 10  |            |            |            |             |             | 36,288,571. |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) .....  |            |            |            |             | 12          |             |

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

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

|  |           |         |
|--|-----------|---------|
| <b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))..... | <b>14</b> | 64.48 % |
| <b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....                       | <b>15</b> | 51.32 % |

**16a 33 1/3% support test - 2021.** 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 - 2020.** 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 - 2021.** 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 - 2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

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

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

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose ..... |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5 .....   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b .....  |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6 .....   |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ..... |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....                           |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b .....   |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....      |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....                                  |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)   |          |          |          |          |          |           |

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

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

|   |           |   |
|---|-----------|---|
| <b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) ..... | <b>15</b> | % |
| <b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....                       | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|   |           |   |
|---|-----------|---|
| <b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) ..... | <b>17</b> | % |
| <b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 .....                         | <b>18</b> | % |

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|  | 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> |     |    |
| <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 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).</i>  |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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 on lines 11b and 11c below, the governing body of a supported organization? |     |    |
| <b>b</b> A family member of a person described on line 11a above?  |     |    |
| <b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .                             |     |    |
| <b>11a</b>   |     |    |
| <b>11b</b>   |     |    |
| <b>11c</b>   |     |    |

**Section B. Type I Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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.   |     |    |
| <b>1</b>  |     |    |
| <b>2</b>  |     |    |

**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). |     |    |
| <b>1</b>   |     |    |

**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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.  |     |    |
| <b>1</b>  |     |    |
| <b>2</b>  |     |    |
| <b>3</b>  |     |    |

**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 line 2 below.  |  |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.   |  |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).  |  |     |    |
| <b>2</b> Activities Test. Answer lines 2a and 2b below.   |  | Yes | No |
| <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 on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <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 lines 3a and 3b 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? If "Yes" or "No" 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.   |  |     |    |
| <b>2a</b>   |  |     |    |
| <b>2b</b>   |  |     |    |
| <b>3a</b>   |  |     |    |
| <b>3b</b>   |  |     |    |

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**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 Part VI):   |                |                             |
| 2                                | Acquisition indebtedness applicable to non-exempt-use assets  | 2              |                             |
| 3                                | Subtract line 2 from line 1d.   | 3              |                             |
| 4                                | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).                                  | 4              |                             |
| 5                                | Net value of non-exempt-use assets (subtract line 4 from line 3)  | 5              |                             |
| 6                                | Multiply line 5 by 0.035.   | 6              |                             |
| 7                                | Recoveries of prior-year distributions  | 7              |                             |
| 8                                | <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 0.85 of line 1.   | 2 |              |
| 3                                | Minimum asset amount for prior year (from Section B, line 8, column A)  | 3 |              |
| 4                                | Enter greater of line 2 or line 3.  | 4 |              |
| 5                                | Income tax imposed in prior year  | 5 |              |
| 6                                | <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). |   |              |

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

Schedule A (Form 990) 2021

04-3457065 Page 7

**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>1</b>     |
| <b>2</b>                  | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity      | <b>2</b>     |
| <b>3</b>                  | Administrative expenses paid to accomplish exempt purposes of supported organizations  | <b>3</b>     |
| <b>4</b>                  | Amounts paid to acquire exempt-use assets  | <b>4</b>     |
| <b>5</b>                  | Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)   | <b>5</b>     |
| <b>6</b>                  | Other distributions (describe in Part VI). See instructions.   | <b>6</b>     |
| <b>7</b>                  | <b>Total annual distributions.</b> Add lines 1 through 6.  | <b>7</b>     |
| <b>8</b>                  | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | <b>8</b>     |
| <b>9</b>                  | Distributable amount for 2021 from Section C, line 6   | <b>9</b>     |
| <b>10</b>                 | Line 8 amount divided by line 9 amount   | <b>10</b>    |

| Section E - Distribution Allocations (see instructions)  | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2021 | (iii)<br>Distributable<br>Amount for 2021 |
|--|-----------------------------|--|---|
| <b>1</b> Distributable amount for 2021 from Section C, line 6  |                             |  |   |
| <b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.   |                             |  |   |
| <b>3</b> Excess distributions carryover, if any, to 2021   |                             |  |   |
| <b>a</b> From 2016   |                             |  |   |
| <b>b</b> From 2017   |                             |  |   |
| <b>c</b> From 2018   |                             |  |   |
| <b>d</b> From 2019   |                             |  |   |
| <b>e</b> From 2020   |                             |  |   |
| <b>f</b> Total of lines 3a through 3e  |                             |  |   |
| <b>g</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>h</b> Applied to 2021 distributable amount  |                             |  |   |
| <b>i</b> Carryover from 2016 not applied (see instructions)  |                             |  |   |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |                             |  |   |
| <b>4</b> Distributions for 2021 from Section D, line 7: \$   |                             |  |   |
| <b>a</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>b</b> Applied to 2021 distributable amount  |                             |  |   |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |                             |  |   |
| <b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. |                             |  |   |
| <b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.                        |                             |  |   |
| <b>7</b> Excess distributions carryover to 2022. Add lines 3j and 4c.  |                             |  |   |
| <b>8</b> Breakdown of line 7:  |                             |  |   |
| <b>a</b> Excess from 2017  |                             |  |   |
| <b>b</b> Excess from 2018  |                             |  |   |
| <b>c</b> Excess from 2019  |                             |  |   |
| <b>d</b> Excess from 2020  |                             |  |   |
| <b>e</b> Excess from 2021  |                             |  |   |

Schedule A (Form 990) 2021

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**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

OTHER INCOME

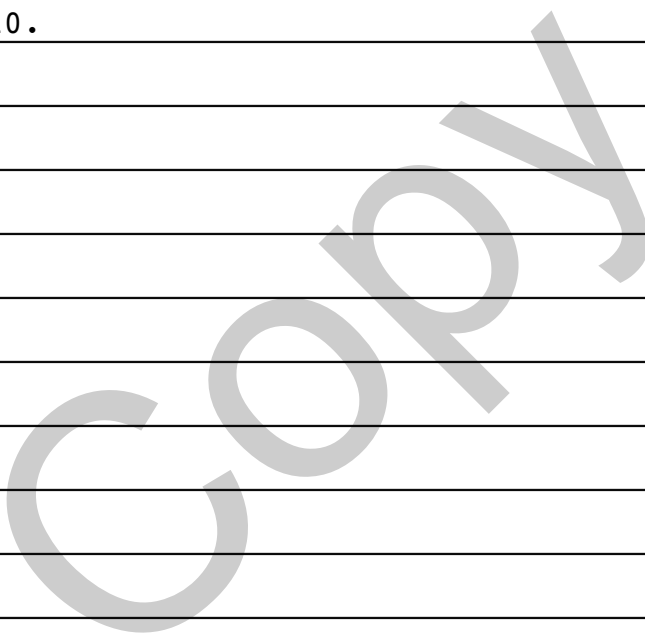
2017 AMOUNT: \$ 292.

2018 AMOUNT: \$ 455.

2019 AMOUNT: \$ 507.

2020 AMOUNT: \$ 2,405.

2021 AMOUNT: \$ 3,710.



**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2021**

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<br><b>THE SCHOTT FOUNDATION FOR PUBLIC EDUCATION</b> | Employer identification number<br><b>04-3457065</b> |
|---|---|

**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-. |
|----------|-------------|---------|---|--|
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2021

**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<br>(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)   |  | 50,000.   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)  |  |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b)  |  | 50,000.   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>d</b> Other exempt purpose expenditures  |  | 5,996,847.                                      |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)  |  | 6,046,847.                                      |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.   |  | 452,342.  |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <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)  |  | 113,086.  |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <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<br>(or fiscal year beginning in)                      | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) Total  |
| <b>2a</b> Lobbying nontaxable amount                                | 340,514. | 323,671. | 353,599. | 452,342. | 1,470,126. |
| <b>b</b> Lobbying ceiling amount<br>(150% of line 2a, column(e))    |          |          |          |          | 2,205,189. |
| <b>c</b> Total lobbying expenditures                                | 35,000.  | 35,000.  | 35,000.  | 50,000.  | 155,000.   |
| <b>d</b> Grassroots nontaxable amount                               | 85,129.  | 80,918.  | 88,400.  | 113,086. | 367,533.   |
| <b>e</b> Grassroots ceiling amount<br>(150% of line 2d, column (e)) |          |          |          |          | 551,300.   |
| <b>f</b> Grassroots lobbying expenditures                           | 35,000.  | 35,000.  | 35,000.  | 50,000.  | 155,000.   |

**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

2021

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 values, and 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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, and monitoring details.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

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

Schedule D (Form 990) 2021



**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                     | 7,393,375.       | 6,002,686.     | 5,717,041.         | 5,873,039.           | 6,595,847.          |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     | -1,014,368.      | 1,390,689.     | 285,645.           | 241,002.             | 413,928.            |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    | 397,000.             | 1,136,736.          |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            | 6,379,007.       | 7,393,375.     | 6,002,686.         | 5,717,041.           | 5,873,039.          |

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  100.0000 %
  - b Permanent endowment  %
  - c Term endowment  %
- 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   |                                      |                                 |                              |                |
| d Equipment  |                                      | 22,406.                         | 8,761.                       | 13,645.        |
| e Other  |                                      |                                 |                              |                |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) |                                      |                                 |                              | 13,645.        |

**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  | 12,606,249. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |    |             |
| a | Net unrealized gains (losses) on investments                                    | 2a | -1,069,217. |
| 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 | -1,069,217. |
| 3 | Subtract line 2e from line 1  | 3  | 13,675,466. |
| 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 | 43,465.     |
| b | Other (Describe in Part XIII.)  | 4b |             |
| c | Add lines 4a and 4b   | 4c | 43,465.     |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5  | 13,718,931. |

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

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

|   |  |    |            |
|---|--|----|------------|
| 1 | Total expenses and losses per audited financial statements                       | 1  | 6,003,382. |
| 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  | 6,003,382. |
| 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 | 43,465.    |
| b | Other (Describe in Part XIII.)   | 4b |            |
| c | Add lines 4a and 4b  | 4c | 43,465.    |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5  | 6,046,847. |

**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:**

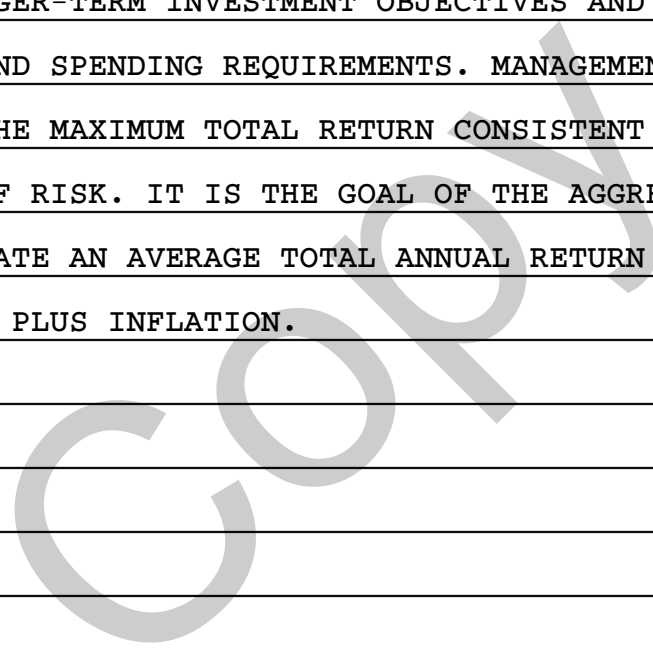
THE FOUNDATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE 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

**2021**

**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.

| 1 (a) Name and address of organization or government   | (b) EIN    | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance  |
|--|------------|---------------------------------|--------------------------|----------------------------------|---|---------------------------------------|---|
| 482FORWARD<br>440 BURROUGHS, SUITE 110<br>DETROIT, MI 48202  | 47-3537426 |                                 | 70,000.                  | 0.                               |   |                                       | TO PROVIDE CAPACITY BUILDING SUPPORT FOR MICHIGAN EDUCATION JUSTICE COALITION AND     |
| A BETTER WAY FOUNDATION INC.<br>P.O. BOX 942<br>HARTFORD, CT 06143   | 06-1576383 |                                 | 25,000.                  | 0.                               |   |                                       | TO SUPPORT BLACK AND BROWN STUDENT UNION'S STRENGTHEN AND GROW THE LANDSCAPE OF YOUTH |
| ALLIANCE OF RHODE ISLAND SOUTHEAST ASIANS FOR EDUCATION (ARISE) - 1<br>EMPIRE STREET - PROVIDENCE, RI<br>02903 | 81-4458558 |                                 | 25,000.                  | 0.                               |   |                                       | TO SUPPORT #COUNSELORSNOTCOPS CAMPAIGN TO ADVANCE EDUCATION JUSTICE IN                |
| ARKANSAS COMMUNITY INSTITUTE<br>2101 SOUTH MAIN STREET<br>LITTLE ROCK, AR 72202                                | 72-1072223 |                                 | 30,000.                  | 0.                               |   |                                       | TO SUPPORT GRASSROOTS ARKANSAS' CAMPAIGN FOR PUBLIC EDUCATION EQUITY IN ARKANSAS      |
| ASSOCIATION OF BLACK FOUNDATION EXECUTIVES INC. - 55 EXCHANGE PLACE, SUITE 401 - NEW YORK, NY<br>10005         | 23-7156531 |                                 | 12,500.                  | 0.                               |   |                                       | TO PROVIDE SPONSORSHIP FOR JAMES A. JOSEPH LECTURE AWARDS, NOVEMBER 2021              |
| BROCKTON INTERFAITH COMMUNITY INC.<br>1350 PLEASANT STREET<br>BROCKTON, MA 02301                               | 22-3135464 |                                 | 40,000.                  | 0.                               |   |                                       | TO ENGAGE YOUTH AND COMMUNITY MEMBERS IN LOCAL AND STATE EDUCATION AND RACIAL JUSTICE |

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **55.**
- 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) 2021

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 Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance   |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| CANDID<br>P.O. BOX 22799<br>NEW YORK, NY 10087-2799  | 13-1837418 |                               | 10,000.                  | 0.                               |   |  | TO PROVIDE ADDITIONAL ANALYSES OF 10 LOVING CITIES USING THE 2017-2019 EDUCATION DATA          |
| CHINESE PROGRESSIVE ASSOCIATION<br>1042 GRANT AVE. 5TH FL<br>SAN FRANCISCO, CA 94133                         | 23-7404756 |                               | 20,000.                  | 0.                               |   |  | FY 2022 GRANT/TO PROVIDE CAPACITY BUILDING SUPPORT FOR CLOSE THE GAP COALITION AND ALLIANCE TO |
| CITIZENS FOR JUVENILE JUSTICE<br>44 SCHOOL STREET, SUITE 400<br>BOSTON, MA 02108                             | 04-3224860 |                               | 57,725.                  | 0.                               |   |  | TO PROVIDE ADVOCACY SUPPORT FOR SCHOOL DISCIPLINE REFORM EFFORTS TO ADVANCE EDUCATION          |
| CITY LIFE/VIDA URBANA (URBAN REVIVAL, INC.) - PO BOX 300107 -<br>BOSTON, MA 02130                            | 04-2660311 |                               | 15,050.                  | 0.                               |   |  | TO SUPPORT HOMES FOR ALL'S PARTICIPATION IN THE #JUSTRELATIONSHIPS FUNDER MOVEMENT BUILDING    |
| CITYWIDE YOUTH COALITION<br>928 CHAPEL STREET<br>NEW HAVEN, CT 06510   | 06-1386638 |                               | 50,000.                  | 0.                               |   |  | TO PLAN AND DESIGN A YOUTH POLICY CENTER IN CONNECTICUT TO ADVANCE EDUCATION AND RACIAL        |
| CLINTON HILL COMMUNITY ACTION-AROS<br>404 HAWTHORNE AVENUE<br>NEWARK, NJ 07112                               | 84-2816101 |                               | 20,000.                  | 0.                               |   |  | TO PROVIDE CAPACITY BUILDING SUPPORT FOR PARENTS UNIFIED FOR LOCAL SCHOOL EDUCATION (PULSE)    |
| COLEMAN ADVOCATES<br>459 VIENNA ST<br>SAN FRANCISCO, CA 94112  | 94-2258612 |                               | 25,000.                  | 0.                               |   |  | TO SUPPORT ALLIANCE FOR EDUCATIONAL JUSTICE'S NATIONAL CAMPAIGN FOR #POLICEFREESCHOOLS TO      |
| COMMUNITY ASSET DEVELOPMENT<br>RE-DEFINING EDUCATION (CADRE) -<br>8410 S BROADWAY - LOS ANGELES, CA<br>90003 | 26-4753821 |                               | 10,000.                  | 0.                               |   |  | TO SUPPORT EDUCATION JUSTICE ORGANIZING IN LOS ANGELES, CALIFORNIA                             |
| COMMUNITY LABOR UNITED<br>8 BEACON ST, 5TH FLOOR<br>BOSTON, MA 02108   | 20-3404034 |                               | 70,100.                  | 0.                               |   |  | TO PROVIDE COALITION COORDINATION AND COMMUNICATION SUPPORT TO THE MASSACHUSETTS               |

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 Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance  |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| COMMUNITY PARTNERS<br>1000 N. ALAMEDA STREET, STE 240<br>LOS ANGELES, CA 90012                             | 95-4302067 |                               | 25,000.                  | 0.                               |   |  | TO SUPPORT CALIFORNIA NATIVE VOTE PROJECT'S WORK TO ADVANCE THE INDIGENOUS EDUCATION NOW        |
| F&L ORGANIZATIONAL SUPPORT SERVICES INC (FLOSS) - P.O. BOX 872436 - NEW ORLEANS, LA 70187                  | 47-3451951 |                               | 10,000.                  | 0.                               |   |  | TO SUPPORT BLACK MAN RISING'S WORK TO SUPPORT INDIVIDUALS AND FAMILIES IMPACTED FOLLOWING       |
| FAMILIES AND FRIENDS OF LOUISIANA'S INCARCERATED CHILDREN (FFLIC) - P.O. BOX 56877 - NEW ORLEANS, LA 70156 | 20-5924561 |                               | 30,000.                  | 0.                               |   |  | TO SUPPORT EDUCATION EQUITY CAMPAIGNS AND ADVOCACY WORK THROUGHOUT THE STATE OF LOUISIANA       |
| GRANITE STATE ORGANIZING PROJECT<br>383 BEECH STREET<br>MANCHESTER, NH 03103                               | 47-0873896 |                               | 40,000.                  | 0.                               |   |  | TO SUPPORT YOUTH ORGANIZERS UNITED'S WORK SEEKING TO RESIST POLITICALLY MOTIVATED               |
| GSA NETWORK<br>300 FRANK H. OGAWA PLAZA #9<br>OAKLAND, CA 94612  | 20-5367752 |                               | 30,000.                  | 0.                               |   |  | TO STRENGTHEN DIGNITY IN SCHOOLS CAMPAIGN -CALIFORNIA'S GRASSROOTS MOVEMENT BUILDING EFFORTS    |
| INSTITUTE FOR DEMOCRATIC EDUCATION IN AMERICA (IDEA) - 2008 WEST RIDGEWAY STREET - JACKSON, MS 39213       | 27-0812635 |                               | 25,000.                  | 0.                               |   |  | TO ENGAGE COMMUNITY MEMBERS IN ADVOCACY FOR COMMUNITY SCHOOLS THROUGH THE COMMUNITY SCHOOLS AND |
| JOBS WITH JUSTICE EDUCATION FUND<br>1150 CONNECTICUT AVENUE NW, SUITE 2<br>WASHINGTON, DC 20036            | 52-1865575 |                               | 75,000.                  | 0.                               |   |  | TO SUPPORT MASSACHUSETTS JOBS WITH JUSTICE'S PARENT AND COMMUNITY ORGANIZING FOR EQUITABLE      |
| KENWOOD OAKLAND COMMUNITY ORGANIZATION - 4242 S. COTTAGE GROVE AVENUE - CHICAGO, IL 60653                  | 36-2598637 |                               | 160,000.                 | 0.                               |   |  | TO SUPPORT THE JOURNEY FOR JUSTICE ALLIANCE'S "EQUITY OR ELSE" CAMPAIGN TO ADVANCE EQUITABLE    |
| LOS ANGELES ALLIANCE FOR A NEW ECONOMY (LAANE) - 464 LUCAS AVENUE, SUITE 202 - LOS ANGELES, CA 90017       | 95-4459427 |                               | 128,750.                 | 0.                               |   |  | TO SUPPORT RECLAIM OUR SCHOOLS LA'S WORK IN LOS ANGELES, CALIFORNIA                             |

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 Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance  |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| LUGENIA BURNS HOPE CENTER<br>710 EAST 47TH STREET, SUITE 200W<br>CHICAGO, IL 60653            | 36-4081901 |                               | 20,000.                  | 0.                               |   |  | TO PROVIDE CAPACITY BUILDING SUPPORT FOR ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN          |
| MASSACHUSETTS BUDGET AND POLICY CENTER - 1 STATE STREET, SUITE 1250 - BOSTON, MA 02109        | 04-2967537 |                               | 80,250.                  | 0.                               |   |  | TO PROVIDE EDUCATION FINANCE POLICY RESEARCH AND ANALYSIS TO LOCAL AND STATEWIDE EFFORTS FOCUSED    |
| MASSACHUSETTS COMMUNITIES ACTION NETWORK (MCAN) - 14 CUSHING AVENUE - BOSTON, MA 02125        | 04-2863903 |                               | 40,000.                  | 0.                               |   |  | TO SUPPORT FAITH AND COMMUNITY ENGAGEMENT EFFORTS TO ADVANCE EQUITABLE PUBLIC                       |
| MIGRANT EQUITY SOUTHEAST<br>1305 BARNARD STREET, SUITE 651<br>SAVANNAH, GA 31401              | 86-2199824 |                               | 50,000.                  | 0.                               |   |  | TO SUPPORT WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON CRITICAL RACE THEORY IN          |
| MOVEMENT GROUND FARM<br>592 PUNCASTE NECK ROAD<br>TIVERTON, RI 02878                          | 83-3605207 |                               | 20,000.                  | 0.                               |   |  | TO PROVIDE SUPPORT FOR OUR FIRE COLLECTIVE'S IN-PERSON AND VIRTUAL RETREATS WITH                    |
| NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE - 90 JOHN STREET, SUITE 501 - NEW YORK, NY 10038 | 73-1714118 |                               | 105,000.                 | 0.                               |   |  | TO SUPPORT THE DIGNITY IN SCHOOLS CAMPAIGNS WORK TO END THE CRIMINALIZATION AND PUSHOUT OF STUDENTS |
| NATIONAL PUBLIC EDUCATION SUPPORT FUND - 1425 K STREET NW, SUITE 700 - WASHINGTON, DC 20005   | 26-3015634 |                               | 10,000.                  | 0.                               |   |  | TO HELP BUILD THE LEADERSHIP, POLICY INNOVATIONS, AND PUBLIC ENGAGEMENT NECESSARY TO                |
| ONE VOICE<br>1072 J.R. LYNCH STREET, SUITE #7<br>JACKSON, MS 39203                            | 02-0787550 |                               | 30,000.                  | 0.                               |   |  | TO PROVIDE SUPPORT FOR THE ONE VOICE CAMPAIGN FOR FAIR, JUST AND QUALITY EDUCATION IN               |
| PARKSIDE BUSINESS & COMMUNITY IN PARTNERSHIP INC. - 1487 KENWOOD AVENUE - CAMDEN, NJ 08103    | 22-3242446 |                               | 20,000.                  | 0.                               |   |  | TO PROVIDE CAPACITY BUILDING SUPPORT FOR CAMDEN PARENT AND STUDENT UNION AND ALLIANCE TO            |

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 Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance   |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| PROGRESSIVE MARYLAND EDUCATION FUND INC. - P.O. BOX 7557 - LARGO, MD 20792                         | 03-0401249 |                               | 20,000.                  | 0.                               |   |  | TO PROVIDE CAPACITY BUILDING SUPPORT FOR ALLIANCE TO RECLAIM OUR SCHOOLS - PRINCE GEORGE'S           |
| PROVIDENCE STUDENT UNION<br>769 WESTMINSTER STREET<br>PROVIDENCE, RI 02903                         | 45-5052229 |                               | 25,000.                  | 0.                               |   |  | TO SUPPORT STRATEGIC PLANNING AND #COUNSELORSNOTCOPS CAMPAIGN TO ADVANCE                             |
| PROVIDENCE YOUTH STUDENT MOVEMENT (PRYSM) - PO BOX 6487 - PROVIDENCE, RI 02904                     | 65-1224536 |                               | 25,000.                  | 0.                               |   |  | TO SUPPORT STRATEGIC PLANNING AND #COUNSELORSNOTCOPS CAMPAIGN TO ADVANCE                             |
| PUBLIC JUSTICE CENTER<br>201 NORTH CHARLES STREET, SUITE 120<br>BALTIMORE, MD 21201                | 52-1412226 |                               | 20,000.                  | 0.                               |   |  | FY 2022 GRANT/ TO PROVIDE CAPACITY BUILDING SUPPORT FOR ORGANIZING BLACK AND ALLIANCE TO RECLAIM OUR |
| PUBLIC POLICY & EDUCATION FUND OF NY INC. - 94 CENTRAL AVE - ALBANY, NY 12206                      | 13-3364209 |                               | 106,000.                 | 0.                               |   |  | TO SUPPORT THE ALLIANCE FOR QUALITY EDUCATION'S ENGAGEMENT OF PARENTS, EDUCATORS, AND STUDENTS       |
| RE:POWER FUND<br>2639 NICOLLET AVE S 220<br>MINNEAPOLIS, MN 55408                                  | 35-2191193 |                               | 25,000.                  | 0.                               |   |  | TO PROVIDE STRATEGIC PLANNING, TRAINING AND COACHING SUPPORT TO MASSACHUSETTS GRANTEE                |
| RESIST INC.<br>42 SEAVERNS STREET<br>BOSTON, MA 02130  | 04-2433182 |                               | 77,525.                  | 0.                               |   |  | TO SUPPORT MASSACHUSETTS EDUCATION JUSTICE ALLIANCE'S PARTICIPATION IN THE #JUSTRELATIONSHIPS        |
| RETHINK<br>705 FLOOD ST<br>NEW ORLEANS, LA 70117   | 33-1203055 |                               | 30,000.                  | 0.                               |   |  | TO ENGAGE YOUNG PEOPLE IN A CAMPAIGN TO ELIMINATE POLICE FROM SCHOOLS AND EMPLOY CULTURALLY          |
| RIGHTS & DEMOCRACY EDUCATION FUND INC - 70 SOUTH WINOOSKI AVENUE, SUITE 205 - BURLINGTON, VT 05401 | 47-5375511 |                               | 100,000.                 | 0.                               |   |  | TO SUPPORT WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON CRITICAL RACE THEORY IN           |

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 Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance   |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| SOCIAL GOOD FUND<br>PO BOX 5473<br>RICHMOND, CA 94805  | 46-1323531 |                               | 20,000.                  | 0.                               |   |  | TO SUPPORT PA'LANTE RESTORATIVE JUSTICE TO ENGAGE IN A STRATEGIC PLANNING PROCESS FOR          |
| SOUTHERN COALITION FOR SOCIAL JUSTICE - 1415 WEST HIGHWAY 54, SUITE 101 - DURHAM, NC 27707   | 26-0688375 |                               | 125,000.                 | 0.                               |   |  | TO SUPPORT EDUCATION JUSTICE ALLIANCE'S WORK SEEKING TO RESIST POLITICALLY MOTIVATED           |
| SOUTHERN ECHO<br>1350 LIVINGSTON LANE SUITE C<br>JACKSON, MS 39213                           | 64-0819311 |                               | 75,000.                  | 0.                               |   |  | FUND TO ADVANCE EDUCATION JUSTICE & A MULTIRACIAL DEMOCRACY                                    |
| STEP UP LOUISIANA ORGANIZING FUND<br>2022 SAINT BERNARD AVENUE 124B<br>NEW ORLEANS, LA 70116 | 85-1061102 |                               | 80,000.                  | 0.                               |   |  | TO SUPPORT THE EXPANSION OF THE PARENT ORGANIZING FOR EQUITABLE PUBLIC EDUCATION IN LOUISIANA  |
| TIDES CENTER<br>P.O. BOX 889385<br>SAN FRANCISCO, CA 90088                                   | 94-3213100 |                               | 30,000.                  | 0.                               |   |  | TO SUPPORT NYC COALITION FOR EDUCATIONAL JUSTICE'S CULTURALLY RESPONSIVE EDUCATION CAMPAIGN TO |
| TSNE MISSIONWORKS<br>89 SOUTH ST., SUITE 700<br>BOSTON, MA 02111-2670                        | 04-2261109 |                               | 50,000.                  | 0.                               |   |  | TO SUPPORT MASSACHUSETTS VOTER TABLE TO PROVIDE STRATEGY SUPPORT AND TRAININGS TO LOCAL AND    |
| UNITED WE DREAM NETWORK<br>1201 16TH ST NW, SUITE 714<br>WASHINGTON, DC 20036                | 46-2216565 |                               | 25,000.                  | 0.                               |   |  | TO SUPPORT CONNECTICUT STUDENTS FOR A DREAM IMMIGRANT YOUTH-LED ORGANIZING FOR EDUCATION       |
| URBAN LEAGUE OF RACINE & KENOSHA INC - 1418 68TH STREET - KENOSHA, WI 53143                  | 39-1042332 |                               | 75,000.                  | 0.                               |   |  | TO SUPPORT KENOSHA EDUCATION JUSTICE ALLIANCE'S WORK SEEKING TO RESIST POLITICALLY             |
| VILLAGE OF WISDOM<br>600 E UMSTEAD AVE<br>DURHAM, NC 27701                                   | 47-2060936 |                               | 50,000.                  | 0.                               |   |  | TO BUILD THE CAPACITY AND SUPPORT THE INFRASTRUCTURE OF THE EDUCATION JUSTICE                  |

Schedule I (Form 990)

THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

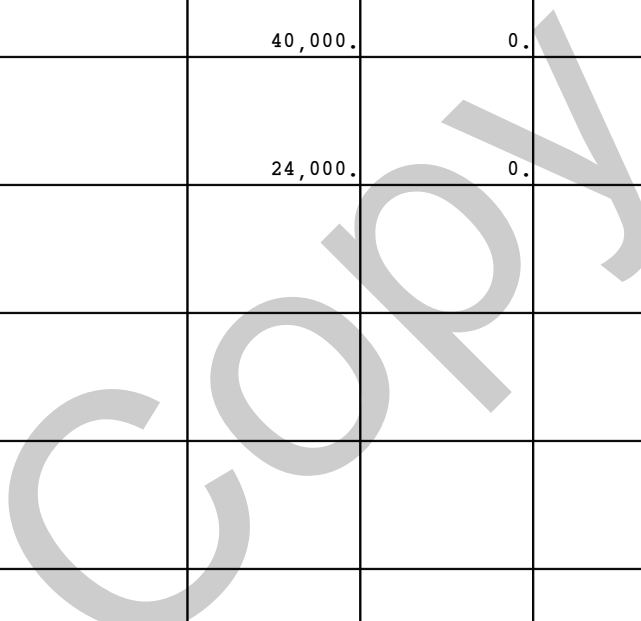
Schedule I (Form 990)

04-3457065

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance   |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| WOMEN ENCOURAGING EMPOWERMENT INC.<br>P.O. BOX 13<br>REVERE, MA 02151         | 04-3286531 |                               | 20,000.                  | 0.                               |   |  | TO SUPPORT REVERE YOUTH IN ACTIONS YOUTH ORGANIZING FOR EDUCATION JUSTICE AT THE STATE AND |
| WORCESTER INTERFAITH<br>23 FERDINAND STREET<br>WORCESTER, MA 01603            | 04-3158699 |                               | 40,000.                  | 0.                               |   |  | TO SUPPORT PARENT, STUDENT, COMMUNITY, AND LABOR PARTNERSHIPS TO ADVANCE EDUCATION EQUITY, |
| YOUTH ADVOCACY FOUNDATION<br>75 FEDERAL STREET, 6TH FLOOR<br>BOSTON, MA 02110 | 04-3583353 |                               | 24,000.                  | 0.                               |   |  | TO PROVIDE A PLANNING GRANT TO ENGAGE YOUTH AND PARENTS IN THE DEVELOPMENT OF EDUCATION    |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |
|   |            |                               |                          |                                  |   |  |  |



THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**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: 482FORWARD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CAPACITY BUILDING SUPPORT FOR MICHIGAN EDUCATION JUSTICE COALITION AND ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN SAN FRANCISCO, CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT: A BETTER WAY FOUNDATION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT BLACK AND BROWN STUDENT UNION'S STRENGTHEN AND GROW THE LANDSCAPE OF YOUTH JUSTICE IN CONNECTICUT

**Part IV** Supplemental Information

FOR EQUITY IN PUBLIC EDUCATION IN CONNECTICUT

NAME OF ORGANIZATION OR GOVERNMENT:

ALLIANCE OF RHODE ISLAND SOUTHEAST ASIANS FOR EDUCATION (ARISE)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT #COUNSELORSNOTCOPS

CAMPAIGN TO ADVANCE EDUCATION JUSTICE IN RHODE ISLAND

NAME OF ORGANIZATION OR GOVERNMENT: BROCKTON INTERFAITH COMMUNITY INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ENGAGE YOUTH AND COMMUNITY

MEMBERS IN LOCAL AND STATE EDUCATION AND RACIAL JUSTICE REFORMS IN

BROCKTON, MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: CANDID

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ADDITIONAL ANALYSES OF 10

LOVING CITIES USING THE 2017-2019 EDUCATION DATA SET TO DETERMINE THESE

CITIES PHILANTHROPIC INVESTMENT IN EDUCATION, RACIAL EQUITY, AND JUSTICE

NAME OF ORGANIZATION OR GOVERNMENT: CHINESE PROGRESSIVE ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FY 2022 GRANT/TO PROVIDE CAPACITY

BUILDING SUPPORT FOR CLOSE THE GAP COALITION AND ALLIANCE TO RECLAIM OUR

SCHOOLS COALITION WORK IN SAN FRANCISCO, CALIFORNIA

NAME OF ORGANIZATION OR GOVERNMENT: CITIZENS FOR JUVENILE JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ADVOCACY SUPPORT FOR

SCHOOL DISCIPLINE REFORM EFFORTS TO ADVANCE EDUCATION EQUITY IN

MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT:

**Part IV** Supplemental Information

CITY LIFE/VIDA URBANA (URBAN REVIVAL, INC.)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT HOMES FOR ALL'S PARTICIPATION IN THE #JUSTRELATIONSHIPS FUNDER MOVEMENT BUILDING SERIES TO ADVANCE RACIAL JUSTICE IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: CITYWIDE YOUTH COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PLAN AND DESIGN A YOUTH POLICY CENTER IN CONNECTICUT TO ADVANCE EDUCATION AND RACIAL JUSTICE

NAME OF ORGANIZATION OR GOVERNMENT: CLINTON HILL COMMUNITY ACTION-AROS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CAPACITY BUILDING SUPPORT FOR PARENTS UNIFIED FOR LOCAL SCHOOL EDUCATION (PULSE) AND ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN NEW JERSEY

NAME OF ORGANIZATION OR GOVERNMENT: COLEMAN ADVOCATES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT ALLIANCE FOR EDUCATIONAL JUSTICE'S NATIONAL CAMPAIGN FOR #POLICEFREESCHOOLS TO ENGAGE YOUTH OF COLOR IN ADDRESSING SCHOOL POLICING AS A BARRIER TO EDUCATION JUSTICE IN 19 SCHOOL DISTRICTS

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY LABOR UNITED

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE COALITION COORDINATION AND COMMUNICATION SUPPORT TO THE MASSACHUSETTS COVID-19 RESPONSE ALLIANCE TO HELP ADVANCE EDUCATION EQUITY AND COVID-19 RESPONSE IN MASSACHUSETTS

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

Part IV Supplemental Information

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 BLACK MAN RISING'S WORK TO SUPPORT INDIVIDUALS AND FAMILIES IMPACTED FOLLOWING HURRICANE IDA

NAME OF ORGANIZATION OR GOVERNMENT: GRANITE STATE ORGANIZING PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT YOUTH ORGANIZERS UNITED'S WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON CRITICAL RACE THEORY IN ORDER TO ADVANCE AN HONEST, ACCURATE, AND FULLY FUNDED PUBLIC EDUCATION FOR A JUSTICE-PRINCIPLED MULTIRACIAL DEMOCRACY

NAME OF ORGANIZATION OR GOVERNMENT: GSA NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO STRENGTHEN DIGNITY IN SCHOOLS CAMPAIGN -CALIFORNIA'S GRASSROOTS MOVEMENT BUILDING EFFORTS TO REMOVE POLICE FROM SCHOOLS TO DEVELOP OPPORTUNITIES FOR STATEWIDE AND CROSS REGIONAL CAPACITY BUILDING AND LESSON SHARING TO STRENGTHEN THE IMPACT OF LOCAL WORK ACROSS FIVE REGIONS

NAME OF ORGANIZATION OR GOVERNMENT:

INSTITUTE FOR DEMOCRATIC EDUCATION IN AMERICA (IDEA)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ENGAGE COMMUNITY MEMBERS IN ADVOCACY FOR COMMUNITY SCHOOLS THROUGH THE COMMUNITY SCHOOLS AND RESTORATIVE JUSTICE LEARNING EXPERIENCES

NAME OF ORGANIZATION OR GOVERNMENT: JOBS WITH JUSTICE EDUCATION FUND

**Part IV Supplemental Information**

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT MASSACHUSETTS JOBS WITH JUSTICE'S PARENT AND COMMUNITY ORGANIZING FOR EQUITABLE PUBLIC EDUCATION IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT:

KENWOOD OAKLAND COMMUNITY ORGANIZATION

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

NAME OF ORGANIZATION OR GOVERNMENT: LUGENIA BURNS HOPE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CAPACITY BUILDING SUPPORT FOR ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN SAN FRANCISCO, CALIFORNIA

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 EFFORTS FOCUSED ON EDUCATION EQUITY, COVID RESPONSE AND SAFE SCHOOL REOPENING

NAME OF ORGANIZATION OR GOVERNMENT:

MASSACHUSETTS COMMUNITIES ACTION NETWORK (MCAN)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT FAITH AND COMMUNITY ENGAGEMENT EFFORTS TO ADVANCE EQUITABLE PUBLIC EDUCATION IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: MIGRANT EQUITY SOUTHEAST



**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON CRITICAL RACE THEORY IN ORDER TO ADVANCE AN HONEST, ACCURATE, AND FULLY FUNDED PUBLIC EDUCATION FOR A JUSTICE PRINCIPLED MULTIRACIAL DEMOCRACY.

NAME OF ORGANIZATION OR GOVERNMENT: MOVEMENT GROUND FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE SUPPORT FOR OUR FIRE COLLECTIVE'S IN-PERSON AND VIRTUAL RETREATS WITH MASSACHUSETTS AND RHODE ISLAND EDUCATOR AND YOUTH ORGANIZING GROUPS WHO ARE ADVANCING EDUCATION JUSTICE

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL ECONOMIC & SOCIAL RIGHTS INITIATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE DIGNITY IN SCHOOLS CAMPAIGNS WORK TO END THE CRIMINALIZATION AND PUSHOUT OF STUDENTS OF COLOR AND PROMOTE RESTORATIVE AND CULTURALLY RESPONSIVE SCHOOL CLIMATES IN OVER 20 DISTRICTS AND STATES

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL PUBLIC EDUCATION SUPPORT FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO HELP BUILD THE LEADERSHIP, POLICY INNOVATIONS, AND PUBLIC ENGAGEMENT NECESSARY TO ELEVATE THE LEARNING OPPORTUNITIES AND OUTCOMES FOR ALL STUDENTS IN AMERICA.

NAME OF ORGANIZATION OR GOVERNMENT: ONE VOICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE SUPPORT FOR THE ONE VOICE CAMPAIGN FOR FAIR, JUST AND QUALITY EDUCATION IN MISSISSIPPI

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

PARKSIDE BUSINESS & COMMUNITY IN PARTNERSHIP INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CAPACITY BUILDING SUPPORT FOR CAMDEN PARENT AND STUDENT UNION AND ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN CAMDEN, NEW JERSEY

NAME OF ORGANIZATION OR GOVERNMENT:

PROGRESSIVE MARYLAND EDUCATION FUND INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CAPACITY BUILDING SUPPORT FOR ALLIANCE TO RECLAIM OUR SCHOOLS - PRINCE GEORGE'S COALITION WORK IN PRINCE GEORGE'S COUNTY, MARYLAND

NAME OF ORGANIZATION OR GOVERNMENT: PROVIDENCE STUDENT UNION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT STRATEGIC PLANNING AND #COUNSELORSNOTCOPS CAMPAIGN TO ADVANCE EDUCATION JUSTICE IN RHODE ISLAND

NAME OF ORGANIZATION OR GOVERNMENT:

PROVIDENCE YOUTH STUDENT MOVEMENT (PRYSM)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT STRATEGIC PLANNING AND #COUNSELORSNOTCOPS CAMPAIGN TO ADVANCE EDUCATION JUSTICE IN RHODE ISLAND

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC JUSTICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: FY 2022 GRANT/ TO PROVIDE CAPACITY BUILDING SUPPORT FOR ORGANIZING BLACK AND ALLIANCE TO RECLAIM OUR SCHOOLS COALITION WORK IN BALTIMORE, MARYLAND

NAME OF ORGANIZATION OR GOVERNMENT:

PUBLIC POLICY & EDUCATION FUND OF NY INC.

**Part IV Supplemental Information**

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE ALLIANCE FOR QUALITY EDUCATION'S ENGAGEMENT OF PARENTS, EDUCATORS, AND STUDENTS TO ADVOCATE FOR INCREASED SCHOOL FUNDING FOR PUBLIC EDUCATION IN NEW YORK STATE

NAME OF ORGANIZATION OR GOVERNMENT: RE:POWER FUND

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

NAME OF ORGANIZATION OR GOVERNMENT: RESIST INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT MASSACHUSETTS EDUCATION JUSTICE ALLIANCE'S PARTICIPATION IN THE #JUSTRELATIONSHIPS FUNDER MOVEMENT BUILDING SERIES TO ADVANCE RACIAL JUSTICE IN MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: RETHINK

(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: RIGHTS & DEMOCRACY EDUCATION FUND INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON CRITICAL RACE THEORY IN ORDER TO ADVANCE AN HONEST, ACCURATE, AND FULLY FUNDED PUBLIC EDUCATION FOR A JUSTICE PRINCIPLED MULTIRACIAL DEMOCRACY

NAME OF ORGANIZATION OR GOVERNMENT: SOCIAL GOOD FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PA'LANTE RESTORATIVE JUSTICE TO ENGAGE IN A STRATEGIC PLANNING PROCESS FOR STATE AND LOCAL

**Part IV Supplemental Information**

PARTNERSHIPS IN HOLYOKE, MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHERN COALITION FOR SOCIAL JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT EDUCATION JUSTICE

ALLIANCE'S WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON

CRITICAL RACE THEORY IN ORDER TO ADVANCE AN HONEST, ACCURATE, AND FULLY

FUNDED PUBLIC EDUCATION FOR A JUSTICE-PRINCIPLED MULTIRACIAL DEMOCRACY

NAME OF ORGANIZATION OR GOVERNMENT: TIDES CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT NYC COALITION FOR

EDUCATIONAL JUSTICE'S CULTURALLY RESPONSIVE EDUCATION CAMPAIGN TO ADVANCE

RACIAL EQUITY IN PUBLIC EDUCATION FOR NEW YORK CITY STUDENTS

NAME OF ORGANIZATION OR GOVERNMENT: TSNE MISSIONWORKS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT MASSACHUSETTS VOTER TABLE

TO PROVIDE STRATEGY SUPPORT AND TRAININGS TO LOCAL AND STATEWIDE EFFORTS

FOCUSED ON ADVANCING RACIAL AND EDUCATION EQUITY AND COVID RESPONSE IN

MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WE DREAM NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT CONNECTICUT STUDENTS FOR

A DREAM IMMIGRANT YOUTH-LED ORGANIZING FOR EDUCATION JUSTICE IN

CONNECTICUT

NAME OF ORGANIZATION OR GOVERNMENT: URBAN LEAGUE OF RACINE & KENOSHA INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT KENOSHA EDUCATION JUSTICE

ALLIANCE'S WORK SEEKING TO RESIST POLITICALLY MOTIVATED ATTACKS ON

CRITICAL RACE THEORY IN ORDER TO ADVANCE AN HONEST, ACCURATE, AND FULLY

**Part IV** Supplemental Information

FUNDED PUBLIC EDUCATION FOR A JUSTICE PRINCIPLED MULTIRACIAL DEMOCRACY.

NAME OF ORGANIZATION OR GOVERNMENT: VILLAGE OF WISDOM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO BUILD THE CAPACITY AND SUPPORT THE INFRASTRUCTURE OF THE EDUCATION JUSTICE MOVEMENT BY PROVIDING RACIAL JUSTICE CENTERED DATA TO ADVOCATES IN DURHAM, NORTH CAROLINA AND ACROSS THE UNITED STATES

NAME OF ORGANIZATION OR GOVERNMENT: WOMEN ENCOURAGING EMPOWERMENT INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT REVERE YOUTH IN ACTIONS YOUTH ORGANIZING FOR EDUCATION JUSTICE AT THE STATE AND LOCAL LEVEL IN REVERE, MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: WORCESTER INTERFAITH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PARENT, STUDENT, COMMUNITY, AND LABOR PARTNERSHIPS TO ADVANCE EDUCATION EQUITY, POLICE REFORM, AND COVID-19 EDUCATION PROGRAM IN WORCESTER, MASSACHUSETTS

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH ADVOCACY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE A PLANNING GRANT TO ENGAGE YOUTH AND PARENTS IN THE DEVELOPMENT OF EDUCATION JUSTICE POLICIES IN MASSACHUSETTS THAT SEEK TO ELIMINATE THE SCHOOL TO PRISON PIPELINE AND PROMOTE EDUCATION EQUITY

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

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 ..... **1b**  Yes  No
- 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? ..... **2**  Yes  No

**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:

- |  |           |                              |  |
|--|-----------|------------------------------|--|
| <b>a</b> Receive a severance payment or change-of-control payment? .....                           | <b>4a</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> Participate in or receive payment from a supplemental nonqualified retirement plan? ..... | <b>4b</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>c</b> Participate in or receive payment from an equity-based compensation arrangement? .....    | <b>4c</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 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:

- |  |           |                              |  |
|--|-----------|------------------------------|--|
| <b>a</b> The organization? .....         | <b>5a</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> Any related organization? ..... | <b>5b</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 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:

- |  |           |                              |  |
|--|-----------|------------------------------|--|
| <b>a</b> The organization? .....         | <b>6a</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> Any related organization? ..... | <b>6b</b> | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 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 .....

**7**  Yes  No

**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 .....

**8**  Yes  No

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

**9**  Yes  No

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

Schedule J (Form 990) 2021

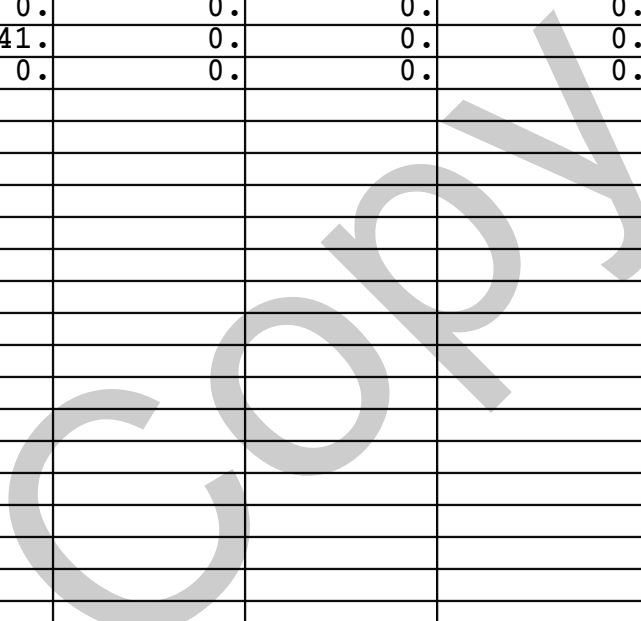
THE SCHOTT FOUNDATION FOR PUBLIC  
EDUCATION

**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 and/or 1099-NEC 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<br>PRESIDENT AND CEO    | (i)  | 361,781.   | 0.                                  | 0.                                  | 24,400.  | 15,151.                 | 401,332.                        | 0.  |
|   | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (2) LAUREN HADI<br>SENIOR VP OF ADVANCEMENT | (i)  | 169,241.   | 0.                                  | 0.                                  | 0.   | 11,175.                 | 180,416.                        | 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)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2021**

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

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

Schedule O (Form 990) 2021

132211 11-11-21

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

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 THE CHIEF EXECUTIVE OFFICER'S COMPENSATION INCLUDES A REVIEW OF COMPENSATION FOR EXECUTIVES AT SIMILAR ORGANIZATIONS. THE REVIEW IS CONDUCTED BY AN INDEPENDENT COMPENSATION COMMITTEE SELECTED BY THE BOARD. 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 COMPENSATION COMMITTEE SUBMITS THE FINDINGS AND A COMPENSATION RECOMMENDATION TO THE BOARD OF DIRECTORS FOR APPROVAL. A PERFORMANCE ASSESSMENT OF THE CEO IS CONDUCTED ANNUALLY.

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 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

**2021**  
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)<br>Name, address, and EIN (if applicable)<br>of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling<br>entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
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**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)<br>Name, address, and EIN<br>of related organization   | (b)<br>Primary activity                | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity | (g)<br>Section 512(b)(13)<br>controlled<br>entity? |    |
|--|--|---|-------------------------------|---|-------------------------------------|--|----|
|  |  |   |                               |   |                                     | Yes  | No |
| THE OPPORTUNITY TO LEARN ACTION FUND -<br>27-4836929, ONE MIFFLIN PLACE, SUITE 400,<br>CAMBRIDGE, MA 02138 | ADVOCACY ORGANIZATION -<br>EDUCATIONAL | DELAWARE  | 501(C)(4)                     | N/A   | N/A                                 |  | X  |
|  |  |   |                               |   |                                     |  |    |
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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)<br>Name, address, and EIN<br>of related organization | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Predominant income<br>(related, unrelated,<br>excluded from tax under<br>sections 512-514) | (f)<br>Share of total<br>income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproportionate<br>allocations? |    | (i)<br>Code V-UBI<br>amount in box<br>20 of Schedule<br>K-1 (Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|--|-------------------------|--|-------------------------------------|---|---------------------------------|--|---|----|---|---|----|--------------------------------|
|  |                         |  |                                     |   |                                 |  | Yes                                     | No |   | Yes                                       | No |                                |
|  |                         |  |                                     |   |                                 |  |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |  |   |    |   |   |    |                                |
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|  |                         |  |                                     |   |                                 |  |   |    |   |   |    |                                |

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

|  | Yes | No |
|--|-----|----|
| <b>1</b> 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? |     |    |
| <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)<br>Name of related organization | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-------------------------------------|-------------------------------|------------------------|--|
| (1)                                 |                               |                        |  |
| (2)                                 |                               |                        |  |
| (3)                                 |                               |                        |  |
| (4)                                 |                               |                        |  |
| (5)                                 |                               |                        |  |
| (6)                                 |                               |                        |  |



