Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

OMB No. 1545-0047

A F	or the	2018 calendar year, or tax year beginning JU.	${ m L}$ 1 , 2018 and	ending J	<u>UN 30, 2019</u>	
B c	heck if oplicable	C Name of organization			D Employer identifi	cation number
	Addres	THE CHICAGO COUNCIL ON G	GLOBAL AFFAIRS			
	Name change				36-2	181969
	Initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone numbe	r
	Final return/	180 N. STETSON AVENUE	· 	1400	312-	726-3860
	termin- ated		P or foreign postal code		G Gross receipts \$	28,792,624.
	Amend return	CHICAGO, IL 00001			H(a) Is this a group re	
	Applica tion pendin	F Name and address of principal officer: ± VO	H. DAALDER		for subordinates	? Yes X No
		SAME AS C ABOVE	. —		H(b) Are all subordinates in	
			(insert no.) 4947(a)(1)	or 527	1	list. (see instructions)
		e: WWW.THECHICAGOCOUNCIL.OF		1	H(c) Group exemptio	
		organization: X Corporation Trust Asso	ociation Other	L Year	of formation: 1922 N	M State of legal domicile: IL
Га				CHICAC	O COUNCIL O	T CT OB A T
e	1	Briefly describe the organization's mission or most signal and INDEPENDENT,	gnificant activities: <u>IRE</u> NONDARTICAN OR	CANTZA	O COONCIL O	BUALDEG
Jan		Check this box if the organization disconting				
/er		Number of voting members of the governing body (Pa	•		l	89
Ğ		Number of independent voting members of the gover				88
<u>«</u>		Total number of individuals employed in calendar yea				89
itie		Total number of volunteers (estimate if necessary)				100
Activities & Governance		Total unrelated business revenue from Part VIII, colur				0.
Ā		Net unrelated business taxable income from Form 99				0.
					Prior Year	Current Year
a	8 (Contributions and grants (Part VIII, line 1h)			19,186,495.	22,096,678.
Revenue	9 1	Program service revenue (Part VIII, line 2g)			862,832.	780,006.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, a	nd 7d)		714,925.	919,642.
E	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9	c, 10c, and 11e)		214,676.	223,860.
		Total revenue - add lines 8 through 11 (must equal Pa			20,978,928.	24,020,186.
		Grants and similar amounts paid (Part IX, column (A),			45,000.	35,000.
		Benefits paid to or for members (Part IX, column (A),			0.	0.
es		Salaries, other compensation, employee benefits (Par			8,285,392.	8,299,627.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line	e 11e)		0.	0.
Ëxp		Total fundraising expenses (Part IX, column (D), line 2			8,542,704.	9,005,891.
		Other expenses (Part IX, column (A), lines 11a-11d, 1 Total expenses. Add lines 13-17 (must equal Part IX,			16,873,096.	17,340,518.
		Revenue less expenses. Subtract line 18 from line 12			4,105,832.	
Jr 9S	13	noveride 1693 expenses. Subtract line 10 non line 12		Re	ginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)			30,612,875.	36,586,592.
Ass I Bal	21	, , , , , , , , , , , , , , , , , , , ,			4,995,104.	4,612,098.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from lin			25,617,771.	31,974,494.
	rt II	Signature Block				
Unde	er penal	lties of perjury, I declare that I have examined this return, in	cluding accompanying schedule	s and stateme	ents, and to the best of my	knowledge and belief, it is
true,	correct	t, and complete. Declaration of preparer (other than officer)	is based on all information of w	hich preparer	has any knowledge.	
		- 2 1				
Sigr	ו	Signature of officer			Date	
Here	е	ROBERT CORDES, VP FINANC	CE AND ADMINIST	RATION	T	
		Type or print name and title		l r	Date Check F	PTIN
D-1-1		** * *	reparer's signature		ig L	
Paid	- 1		EFF SCHROEDER	1	2/20/19 self-employ	P01245303 36-2239746
Prep Use	1	Firm's name SASSETTI LLC Firm's address 6611 NORTH AVENUE			Firm's EIN ▶	30-4433/40
บรัช	Unity	OAK PARK, IL 60302	2		Dhone no 17	08) 386-1433
May	the IP	RS discuss this return with the preparer shown above			T HOUSE HO. (7	X Yes No

Forn	n 990 (2018) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-218	1969	Page 2
Pa	rt 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:		
	THE CHICAGO COUNCIL ON GLOBAL AFFAIRS IS AN INDEPENDENT, NONPAR	TISAN	
	ORGANIZATION THAT PROVIDES INSIGHT ON CRITICAL GLOBAL ISSUES, A	DVANCE	:s
	POLICY SOLUTIONS, AND FOSTERS DIALOGUE ON WHAT IS HAPPENING IN	THE	
	WORLD AND WHY IT MATTERS TO PEOPLE IN CHICAGO, THE UNITED STATE	S, ANI)
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
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
-	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	evnenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e		4
	revenue, if any, for each program service reported.	rpenses, an	J
4-	F (40 2F0 0F 000	397,3	83 /
4a	(Code:) (Expenses \$5,649,350 • including grants of \$25,000 •) (Revenue \$, <u>, , , , , , , , , , , , , , , , , , </u>
	LEADERS, POLICYMAKERS, BUSINESS EXECUTIVES, JOURNALISTS, AND O'		
	LEADING POLICY EXPERTS AT EVENTS ILLUMINATING GLOBAL ISSUES AND		\ <u>C</u>
	PENDING POLICE EVERILS HE EVENIS INFOMINATING GRODAL 1920F2 WIL	IKENL	, s.
4b	(Code:) (Expenses \$5, 855, 800 • including grants of \$10, 000 •) (Revenue \$	382,6	<u>523.</u>)
	RESEARCH: INDEPENDENT RESEARCH AND ANALYSIS BY EXPERTS WHO GO	BEYOND	
	TRADITIONAL THINKING ON FOREIGN AFFAIRS TO MAKE NEW CONNECTIONS	FOR	
	POLICYMAKERS AND THE PUBLIC ON A RANGE OF GLOBAL ISSUES.		
4c	(Code:) (Expenses \$ 1,907,099. including grants of \$) (Revenue \$	223,8	860. \
40	PROGRAM RELATED SERVICES: MARKETING AND COMMUNICATIONS, DATABASE		, , , , , ,
	REGISTRATION.	и тир	
	REGIDIRATION:		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 368,328. including grants of \$) (Revenue \$)	
4e	(Expenses \$ 368,328 ⋅ including grants of \$) (Revenue \$ Total program service expenses ► 13,780,577 ⋅)	90 (2018)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	ا		
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	ا ا		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	10	21	
•••	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а			Х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			 ₩
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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			- v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	_X_	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	, · · ·	13		X
14a		14a		X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		77	
		14b	_X_	
15				
		15		<u> X</u>
16	the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E did the organization maintain an office, employees, or agents outside of the United States? did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Pal	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20	21	
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_29_		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-00		
٠.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
-	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		_v	
Pai	Note. All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
. a	Check if Schedule O contains a response or note to any line in this Part V			
	5.155 Solibodio S contains a respense of floto to dry into in the rate v		V22	NI-
1.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
J	(gambling) winnings to prize winners?	1c	х	

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Form 990 (2018) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			3.7
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
р	If "Yes," enter the name of the foreign country:			
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	En		Х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		\vdash
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	4.0		v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		\vdash
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		X
	excess parachute payment(s) during the year? If "Ves " see instructions and file Form 4720. Schedule N.	15		\vdash^{Δ}
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
.0	If "Yes," complete Form 4720, Schedule O.	10		
	ii 156, Complete Form 4720, Combudio C.	F	990	(0040)

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	8	39		
	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 in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8	88		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			_		
_	officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under the			· -		
3						x
	of officers, directors, or trustees, or key employees to a management company or other person?					X
4	Did the organization make any significant changes to its governing documents since the prior Form 9					_
5	Did the organization become aware during the year of a significant diversion of the organization's ass				37	X
6	Did the organization have members or stockholders?			. 6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	•				l
	more members of the governing body?			. <u>7a</u>		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			l
	persons other than the governing body?			. 7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					
			,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
_			,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, DOIOI	e ming the form:	110		
				12a	Х	
12a	, •		iliata O	. —		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			120	- 1	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,		40.	х	
	in Schedule O how this was done				+	
13	Did the organization have a written whistleblower policy?				X	
14	Did the organization have a written document retention and destruction policy?			. 14	X	
15	Did the process for determining compensation of the following persons include a review and approva	I by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official				X	
b	Other officers or key employees of the organization			. 15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	nent w	ith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's			
	exempt status with respect to such arrangements?			. 16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶IL					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, an	d 990-	T (Section 501(c)	3)s only	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.		. ()	,		
	X Own website Another's website X Upon request Other (explain	in Scl	nedule (1)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, cor			nd finan	cial	
	statements available to the public during the tax year.				-141	
20	State the name, address, and telephone number of the person who possesses the organization's boo	ike and	records			
20	ROBERT CORDES, VP OF FINANCE - 312-726-3860	mo all				
	180 N. STETSON AVENUE, NO. 1400, CHICAGO, IL 60601					
	TOO N. SIEISON AVENUE, NO. 1400, CHICAGO, IL 00001					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per	(do box,		(C Posineck in	ition	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) IVO DAALDER	40.00								_	
PRESIDENT		Х		X				528,623.	0.	104,715.
(2) SAMUEL C. SCOTT III	2.00									
CO-CHAIR		Х		X				0.	0.	0.
(3) LEAH JOY ZELL	2.00									_
CO-CHAIR		Х		X				0.	0.	0.
(4) LOUIS SUSMAN	2.00									_
VICE CHAIR		Х		Х				0.	0.	0.
(5) SHIRLEY RYAN	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(6) JOHN MANLEY	2.00									
VICE CHAIR		Х		X				0.	0.	0.
(7) MICHAEL MOSKOW	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(8) DOUGLAS DOETSCH	2.00								•	
SECRETARY		Х		Х				0.	0.	0.
(9) LESTER CROWN	2.00								•	
CHAIR EMERITUS	0.00	Х	-	Х				0.	0.	0.
(10) JOHN ETTELSON	2.00								•	•
TREASURER	1 00	Х		Х				0.	0.	0.
(11) EDUARDO ALVAREZ	1.00								•	•
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(12) MICHAEL AMIRIDIS	1.00	,,							0	•
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(13) HENRY S. BIENEN	1.00	٠,,							0	•
BOARD MEMBER	1 00	Х				_		0.	0.	0.
(14) JIM BRADY	1.00	. ,							0	•
BOARD MEMBER	1 00	Х						0.	0.	0.
(15) BRUCE BRAUN BOARD MEMBER	1.00	х						0.	0.	^
(16) GREG BROWN	1 00	Λ	-			\vdash		0.	0.	0.
(16) GREG BROWN BOARD MEMBER	1.00	х						0.	0.	^
(17) FRANCIE COMER	1.00	Δ				\vdash		0.	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0.
DOTALD MEMBER	L	Λ				<u> </u>	l	1 0.	U •	Form 990 (2018)

832007 12-31-18 Form **990** (2018)

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) Position Average Reportable Name and title Reportable **Estimated** (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any ndividual trustee or director the organizations compensation hours for organization (W-2/1099-MISC) from the Highest compensated related nstitutional truste (W-2/1099-MISC) organization organizations and related below organizations line) (18) DONALD COOKE 1.00 BOARD MEMBER Х 0. 0. 0. (19) RICHARD M. COOPER 1.00 X 0. 0 . 0. BOARD MEMBER (20) ELLEN COSTELLO 1.00 BOARD MEMBER Х 0 0. 0. (21) WILLIAM DALEY 1.00 BOARD MEMBER X 0. 0. (22) JOHN DEBLASIO 1.00 BOARD MEMBER Х 0. 0. 0. 1.00 (23) MARILYN DIAMOND BOARD MEMBER Х 0. 0. 0. (24) CRAIG DUCHOSSOIS 1.00 Х 0. 0. BOARD MEMBER 0 (25) RICHARD EDELMAN 1.00 0. BOARD MEMBER 0. 0. (26) RICARDO ESTRADA 1.00 BOARD MEMBER 0 0. 528,623. $104,7\overline{15}$. 0. 1b Sub-total 1,757,012. 184,656. c Total from continuation sheets to Part VII, Section A 289.371. 2,285,635. Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 15 compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on X 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
AGENCY EA	LOGISTICS CONSULTING	
311 W. WALTON ST., CHICAGO, IL 60610	FOR 2017 CHICAGO FO	340,340.
CATHERINE BERTINI	CONSULTING ON GLOBAL	
84 S. MAIN STREET, HOMER, NY 13077	FOOD AND AGRICULTUR	247,500.
COMMUNITY COUNSELLING SERVICE, 527 MADISON	CONSULTING FOR	
AVENUE, 5TH FLOOR, NEW YORK, NY 10022	FUNDRAISING CAMPAIGN	195,000.
JANUARY ZELL	LOGISTICS CONSULTING	
711 WALNUT BEND DRIVE, MANSFIELD, TX 76063	FOR LEADERSHIP STUD	120,000.
		-

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

SEE PART VII, SECTION A CONTINUATION SHEETS

- 101	CAGO COUN								36-218	1969
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, an	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(C)			(D)	(E)	(F)
Name and title	Average			Posi	tion			Reportable	Reportable	Estimated
	hours	(c	heck	all t	hat	appl	y)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				em p		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	al trus		yee	треп				organizations
	below	Individual trustee or director	Institutional trustee	<u>~</u>	Key employee	Highest compensated employee	e.			0. ga <u>_</u> a
	line)	Indivi	Instit	Officer	Key e	Highe	Former			
(27) CHARLES EVANS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(28) RAJ FERNANDO	1.00							-	-	
BOARD MEMBER		Х						0.	0.	0.
(29) PAUL FINNEGAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(30) MICHAEL FROY	1.00	T		H				, , , , , , , , , , , , , , , , , , ,	•	
BOARD MEMBER		х						0.	0.	0.
(31) CHRISTOPHER GALVIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(32) ROBERT GIBBS	1.00							-	-	
BOARD MEMBER		Х						0.	0.	0.
(33) J. DOUGLAS GRAY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(34) CARYN HARRIS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(35) BRETT HART	1.00									
BOARD MEMBER		Х						0.	0.	0.
(36) FAY HARTOG LEVIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(37) BRAD HENDERSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(38) MARK HOPLAMAZIAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(39) DAVID JACOBSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(40) JOYCE JOHNSON-MILLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(41) CHRISTOPHER M. KEOGH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(42) KIMBERLY KEYWELL	1.00									
BOARD MEMBER		Х	L	<u> </u>				0.	0.	0.
(43) BECKY KNIGHT	1.00									
BOARD MEMBER		Х		L l		L		0.	0.	0.
(44) STEVEN KOCH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(45) SAJAL KOHLI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(46) PETER LIEB	1.00									
BOARD MEMBER		Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

	1100 0001							L AFFAIRS		1969
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average			Posi	ition			Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	'n				loyee		the	organizations	compensation
	(list any hours for	or directo				l em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	3e or (stee			sate		(***2/1099****100)		and related
	organizations	trust	al tru		yee	n be				organizations
	below	Individual trustee	Institutional trustee	er	Key employee	Highest compensated employee	ıer			· ·
	line)	Indi	Insti	Officer	Key	High	Former			
(47) ROBERT LIVINGSTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(48) JOHN MADIGAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(49) CRAIG MARTIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(50) DORRI MCWHORTER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(51) LEO MELAMED	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(52) CHARLES MOORE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(53) GREG MORRIS	1.00									
BOARD MEMBER	1	Х						0.	0.	0.
(54) SUSAN E. MORRISON	1.00	ļ							•	•
BOARD MEMBER	1 00	Х						0.	0.	0.
(55) CLARE MUNANA	1.00	٠,,						,	0	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(56) JEFFREY NEAL	1.00	Х						0.	0	0
BOARD MEMBER (57) PIN NI	1 00	Δ						0.	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0
(58) OLUFUNMILAYO OLOPADE	1.00	Δ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(59) WILLIAM OSBORN	1.00	Δ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(60) DOUGLAS PERTZ	1.00	22						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(61) RICHARD PORTER	1.00							•	•	•
BOARD MEMBER	1100	х						0.	0.	0.
(62) JOSE LUIS PRADO	1.00	† <u></u>							3.	
BOARD MEMBER		х						0.	0.	0.
(63) ANNE PRAMAGGIORE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(64) QUINTIN PRIMO III	1.00								-	-
BOARD MEMBER		Х						0.	0.	0.
(65) MARGOT PRITZKER	1.00							-	-	-
BOARD MEMBER		Х						0.	0.	0.
	1.00									
(66) RAGHURAM RAJAN	1 - 00									
(66) RAGHURAM RAJAN BOARD MEMBER	1.00	Х						0.	0.	0.

	21100 0001	101		<u> </u>	U	Ц	בינם	L AFFAIRS	36-218	1909
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per					au I		from	from related organizations	other
	week (list any	tor				Highest compensated employee		the organization	(W-2/1099-MISC)	compensation from the
	hours for	or director				ed em		(W-2/1099-MISC)	(** 27 1033 141100)	organization
	related	tee or	ıstee			ensate		(** = * * * * * * * * * * * * * * * * *		and related
	organizations	Itrus	nal trı		loyee	om De				organizations
	below	Individual trustee	Institutional trustee	Officer	Key employee	hesto	Former			
	line)	n n	l su	#0	. Ke	Hig	For			
(67) DAVID REYES	1.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(68) LARRY RICHMAN	1.00	ļ								
BOARD MEMBER	1	Х						0.	0.	0.
(69) E. SCOTT SANTI	1.00	ļ								
BOARD MEMBER	1 00	Х						0.	0.	0.
(70) JENNIFER SCANLON	1.00	ļ							•	
BOARD MEMBER	1 00	Х						0.	0.	0.
(71) MORTON SCHAPIRO	1.00	~ ,							_	_
BOARD MEMBER	1 00	Х						0.	0.	0.
(72) PAUL SCHICKLER	1.00	-						,	0	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(73) PAMELA SCHOLL	1.00	-						,	0	0
BOARD MEMBER (74) ALEJANDRO SILVA	1 00	Х						0.	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0.
(75) ADELE SIMMONS	1.00	Λ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(76) MAURICE SMITH	1.00	Λ						0.	0.	0 •
BOARD MEMBER	1.00	Х						0.	0.	0.
(77) JAMES SPRAYREGEN	1.00	25						0.		•
BOARD MEMBER	1.00	Х						0.	0.	0.
(78) GLENN TILTON	2.00							•	•	•
CHAIR EMERITUS	2.00	Х		х				0.	0.	0.
(79) KAY TORSHEN	1.00									
BOARD MEMBER		х						0.	0.	0.
(80) FABRIZIO VALENTINI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(81) DAVID VITALE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(82) FREDERICK WADDELL	1.00									
BOARD MEMBER		Х		L				0.	0.	0.
(83) ANNE WEDNER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(84) MICHAEL WERNER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(85) ERIC WHITAKER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(86) KEITH WILLIAMS	1.00									
BOARD MEMBER		Х						0.	0.	0.
		_								·

Form 990 THE CHICA	AGO COUN	1G1	<u>.L</u>	ON	G	ΓO	BA	L AFFAIRS	36-218	1969
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	heck	all t	hat	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	hours for related	e or c	stee			satec		(88-2/1099-88130)		organization and related
	organizations	truste	al trus		yee	om per				organizations
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ıer			· ·
	line)	lndi	Insti	Officer	Key	High	Former			
(87) LINDA WOLF	1.00									
BOARD MEMBER		Х						0.	0.	0.
(88) TOM WYLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(89) ROBERT ZIMMER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(90) JENNIFER CIZNER	40.00									
CHIEF OPERATING OFFICER					Х			238,849.	0.	25,066.
(91) ROBERT CORDES	40.00	_								
VP, FINANCE AND ADMINISTRA					Х			191,685.	0.	26,585.
(92) ANNA EDWARDS	40.00	1						406 04 5		4.6.00.6
VP, DEVELOPMENT	40.00				X			196,917.	0.	16,306.
(93) BRIAN HANSON	40.00	-						105 105	•	01 600
VP, STUDIES	40.00				Х			195,127.	0.	21,620.
(94) ALESHA MILLER	40.00	-			77			167 005	0	20 067
DIRECTOR, GLOBAL FOOD & AG	40.00				Х			167,085.	0.	20,867.
(95) DANIELLE HARBISON	40.00	-				. ,		160 077	0	15 007
EXECUTIVE DIRECTOR, BLACK CHICAGO TO (96) ERIK PEDERSON	40.00					Х		160,977.	0.	15,237.
	40.00	-				х		160 705	0.	6 200
DIRECTOR, GOVERNMENT RELAT (97) PHILIP LEVY	40.00			Н		_		160,795.	0.	6,209.
SENIOR FELLOW, GLOBAL ECON	40.00	1				х		146,343.	0.	21,276.
(98) KAREN WEIGERT	40.00			Н				140,343.	0.	21,270
SENIOR FELLOW, GLOBAL CITI	40.00	1				х		150,570.	0.	12,682.
(99) DINA SMELTZ	40.00					22		130,370.		12,002
SENIOR FELLOW, PUBLIC OPIN	10.00	1				x		148,664.	0.	18,808.
								110,001		10,000
		1								
		1								
			L							
		1								
								1,757,012.		184,656.
Total to Part VII, Section A, line 1c										

Form 990 (2018) THE CHI
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ပ္ ပ	1 8	Federated campaigns	1a					
an		Membership dues						
₽, E		Fundraising events						
ifts ar A		d Related organizations						
s, Bilki		Government grants (contribution						
Sig		All other contributions, gifts, grant						
ber		similar amounts not included abov		22,096,678.				
i di	ç	Noncash contributions included in lines 1	Ia-1f: \$					
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f			22,096,678.			
				Business Code				
ø	2 8	LEADERSHIP STUDY MISSIO	N	900099	379,635.	379,635.		
rvic	k	ADMISSION FEES		900099	222,285.	222,285.		
Seg	(EMERGING LEADERS PARTIC	IPATION FE	900099	167,000.	167,000.		
Program Service Revenue	(OTHER EARNED INCOME		900099	11,086.	11,086.		
ogr	•	•						
4	f	All other program service rever	nue					
	9	Total. Add lines 2a-2f			780,006.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶ ↓	671,098.			671,098.
	4	Income from investment of tax	exempt bond p	oroceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents	223,860.					
		Less: rental expenses	0.	<u> </u>				
		Rental income or (loss)	223,860.		000 050	222.252		
		Net rental income or (loss)		D	223,860.	223,860.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	5,020,982.					
	k	Less: cost or other basis	4 770 430					
		and sales expenses	4,772,438.					
		Gain or (loss)			249 544			249 544
		Net gain or (loss)			248,544.			248,544.
e	8 8	 Gross income from fundraising including \$ 	•					
/en								
Other Reven		contributions reported on line	•					
her	ı	Part IV, line 18						
₽		Net income or (loss) from fund						
		a Gross income from gaming ac						
	5 6	Part IV, line 19						
	ŀ	Less: direct expenses						
		Net income or (loss) from gami						
		Gross sales of inventory, less r	-					
		and allowances		,				
	k	Less: cost of goods sold						
		Net income or (loss) from sales						
ľ		Miscellaneous Revenue		Business Code				
Ī	11 a							
	k							
	(
	(All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions			24,020,186.	1,003,866.	0.	919,642.

832009 12-31-18

	Check if Schedule O contains a respons		this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	25,000.	25,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	10 000	10 000		
	individuals. See Part IV, lines 15 and 16	10,000.	10,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 510 206	652 055	420 E24	121 707
_	trustees, and key employees	1,518,286.	652,955.	430,534.	434,797
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	5,386,872.	4,473,814.	416,423.	496,635
7	Other salaries and wages	3,300,072.	4,4/3,014.	410,423.	430,033
8	Pension plan accruals and contributions (include	426,151.	321,154.	46,681.	58,316
^	section 401(k) and 403(b) employer contributions)	512,480.	386,212.	56,138.	70,130
9	Other employee benefits	455,838.	343,526.	49,934.	62,378
0	Payroll taxes	±33,030.	343,320.	47,754.	02,570
1	Fees for services (non-employees):				
a b	Management Legal	35,790.	22,410.	13,380.	
	Accounting	26,000.	22/1100	26,000.	
	Lobbying	20,000		20,0001	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	2,257,307.	1,785,569.	36,227.	435,511
2	Advertising and promotion	294,319.	270,826.	192.	23,301
3	Office expenses	763,984.	667,432.	25,681.	70,871
4	Information technology	717,053.	649,014.	33,367.	34,672
5	Royalties			-	
6	Occupancy	1,467,604.	1,177,506.	140,991.	149,107
7	Travel	1,451,880.	1,404,858.	33,717.	13,305
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	1,279,840.	1,120,740.	94,866.	64,234
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	556,141.	443,655.	53,839.	58,647
3	Insurance	33,933.		33,933.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSES	122,040.	25,906.	38,346.	57,788
b		,			2.,.00
c					
d					
e	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	17,340,518.	13,780,577.	1,530,249.	2,029,692
26	Joint costs. Complete this line only if the organization		, , , ,		<u>, , , , , , , , , , , , , , , , , , , </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2018)
Part X | Balance Sheet

<u>Par</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			3,464,072.	2	2,097,292. 10,886,181.
	3	Pledges and grants receivable, net			8,094,359.	3	10,886,181
	4	Accounts receivable, net			19,691.	4	39,867
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ted em	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualif					
		section 4958(f)(1)), persons described in section	4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of sect					
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use		8			
	9	B			662,306.	9	917,641
		Land, buildings, and equipment: cost or other			•		•
		basis. Complete Part VI of Schedule D	10a	5,322,654.			
	b	Less: accumulated depreciation	10b	5,322,654. 2,055,435.	3,580,824.	10c	3,267,219
	11	Investments - publicly traded securities			.,,.	11	
	12	Investments - other securities. See Part IV, line 1			14,487,714.	12	18,972,708
	13	Investments - program-related. See Part IV, line			, , ,	13	- , - ,
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	303,909.	15	405,684		
	16	Total assets. Add lines 1 through 15 (must equa			30,612,875.	16	36,586,592
	17	Accounts payable and accrued expenses	1,439,798.	17	806,788		
	18	Grants payable				18	•
	19	Deferred revenue			199,437.	19	464,402
	20	Tax-exempt bond liabilities			•	20	•
	21	Escrow or custodial account liability. Complete F				21	
,	22	Loans and other payables to current and former					
ţį		key employees, highest compensated employee					
Liabilities				22			
Lia	23	Secured mortgages and notes payable to unrela		d parties		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par					
		parties, and other liabilities not included on lines					
		Schedule D	-	· ·	3,355,869.	25	3,340,908
	26	Total liabilities. Add lines 17 through 25			4,995,104.	26	3,340,908, 4,612,098,
		Organizations that follow SFAS 117 (ASC 958					
ņ		complete lines 27 through 29, and lines 33 an					
JCe	27	Unrestricted net assets			14,146,664.	27	11,567,320.
alai	28	Temporarily restricted net assets			8,168,905.	28	9,225,011.
d B	29	Permanently restricted net assets			3,302,202.	29	11,182,163
اج		Organizations that do not follow SFAS 117 (A	SC 958	, check here 🕨 🗌			
P		and complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or eq				31	
et A	32	Retained earnings, endowment, accumulated inc				32	
ž	33	Total net assets or fund balances			25,617,771.	33	31,974,494.
	34	Total liabilities and net assets/fund balances		1	30,612,875.	34	36,586,592.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,02		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,34		
3	Revenue less expenses. Subtract line 2 from line 1	3		,67		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25	,61		
5	Net unrealized gains (losses) on investments	5		-29	9,1	<u>66.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7		-2	3,7	79.
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	31	,97	4,4	94.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Auc	lit			
	Act and OMB Circular A-133?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number Name of the organization THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2018 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

<u> </u>	rails to qualify under the tests	s listed below, pied	ase complete Part	···· <i>)</i>			
	ction A. Public Support	ı	<u> </u>	T	1	1	1
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ions)		•	12	•
	First five years. If the Form 990 is for	•	,				
	organization, check this box and stor						
Se	ction C. Computation of Publi	c Support Pe	rcentage				
14	Public support percentage for 2018 (I	ine 6, column (f) c	livided by line 11, o	column (f))		14	%
15	Public support percentage from 2017	Schedule A, Part	II, line 14			15	%
	33 1/3% support test - 2018. If the o					nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	oorted organizatior	າ			
k	33 1/3% support test - 2017. If the						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstar	nces" test, check th	nis box and stop	here. Explain in Pa	art VI how the orga	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		> □
k	10% -facts-and-circumstances test	- 2017. If the or	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the		~				
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	<u> box on line 13,</u> 16	sa, 16b, 17a, or 17	b, check this box a	and see instruction	s
					Sch	edule A (Form 990	or 990-EZ) 2018

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.)

Se	ction A. Public Support	,,	•				
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	15651840.	13117401.	15316141.	19343518.	22096678.	85525578.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	976,643.			1077506.		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	·				·	
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	<u> 16628483.</u>	13952751.	16238257.	20421024.	22876684.	90117199.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons	2850033.	3658521.	3018358.	4904235.	3390897.	17822044.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
,	Add lines 7a and 7b	2850033.	3658521.	3018358.	4904235.	3390897.	17822044.
	Public support. (Subtract line 7c from line 6.)	2000000	30303221	30203301	13012331	3330370	72295155.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6			16238257.	20421024.	22876684.	90117199.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	36,912.	307,819.	595,653.	1134208.	1143502.	3218094.
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	36,912.	307,819.	595,653.	1134208.	1143502.	3218094.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	16665395.	14260570.	16833910.	21555232.	24020186.	<u>93335293.</u>
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
							
Se	ction C. Computation of Publi	ic Support Per	centage				
15	Public support percentage for 2018 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15	77.46 %
	Public support percentage from 2017		-			16	75.32 %
	ction D. Computation of Inves						2.45
	Investment income percentage for 20					17	3.45 %
						18	4.45 %
19a	a 33 1/3% support tests - 2018. If the						
k	more than 33 1/3%, check this box ar 33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
-		
2		
За		
- Oa		
3b		
3с		
4-		
4a		
4b		
_		
4c		
E-		
5a		
5b		
5с		
6		
7		
8		
-		
9a		
9b		
90		
9c		
10a		
10b		
.55		

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

Schedule A (Form 990 or 990-EZ) 2018 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Page 6

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrat	ed Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

36-2181969 Page 7 Schedule A (Form 990 or 990-EZ) 2018 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets **5** Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 **a** From 2013 **b** From 2014 **c** From 2015 **d** From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2018 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2019. Add lines 3j

Schedule A (Form 990 or 990-EZ) 2018

and 4c.

8 Breakdown of line 7:

a Excess from 2014

b Excess from 2015

c Excess from 2016

d Excess from 2017

e Excess from 2018

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number 36-2181969

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel-	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, $\\$	handling of violations, and enforcing cons	servation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	the organization's accounting for
Da	conservation easements.	Ant Historical Transcriptor on Ot	Unau Cinailau Annata
Pai	t III Organizations Maintaining Collections of		tner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical treating the control of the contro		ıı gaın, provide
	the following amounts required to be reported under SFAS 1	· ·	.
a	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

832051 10-29-18

Schedule D (Form 990) 2018

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

Sche	dule D (Form 990) 2018 THE CHI	CAGO COUNCI	L ON GLOB	AL AFF <i>I</i>	AIRS	36-2	2181969 Page 2
	t III Organizations Maintaining C						
3	Using the organization's acquisition, accession (check all that apply):						
а	Public exhibition	d	Loan or exc	change progr	ams		
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	llections and explain	how they further t	ne organizatio	on's exen	npt purpose in Pa	art XIII.
5	During the year, did the organization solicit or	r receive donations o	f art, historical trea	sures, or oth	er similar	assets	
	to be sold to raise funds rather than to be ma						Yes No
Par			te if the organization	on answered	"Yes" on	Form 990, Part I	V, line 9, or
	reported an amount on Form 990, Par	t X, line 21.					
1a	Is the organization an agent, trustee, custodia		•				
	on Form 990, Part X?					l	Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:				
							Amount
	Beginning balance						
	Additions during the year						
е	Distributions during the year						
f	Ending balance					r	
	Did the organization include an amount on Fo					ity?l	Yes No
	If "Yes," explain the arrangement in Part XIII.						<u></u>
Par	t V Endowment Funds. Complete i	f the organization ans					
		(a) Current year	(b) Prior year	(c) Two year		(d) Three years ba	
	Beginning of year balance	17,027,419.	13,257,913.	'	3,649.	11,631,37	-
	Contributions	8,075,624.	3,750,000.	<u> </u>	7,662.	1,317,42	
	Net investment earnings, gains, and losses	533,774.	1,059,200.	1,67	7,070.	-98,80	9. 27,492.
	Grants or scholarships						
е	Other expenditures for facilities	1 664 500	1 000 001	1 20		000 00	24 555
	and programs	1,664,790.	1,020,981.	<u> </u>	2,480.	800,00	
	Administrative expenses	23,779.	18,713.		7,988.	16,33	
	End of year balance	23,948,248.	17,027,419.	•	7,913.	12,033,64	9. 11,631,372.
2	Provide the estimated percentage of the curr	•		i)) held as:			
	Board designated or quasi-endowment	53.31	_%				
	Permanent endowment 46.69	%					
С	Temporarily restricted endowment	%					
	The percentages on lines 2a, 2b, and 2c should be a sh	•					
За	Are there endowment funds not in the posses	ssion of the organizat	tion that are held a	nd administe	red for th	e organization	[]
	by:						Yes No
	(i) unrelated organizations						77
b	If "Yes" on line 3a(ii), are the related organiza						3b
4 Par	Describe in Part XIII the intended uses of the		vment funds.				
rai			Doub IV/ Exa 44 - 4	کور جمید ورون	\ Do:+ \/	line 10	
	Complete if the organization answered		í T		ŕ		(al) De aleccation
	Description of property	(a) Cost or ot basis (investm		t or other (other)	1 ' '	ccumulated	(d) Book value
		Dasis (IIIVESIII)	ierit) Dasis	(Other)	L de	preciation	

	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						
	Leasehold improvements		2,571,594.	513,244.	2,058,350.		
d	Equipment		2,751,060.	1,542,191.	1,208,869.		
е	Other						
	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2018

Schedule D	(Form 990) 2018	1110	CHICAGO	COONCIL	OM	GLUDAL	ALI
Part VII	Investr	nents -	Other Se	curities.				

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, F	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	lluation: Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	10.000			
(A) MUTUAL FUNDS	18,972,708.	END-OF-YE	EAR MARKET	VALUE
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	10 000 000			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.	18,972,708.			
Complete if the organization answered "Yes"				
(a) Description of investment	(b) Book value	(c) Method of va	lluation: Cost or end	d-of-year market value
<u>(1)</u>				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 000 Part IV line	11d Soo Form 000 F	Part V lina 15	
	Description	Tru. See Form 990, F	art A, iiile 15.	(b) Book value
				(b) Doon raide
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	e 15.)		>	
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	NI.	. ,		
(2) DEFERRED COMPENSATION PLAN (3) LIABILITIES		405,684.		
(4) DEFERRED RENT		348,503.		
		2,586,721.		
- • •		2,300,1210		
(8)				
(9)				
Total, (Column (h) must equal Form 990, Part X, col. (R) line	25)	3,340,908.		

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

Par	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ì.			
1	Total revenue, gains, and other support per audited financial statements			1	23,697,241.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-299,166.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	-299,166.
3	Subtract line 2e from line 1			3	23,996,407.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	23,779.		
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	23,779.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	24,020,186.
Pai	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	n Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ì.			
1	Total expenses and losses per audited financial statements			1	17,340,518.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a			
b	Prior year adjustments	. 2b			
С					
d	()				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	17,340,518.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	17,340,518.
Pai	rt XIII Supplemental Information.				
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t 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 add	ditional infor	mation.		
PAF	RT V, LINE 4:				
<u>TO</u>	PROVIDE FUNDING FOR BOTH CURRENT AND FUTU	RE PRO	<u>GRAMS AND I</u>	NIT	IATIVES.
PAF	RT X, LINE 2:				
		_ ~_~_		٠,	
THE	E COUNCIL IS EXEMPT FROM INCOME TAXES UNDE	R SECT	ION 501(C)(3)	OF THE
INT	TERNAL REVENUE CODE. THE COUNCIL'S MANAGEM	ENT BE	LIEVES THAT	TH	ERE WAS NO
UNI	RELATED BUSINESS INCOME NOR UNCERTAIN TAX	POSITI	ONS FOR THE	YE	AR ENDED
	00 0040				
JUI	NE 30, 2018, AND ACCORDINGLY, THE FINANCIA	L STAT	EMENTS CONT	AIN	NO
D = -		0D14 00	0 D====================================	_	
PRC	OVISIONS FOR INCOME TAXES. THE COUNCIL'S F	ORM 99	u, KETURN O	F.	
050	NAMED AND THE PARTY OF THE COURT OF THE COUR	nom mo		T	v min +50
ORC	GANIZATION EXEMPT FROM INCOME TAX, IS SUBJ	FCT TO	EXAMINATIO	N B	Y THE IRS,

Schedule D (Form 990) 2018

GENERALLY FOR THREE YEARS AFTER IT IS FILED.

Schedule D (Form 990) 2018	THE	CHICAGO	COUNCIL	on	GLOBAL	AFFAIRS	36-2181969	Page 5
Schedule D (Form 990) 2018 Part XIII Supplemental Inform	mation	(continued)						
		(continuca)						

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2018
Open to Public Inspection

Name of the organization

Employer identification number

mus	CHICAGO COU	NCTI ON (זג זגם חזי	Z T A T D C		36-218196	٥
Par	t I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
	Form 990, Part IV				9		
1				ds to substantiate the amount of its gra he selection criteria used to award the			Yes X No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's រុ	procedures for monitoring the use of its	s grants and otl	ner assistance outsi	de the
3	Activities per Region. (Th	ne following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)		
	(a) Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
RUSS	IA	0	0	PROGRAM SERVICES	PUBLIC OPIN	ION SURVEY	14,000.
UNIT	ED ARAB EMIRATES	0	2	PROGRAM SERVICES	GLOBAL CITI	ES DINNER	13,877.
UNIT IREL	ED KINGDOM &	0	2	PROGRAM SERVICES	LEADERSHIP	STUDY MISSION	332,065.
MEXI	со	0	2	PROGRAM SERVICES	LEADERSHIP	STUDY MISSION	237,527.
	Subtotal	0	6				597,469.
	Total from continuation sheets to Part I Totals (add lines 3a	0	0				0.
C	and 3b)	0	6				597,469.

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

Schedule F (Form 990) 2018

Part II

Schedule F (Form 990) 2018

recipient who rec	ceived more than \$5,0	000. Part II can be duplic	cated if additional space is nee	eded.				
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ecognized as charities by the ion 501(c)(3) equivalency lette					
3 Enter total number of								

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance 2018 MARSHALL M. BOUTON ASIA FELLOWSHIP SOUTH KOREA 10,000. WIRE TRANSFER 0. CASH 1

Schedule F (Form 990) 2018 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)

(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 2:
THE MARSHALL M. BOUTON ASIA FELLOWSHIP IS AN ANNUAL ONE-WEEK VISITING
FELLOWSHIP FOCUSED ON ASIA. SELECTED ANNUALLY BY A COMMITTEE, BOUTON
FELLOWS ARE PROMINENT SCHOLARS, FORMER SENIOR POLICYMAKERS, OR PUBLIC
INTELLECTUALS KNOWN FOR CONTRIBUTIONS TO ASIA'S ECONOMIC AND POLITICAL
DEVELOPMENT AND/OR INTERNATIONAL RELATIONS. TYPICALLY, THE FELLOWS RESIDE
IN ASIA AND ARE SELECTED FROM DIFFERENT COUNTRIES AND INSTITUTIONS IN
ASIA ON A ROTATING BASIS. THE FELLOW SPENDS A WEEK IN CHICAGO MEETING
WITH CIVIC LEADERS, CORPORATE EXECUTIVES, AND LOCAL SCHOLARS AND DELIVERS
A CHICAGO COUNCIL KEYNOTE PUBLIC LECTURE ON US-ASIA RELATIONS.
PART I, LINE 3:
GENERALLY ACCEPTED ACCOUNTING PRINCIPLES

Schedule F (Form 990) 2018

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

· ·	THE CHICA	GO COUNCI	L ON GLOBAL	AFFAIRS				36-2181969
Part I Gen	eral Information on Grants a	nd Assistance					·	
1 Does the o	rganization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	
criteria use	d to award the grants or assis	stance?						Yes X No
2 Describe in	Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	d States.			
Part II Gran	ts and Other Assistance to	Domestic Organiz	zations and Domestic	Governments.	Complete if the org	anization answered "Y	es" on Form 990, Part I	V, line 21, for any
recip	ient that received more than S	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.			
	and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
O Friends-1	number of cooling 504/a//0\ -	nd dovoment and	renizatione lists discuss	a line 1 table				
	number of section 501(c)(3) a number of other organization:	-		e iirie i tadie				<u> </u>
	rwork Reduction Act Notice							Schedule I (Form 990) (2018)

(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
AVEL STIPEND	5	25,000.	0.		
rt IV Supplemental Information. Provide the informa	tion required in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	

SCHEDULE J (Form 990)

Compensation Information

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969

Pa	art I Questions Regarding Compensation			
			Yes	No
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.			
	First-class or charter travel Housing allowance or residence for personal use			
	X Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account 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	X	
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	X	
3	Indicate which, if any, of the following the filing 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.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	<u> </u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	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:	_		37
	The organization?	6a		X
b	Any related organization?	6b		X
	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			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
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		<u> </u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		1

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

Schedule J (Form 990) 2018

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.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(6)(1)-(U)	reported as deferred on prior Form 990	
(1) IVO DAALDER	(i)	449,445.	79,178.	0.	93,000.	11,715.	633,338.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) JENNIFER CIZNER	(i)	223,849.	15,000.	0.	16,872.	8,194.	263,915.	0.	
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) ROBERT CORDES	(i)	184,185.	7,500.	0.	15,054.	11,531.	218,270.	0.	
VP, FINANCE AND ADMINISTRA	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) ANNA EDWARDS	(i)	189,417.	7,500.	0.	14,270.	2,036.	213,223.	0.	
VP, DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) BRIAN HANSON	(i)	187,627.	7,500.	0.	14,313.	7,307.	216,747.	0.	
VP, STUDIES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ALESHA MILLER	(i)	163,085.	4,000.	0.	12,794.	8,073.	187,952.	0.	
DIRECTOR, GLOBAL FOOD & AG	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) DANIELLE HARBISON	(i)	150,977.	10,000.	0.	7,239.	7,998.	176,214.	0.	
EXECUTIVE DIRECTOR, BLACK CHICAGO TO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) ERIK PEDERSON	(i)	158,295.	2,500.	0.	5,082.	1,127.	167,004.	0.	
DIRECTOR, GOVERNMENT RELAT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) PHILIP LEVY	(i)	141,343.	5,000.	0.	11,534.	9,742.	167,619.	0.	
SENIOR FELLOW, GLOBAL ECON	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) KAREN WEIGERT	(i)	150,570.	0.	0.	11,274.	1,408.	163,252.	0.	
SENIOR FELLOW, GLOBAL CITI	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) DINA SMELTZ	(i)	144,664.	4,000.	0.	10,859.	7,949.	167,472.	0.	
SENIOR FELLOW, PUBLIC OPIN	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(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 3:
THE ORGANIZATION'S COMPENSATION COMMITTEE UTILIZED FORMS 990 OF OTHER
ORGANIZATIONS AND A COMPENSATION STUDY TO ESTABLISH THE COMPENSATION OF THE
ORGANIZATION'S CEO. THE COMPENSATION WAS APPROVED BY THE BOARD.
PART I, LINE 4B:
IVO H. DAALDER - ORGANIZATION CONTRIBUTED \$93,000 TO A NON-QUALIFIED
RETIREMENT PLAN

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2018
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number 36-2181969

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INSIGHT ON CRITICAL GLOBAL ISSUES, ADVANCES POLICY SOLUTIONS, AND FOSTERS DIALOGUE ON WHAT IS HAPPENING IN THE WORLD AND WHY IT MATTERS THE UNITED STATES, AND AROUND THE GLOBE. TO PEOPLE IN CHICAGO, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FORM 990, AROUND THE GLOBE. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PROJECT THAT AIMS TO CREATE A VIBRANT AFRICAN AMERICAN COMMUNITY IN CHICAGO THAT BENEFITS FROM AND CONTRIBUTES TO THE REGION'S ECONOMY AND SOCIETY EXPENSES \$ 368,328. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 6: MEMBERS PAY DUES WHICH ENTITLE THEM TO ACCESS TO EVENTS, PUBLICATIONS AND CERTAIN RESOURCES OF THE COUNCIL. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED IN DETAIL BY THE AUDIT COMMITTEE. THIS COMMITTEE MET WITH THE AUDITOR/PREPARER PRIOR TO APPROVING THE RETURN. COPIES OF THE RETURN WERE THEN PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING.

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

ON AN ANNUAL BASIS, BOARD MEMBERS ARE REQUIRED TO SIGN ANNUAL CONFLICT OF

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization	Employer identification number
THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	36-2181969
INTEREST DISCLOSURE STATEMENTS, WHICH ARE SUBMITTED TO THE	CHAIR OF THE
NOMINATING AND GOVERNANCE COMMITTEE.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPENSATION COMMITTEE REVIEWS EXECUTIVE COMPENSATION	ON AN ANNUAL
BASIS. THIS REVIEW PERIODICALLY INCLUDES THE USE OF COMPEN	ISATION SURVEYS
AND DATA FROM COMPARABLE ORGANIZATIONS.	
FORM 990, PART VI, SECTION C, LINE 18:	
FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION ON REQUEST AND	
WEBSITE.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINAN	ICIAL STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	1,785,569.
MANAGEMENT AND GENERAL EXPENSES	36,227.
FUNDRAISING EXPENSES	435,511.
TOTAL EXPENSES	2,257,307.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,257,307.
FORM 990, PART XII, LINE 2C	
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPO	NSIBILITY FOR
OVERSIGHT OF THE AUDIT AND OF ITS FINANCIAL STATEMENTS, AN	ID FOR THE
SELECTION OF AN INDEPENDENT AUDITOR. THERE WAS NO CHANGE F	ROM THE PRIOR
	dule O (Form 990 or 990-EZ) (2018)

Schedule O	Schedule O (Form 990 or 990-EZ) (2018) Page 2								
Name of the			CHICAGO	COUNCIL	ON	GLOBAL	AFFAIR	S	Employer identification number 36-2181969
FISCAL	YEAR.								