CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax

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

(Rev. January 2020) Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

OMB No. 1545-0047

<u>A</u>	For tr	e 2019 Calendar year, or tax year beginning 006 1, 2019 and end	ung בי	EC 31, 2019	
В	Check it applicat	C Name of organization		D Employer identific	cation number
	Addr				
	Nam chan	ge Doing business as		36-21819	69
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address) Roo	m/suite	E Telephone number	•
	Final	180 N. STETSON AVENUE	00	312-726-	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	14,498,329.
	Amer	nded CHICACO II 60601		H(a) Is this a group re	eturn
	Appl tion	F Name and address of principal officer: IVO H. DAALDER		for subordinates	
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	
1	Tax-ex	sempt status: \mathbf{X} 501(c)(3) \mathbf{D} 501(c) () \mathbf{A} (insert no.) \mathbf{D} 4947(a)(1) or \mathbf{D}	527	If "No," attach a	list. (see instructions)
J	Webs	ite: ▶ WWW.THECHICAGOCOUNCIL.ORG		H(c) Group exemptio	n number 🕨
K	Form c	f organization: X Corporation Trust Association Other	L Year	of formation: 1922 N	1 State of legal domicile: IL
	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: THE CH	ICAG	O COUNCIL ON	N GLOBAL
Activities & Governance		AFFAIRS IS AN INDEPENDENT, NONPARTISAN ORGA			
rna	2	Check this box if the organization discontinued its operations or disposed	of more	than 25% of its net ass	ets.
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	87
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	86
တ္	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	98
/itie	6	Total number of volunteers (estimate if necessary)		6	250
Ċţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 39		7b	0.
				Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		22,096,678.	11,424,434.
Ž	9	Program service revenue (Part VIII, line 2g)		780,006.	604,139.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		919,642.	391,448.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		223,860.	101,541.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		24,020,186.	12,521,562.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		35,000.	10,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		8,299,627.	3,620,022.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	. b	Total fundraising expenses (Part IX, column (D), line 25) 863,482	<u>. </u>		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,005,891.	3,222,941.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		17,340,518.	6,852,963.
	19	Revenue less expenses. Subtract line 18 from line 12		6,679,668.	5,668,599.
20	g		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		36,586,592.	42,349,757.
Net Assets or	21	Total liabilities (Part X, line 26)		4,612,098.	3,787,784.
	22	Net assets or fund balances. Subtract line 21 from line 20		31,974,494.	38,561,973.
	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedules and			knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which i	preparer	has any knowledge.	
		Signature of officer		 Date	
Sig		'	штох		
Hei	re	ROBERT CORDES, VP FINANCE AND ADMINISTRA Type or print name and title	TITON	l .	
			Tr	Date Check C	PTIN
D - '		Print/Type preparer's name Preparer's signature TEFE COUDOEDED		i	
Pai		JEFF SCHROEDER JEFF SCHROEDER	U	6/19/20 self-employ	
	parer	Firm's name SASSETTI LLC		Firm's EIN ▶	36-2239746
use	Only	Firm's address 6611 NORTH AVENUE		D /7	00/ 206 1422
		OAK PARK, IL 60302		Phone no. (7	
		RS discuss this return with the preparer shown above? (see instructions)			
9320	01 01-	20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2019)

Pai	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, NONPART	TISAN
	ORGANIZATION THAT PROVIDES INSIGHT ON CRITICAL GLOBAL ISSUES, AI	OVANCES
	POLICY SOLUTIONS, AND FOSTERS DIALOGUE ON WHAT IS HAPPENING IN T	THE
	WORLD AND WHY IT MATTERS TO PEOPLE IN CHICAGO, THE UNITED STATES	G, AND
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 ex-	xpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exp	
	revenue, if any, for each program service reported.	
4a	1 061 252	218,150.)
	PROGRAMS: A PLATFORM FOR THE PUBLIC TO ENGAGE DIRECTLY WITH WORL	D
	LEADERS, POLICYMAKERS, BUSINESS EXECUTIVES, JOURNALISTS, AND OTH	HER
	LEADING POLICY EXPERTS AT EVENTS ILLUMINATING GLOBAL ISSUES AND	TRENDS.
4b	(Code:) (Expenses \$ 2 , 093 , 289 • including grants of \$ 10 , 000 •) (Revenue \$	385,989.)
	RESEARCH: INDEPENDENT RESEARCH AND ANALYSIS BY EXPERTS WHO GO BE	EYOND
	TRADITIONAL THINKING ON FOREIGN AFFAIRS TO MAKE NEW CONNECTIONS	FOR
	POLICYMAKERS AND THE PUBLIC ON A RANGE OF GLOBAL ISSUES.	
4c	(Code:) (Expenses \$985,374. including grants of \$) (Revenue \$)	101,541.)
	PROGRAM RELATED SERVICES: MARKETING AND COMMUNICATIONS, DATABASE	E AND
	REGISTRATION.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 236,519 · including grants of \$) (Revenue \$)
4e	Total program service expenses ► 5,276,534.	
		Form 990 (2019)

			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	X	
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		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_X_	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	<u>X</u>
	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		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	22	
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	ıJ		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	.0		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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	Х	
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		Х
20a		20a		X
	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		Х

	990 (2019) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181	969	Р	age 4
Pai	rt IV 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			l
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			l
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			-
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٠,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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			₩
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		x
25-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	•	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36		36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
31		37		x
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	31		<u> </u>
30		38	Х	
Pai		₁ 30		
	Check if Schoolule O contains a reappage or note to any line in this Part V			
	Check if Scriedule O contains a response of note to any line in this Fart v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	1.10
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

932004 01-20-20

1c X Form 990 (2019)

(gambling) winnings to prize winners?

2019) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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	2a 98			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
	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?		За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
	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 contribution	ons 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 ser	vices provided to the payor?	7a	X	
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	•			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
			8		
9	Sponsoring organizations maintaining donor advised funds.		_		
a			9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	ا مدا			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
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:	11a			
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	i ia			
b	amounts due or received from them.)	11b			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	IZU		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.		100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
_	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the constitution and the constitution of t	100	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
			F	000	(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 on 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 87			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	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 arrangement with 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 its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	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, and 990-T (Section 501(c)(3):	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 on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ROBERT CORDES, VP OF FINANCE - 312-726-3860			
	180 N. STETSON AVENUE, NO. 1400, CHICAGO, IL 60601			

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.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) IVO DAALDER	40.00							F22 071	0	106 606	
PRESIDENT	2 00	Х		Х				533,271.	0.	106,626.	
(2) SAMUEL C. SCOTT III	2.00	. ,		37					_	•	
CO-CHAIR (3) LEAH JOY ZELL	2 00	Х		Х				0.	0.	0.	
(3) LEAH JOY ZELL CO-CHAIR	2.00	Х		х				0.	0.	0.	
(4) LOUIS SUSMAN	2.00	Λ		Λ				0.	0.	0.	
VICE CHAIR	2.00	Х		Х				0.	0.	0.	
(5) SHIRLEY RYAN	2.00	Λ		Λ				0.	<u></u>	0 •	
VICE CHAIR	2.00	х		Х				0.	0.	0.	
(6) JOHN MANLEY	2.00							•	•	•	
VICE CHAIR	2.00	х		х				0.	0.	0.	
(7) MICHAEL MOSKOW	2.00	<u> </u>									
VICE CHAIR		Х		х				0.	0.	0.	
(8) DOUGLAS DOETSCH	2.00									<u>_</u>	
SECRETARY		Х		х				0.	0.	0.	
(9) LESTER CROWN	2.00										
CHAIR EMERITUS		Х		Х				0.	0.	0.	
(10) JOHN ETTELSON	2.00										
TREASURER		Х		Х				0.	0.	0.	
(11) EDUARDO ALVAREZ	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(12) MICHAEL AMIRIDIS	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(13) P. JAMES BRADY	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(14) BRUCE BRAUN	1.00	1									
BOARD MEMBER		Х					1	0.	0.	0.	
(15) GREG BROWN	1.00								_	_	
BOARD MEMBER	4 00	Х				_	-	0.	0.	0.	
(16) FRANCIE COMER	1.00								_	_	
BOARD MEMBER	1 00	Х				_	<u> </u>	0.	0.	0.	
(17) DONALD COOKE	1.00	٦,							_	_	
BOARD MEMBER		Х						0.	0.	0 • Form 990 (2019)	

36-2181969 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 Estimated Reportable (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 organizations ndividual trustee or director the 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) RICHARD M. COOPER 1.00 BOARD MEMBER Х 0. 0. 0. (19) ELLEN COSTELLO 1.00 X 0. 0 . 0. BOARD MEMBER (20) WILLIAM DALEY 1.00 BOARD MEMBER Х 0 0. 0. (21) JOHN DEBLASIO 1.00 BOARD MEMBER X 0. 0. 1.00 (22) MARILYN DIAMOND BOARD MEMBER Х 0. 0. 0. 1.00 (23) CRAIG DUCHOSSOIS BOARD MEMBER Х 0. 0. 0. (24) RICHARD EDELMAN 1.00 Х 0. 0. BOARD MEMBER 0 1.00 (25) RICARDO ESTRADA 0. BOARD MEMBER 0. 0. (26) CHARLES EVANS 1.00 BOARD MEMBER n 0. 533,271. 106,626. 0. 1b Subtotal 1,381,548. 169,805. Total from continuation sheets to Part VII, Section A 276,431. 1,914,819. 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 11 compensation from the organization Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on 3 Х 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)	(B)	(C)
Name and business address	Description of services	Compensation
AGENCY EA	LOGISTICS CONSULTING	
311 W. WALTON ST., CHICAGO, IL 60610	FOR 2019 CHICAGO FO	385,980.
COMMUNITY COUNSELLING SERVICE, 527 MADISON	CONSULTING FOR	
AVENUE, 5TH FLOOR, NEW YORK, NY 10022	FUNDRAISING CAMPAIGN	304,500.
CATHERINE BERTINI	CONSULTING ON GLOBAL	
84 S. MAIN STREET, HOMER, NY 13077	FOOD AND AGRICULTUR	129,000.
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

- 1711	ICAGO COUN								36-218	1969
Part VII Section A. Officers, Directors	s, Trustees, Key Er	nplo	yee	s, an	nd H	lighe	st (Compensated Employe	es (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi	tion			Reportable	Reportable	Estimated
	hours	(cl	neck	all t	hat	appl	y)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				empl		organization	(W-2/1099-MISC)	from the
	hours for	ord	ee			sated		(W-2/1099-MISC)		organization
	related organizations	nstee.	trus		e e	n ben				and related organizations
	below	dualt	tiona		oldu	stcor	_			Organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) RAJ FERNANDO	1.00	1								
BOARD MEMBER		Х						0.	0.	0.
(28) PAUL FINNEGAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(29) MICHAEL FROY	1.00									
BOARD MEMBER		Х	Щ					0.	0.	0.
(30) XUAN FU	1.00									
BOARD MEMBER	1 22	Х						0.	0.	0.
(31) CHRISTOPHER GALVIN	1.00	ļ							•	
BOARD MEMBER	1 00	Х						0.	0.	0.
(32) ROBERT GIBBS	1.00							_	0	0
BOARD MEMBER (33) KAREN GRAY-KREHBIEL	1.00	Х						0.	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0.
(34) CARYN HARRIS	1.00	_						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(35) BRETT HART	1.00							0.	0.	0 •
BOARD MEMBER	1.00	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	1.00	Х						0.	0.	0.
(42) KIMBERLY KEYWELL	1.00	\ 							_	_
BOARD MEMBER	1 00	Х	\vdash					0.	0.	0.
(43) BECKY KNIGHT	1.00	₹.							_	_
BOARD MEMBER (44) STEVEN KOCH	1 00	Х	\vdash		-			0.	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0.
(45) SAJAL KOHLI	1.00		\vdash		-	\vdash		U •	U •	U .
BOARD MEMBER	1.00	Х						0.	0.	0.
(46) ROBERT LIVINGSTON	1.00	-22	\vdash					•	0.	0.
BOARD MEMBER	1.00	х						0.	0.	0.
									V •	

Form 990 THE CHICA									36-218	1909
Part VII Section A. Officers, Directors, Tru	ıstees, 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	-				loyee		the	organizations	compensation
	(list any hours for	lirecto				emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	stee			satec		(88-2/1099-181130)		and related
	organizations	truste	al trus		yee	m per				organizations
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er			3
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(47) JOHN MADIGAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(48) CRAIG MARTIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(49) DORRI MCWHORTER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(50) LEO MELAMED	1.00									
BOARD MEMBER		Х						0.	0.	0.
(51) CHARLES MOORE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(52) GREG MORRIS	1.00	1						_		
BOARD MEMBER		Х						0.	0.	0 .
(53) SUSAN E. MORRISON	1.00	1						_		
BOARD MEMBER		Х						0.	0.	0 .
(54) CLARE MUNANA	1.00	ļ								•
BOARD MEMBER	1 00	Х						0.	0.	0 .
(55) JEFFREY NEAL	1.00								_	•
BOARD MEMBER	1 00	Х						0.	0.	0 .
(56) PIN NI	1.00	٠,,							_	0
BOARD MEMBER	1 00	Х						0.	0.	0 .
(57) OLUFUNMILAYO OLOPADE	1.00	. ,						_	_	0
BOARD MEMBER	1 00	Х						0.	0.	0 .
(58) WILLIAM OSBORN	1.00	х						0.	0.	0
BOARD MEMBER (59) DOUGLAS PERTZ	1.00	Δ						0.	0.	0 .
BOARD MEMBER	1.00	Х						0.	0.	0 .
(60) RICHARD PORTER	1.00	Δ						0.	0.	0 (
BOARD MEMBER	1.00	Х						0.	0.	0 .
(61) JOSE LUIS PRADO	1.00	22							0.	0 (
BOARD MEMBER	1.00	Х						0.	0.	0 .
(62) ANNE PRAMAGGIORE	1.00							•	•	
BOARD MEMBER		Х						0.	0.	0 .
(63) QUINTIN PRIMO III	1.00							· ·	•	
BOARD MEMBER		х						0.	0.	0 .
(64) MARGOT PRITZKER	1.00	<u> </u>								
BOARD MEMBER		х						0.	0.	0.
(65) RAGHURAM RAJAN	1.00									
BOARD MEMBER		Х						0.	0.	0 .
(66) DAVID REYES	1.00									
		Х	i l	ı I	i l	ı	Ì	0.	0.	0.

	AGO COUN									1969
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Posi	ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all that apply)			y)	compensation	compensation	amount of
	per					as a		from	from related	other
	week (list any	tor				Highest compensated employee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	or directo				ad em		(W-2/1099-MISC)	(VV 2/ 1033 WIIGO)	organization
	related	tee or	ıstee			ensate		(** = * * * * * * * * * * * * * * * * *		and related
	organizations	Itrus	nal trı		loyee	om pe				organizations
	below	Individual trustee	Institutional trustee	Officer	Key employee	hest (Former			
	line)	pul	lns	#0	Key	Hig	For			
(67) LARRY RICHMAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(68) E. SCOTT SANTI	1.00									
BOARD MEMBER	1 00	X						0.	0.	0.
(69) JENNIFER SCANLON	1.00									
BOARD MEMBER	1 00	Х						0.	0.	0.
(70) MORTON SCHAPIRO	1.00								•	•
BOARD MEMBER	1 00	Х	\vdash					0.	0.	0.
(71) PAUL SCHICKLER	1.00	77						,	•	_
BOARD MEMBER	1 00	Х						0.	0.	0.
(72) PAMELA SCHOLL	1.00	7.7						_	0	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(73) ALEJANDRO SILVA	1.00	77						_	0	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(74) ADELE SIMMONS	1.00	х						0.	0	0
BOARD MEMBER (75) MAURICE SMITH	1.00							0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(76) JAMES SPRAYREGEN	1.00	_						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(77) GLENN TILTON	2.00	21						0.	0.	.
CHAIR EMERITUS	2.00	Х		Х				0.	0.	0.
(78) KAY TORSHEN	1.00	21						0.	0.	.
BOARD MEMBER	1.00	Х						0.	0.	0.
(79) FABRIZIO VALENTINI	1.00								0.1	
BOARD MEMBER		Х						0.	0.	0.
(80) DAVID VITALE	1.00							•	•	
BOARD MEMBER		Х						0.	0.	0.
(81) FREDERICK WADDELL	1.00							-	-	
BOARD MEMBER		Х						0.	0.	0.
(82) ALEX WASHINGTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(83) MICHAEL WERNER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(84) ERIC WHITAKER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(85) KEITH WILLIAMS	1.00									
BOARD MEMBER		Х						0.	0.	0.
	1.00									
(86) TOM WYLER	1.00									

Form 990	THE CHIC	AGO COUN	<u>ICI</u>	L	ON	G	LO	BA	L AFFAIRS	36-218	1969
Part VII Se	ection A. Officers, Directors, Tr	ustees, Key En	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
	(A)	(B)				C)			(D)	(E)	(F)
	Name and title	Average			Pos				Reportable	Reportable	Estimated
		hours	(с	heck	all t	that	арр	ly)	compensation	compensation	amount of
		per							from	from related	other
		week	_				oyee		the	organizations	compensation
		(list any hours for	irecto				emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		related	e or c	stee			satec		(88-2/1099-88130)		and related
		organizations	Individual trustee or director	nstitutional trustee		yee	Highest compensated employee				organizations
		below	idual	tution	er	Key employee	est co	ıer			
		line)	Indi	Insti	Officer	Key	High	Former			
(87) ROBERT	ZIMMER	1.00									
BOARD MEMBE	ER .		Х						0.	0.	0.
(88) JENNIF	ER CIZNER	40.00									
CHIEF OPERA	ATING OFFICER					Х			237,787.	0.	24,730.
(89) ROBERT	CORDES	40.00									
VP, FINANCE						Х			197,347.	0.	27,573.
(90) BRIAN		40.00									
VP, STUDIES						Х			204,887.	0.	22,123
	LE HARBISON	40.00									
	DIRECTOR, BCT	40.00					Х		165,925.	0.	20,151
(92) JONATH		40.00							126 400	•	40 500
	RECTOR, PROGRAMS	40.00					Х		136,400.	0.	18,503
(93) SAMANT		40.00					,,		147 606	0	10 410
	RECTOR, COMMUNICATIONS	40.00					Х		147,626.	0.	19,412
(94) DINA S		40.00							150 154	0	10 240
(95) ROGER	OW, PUBLIC OPINION	40.00					Х		152,154.	0.	19,349.
		40.00	ł				x		120 422	0.	17,964.
SENTOR FELL	LOW, GLOBAL FOOD						^		139,422.	0.	17,304
			ł								
			1								
	II, Section A, line 1c								1,381,548.	Į.	169,805

Form 990 (2019) THE CHI
Part VIII Statement of Revenue

			Check if Schedule O contains a	response (or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
() ()	-	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts				1b					
ij g			Membership dues	1c	1,102,254.				
fts, Ar			Fundraising events		1,102,254.				
ig ig			Related organizations	1d					
ns, Sim			Government grants (contributions)	1e					
utio er (All other contributions, gifts, grants, and		10 200 100				
현된			similar amounts not included above	1f	10,322,180.				
ont od (_	Noncash contributions included in lines 1a-1f	1g \$		44 404 404			
<u>0 g</u>		h	Total. Add lines 1a-1f			11,424,434.			
					Business Code				
Se			LEADERSHIP STUDY MISSION		900099	384,935.	384,935.		
e vi		-	EMERGING LEADERS PARTICIPATI	ON FE	900099	141,500.	141,500.		
Se		-	ADMISSION FEES		900099	76,880.	76,880.		
Program Service Revenue		d	OTHER EARNED INCOME		900099	824.	824.		
ю Н		е							
P.		f	All other program service revenue						
		g	Total. Add lines 2a-2f			604,139.			
	3		Investment income (including divider	nds, intere	st, and				
			other similar amounts)		>	425,053.			425,053.
	4		Income from investment of tax-exem						
	5		Royalties						
				Real	(ii) Personal				
	6	а	Gross rents 6a 1	01,541.					
			Less: rental expenses 6b	0.					
			· · · · · · · · · · · · · · · · · · ·	.01,541.					
			Net rental income or (loss)	•		101,541.	101,541.		
			` ' 	ecurities	(ii) Other	,	,		
	•			99,387.					
			Less: cost or other basis	, -					
Φ				32,992.					
her Revenue				33,605.					
eve			Net gain or (loss)			-33,605.			-33,605.
<u>بر</u> ۳			Gross income from fundraising events (n			33,003.			33,003.
	0	а	including \$ 1,102,254.						
Ò				· I					
			contributions reported on line 1c). Se		143,775.				
			Part IV, line 18		143,775.				
			Less: direct expenses			0.			
			Net income or (loss) from fundraising			0.			
	9	а	Gross income from gaming activities	I .					
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming act						
	10		Gross sales of inventory, less returns	I .					
			and allowances						
			Less: cost of goods sold						
_		С	Net income or (loss) from sales of inv	entory					
ဟ					Business Code				
on e	11	а							
ane		b							
Miscellaneous Revenue		С							
Ais		d	All other revenue						
		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions			12,521,562.	705,680.	0.	391,448.

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

_	Check if Schedule O contains a respons	se or note to any line in t (A)	his Part IX(B)	(C)	<u>L</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) 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				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	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,				
	trustees, and key employees	516,411.	219,127.	196,790.	100,494
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,456,776.	2,019,750.	151,854.	285,172
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	205,217.	152,730.	23,261.	29,226 32,361
9	Other employee benefits	227,235.	169,117.	25,757.	32,361
10	Payroll taxes	214,383.	159,552.	24,300.	30,531
11	Fees for services (nonemployees):				
а	Management				
b	Legal	8,769.	7,233.	1,536.	
С	Accounting	21,000.		21,000.	
d	, , , , , , , , , , , , , , , , , , , ,				
е	, F	40.500		10 500	
f	Investment management fees	13,738.		13,738.	
g	` '	E 6 1 E 0 0	200 055	15 553	014 010
	column (A) amount, list line 11g expenses on Sch 0.)	561,728.	329,957.	17,553.	214,218
12	Advertising and promotion	115,803.	106,607.	10 626	9,196
13	Office expenses	191,105.	166,484.	10,636.	13,985
14	Information technology	348,494.	310,769.	19,688.	18,037
15	Royalties	711111	E71 061	72 005	60 175
16	Occupancy	714,141.	571,061.	73,905.	69,175
17	Travel	566,796.	555,101.	8,978.	2,717
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	256 262	250 177	70 017	10 160
19	Conferences, conventions, and meetings	356,362.	258,177.	79,017.	19,168
20	Interest				
21	Payments to affiliates	278,242.	219,108.	29,240.	29,894
22	Depreciation, depletion, and amortization	26,901.	419,100.	26,901.	49,094
23		20,901.		20,901.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OMITTE TURENCES	19,862.	21,761.	-11,207.	9,308
b			,		2,200
C					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,852,963.	5,276,534.	712,947.	863,482
<u>26</u>	Joint costs. Complete this line only if the organization	.,,	.,,	,	,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

ı aı	IL A	Dalance Sheet					
		Check if Schedule O contains a response or note	e to an	y 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			2,097,292.	2	3,177,118.
	3	Pledges and grants receivable, net		10,886,181.	3	14,473,797.	
	4	Accounts receivable, net			39,867.	4	32,745.
	5	Loans and other receivables from any current or	former	officer, director,			
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9	Prepaid expenses and deferred charges			917,641.	9	742,491.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,369,800.	2 2 2 2 2 2 2		
	b	Less: accumulated depreciation		2,195,786.	3,267,219.	10c	3,174,014.
	11	Investments - publicly traded securities		10 000 000	11	00 000 100	
	12	Investments - other securities. See Part IV, line 1	18,972,708.	12	20,269,483.		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets	405 604	14	400 100		
	15	Other assets. See Part IV, line 11	405,684.	15	480,109.		
	16	Total assets. Add lines 1 through 15 (must equa	36,586,592.	16	42,349,757.		
	17	Accounts payable and accrued expenses	806,788.	17	234,171.		
	18	Grants payable	161 100	18	205 606		
	19	Deferred revenue			464,402.	19	205,606.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
ies	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst				00	
E.		controlled entity or family member of any of thes				22	
	23 24	Secured mortgages and notes payable to unrela Unsecured notes and loans payable to unrelated		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pay				24	
	23	parties, and other liabilities not included on lines					
		of Schedule D	17-24)	. Complete Fait X	3,340,908.	25	3,348,007.
	26	Total liabilities. Add lines 17 through 25			4,612,098.	26	3,787,784.
	20	Organizations that follow FASB ASC 958, che			1,011,0300	20	3770777020
es		and complete lines 27, 28, 32, and 33.					
SI C	27				11,567,320.	27	12,369,834.
3ak	28	Net assets with donor restrictions			20,407,174.	28	26,192,139.
둳		Organizations that do not follow FASB ASC 9					, ,
ᇳ		and complete lines 29 through 33.	,				
ğ	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			31,974,494.	32	38,561,973.
_	33				36,586,592.	33	42,349,757.

Pai	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		, 52			
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	, 85	2,9	63.	
3	Revenue less expenses. Subtract line 2 from line 1	3	5	,66	8,5	99.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	31	31,974,494.			
5	Net unrealized gains (losses) on investments	5		91	8,8	80.	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8							
9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	38	,56	1,9	73.	
Pai	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 O.							
2a						X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	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	X		
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.							
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit							
	Act and OMB Circular A-133?			3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			
				Form	990	(2019)	

932012 01-20-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

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. 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). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 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

fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization'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 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 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) % 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2019

932022 09-25-19

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
		13117401.	15316141.	19343518.	22096678.	10247180.	80120918.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	835,350.	922,116.	1077506.	780,006.	254,139.	3869117.
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						
	The value of services or facilities furnished by a governmental unit to the organization without charge	12050551	1.6020055	00401004	0.000.004	10501310	03000035
	Total. Add lines 1 through 5	13952751.	16238257.	20421024.	22876684.	10201319.	83990035.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	3658521.	3018358.	4904235.	3390897.	2673830.	17645841.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	: Add lines 7a and 7b	3658521.	3018358.	4904235.	3390897.	2673830.	17645841.
	Public support. (Subtract line 7c from line 6.)						66344194.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	13952751.	16238257.	20421024.		10501319.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	307,819.	595,653.	1134208.	1143502.	492,989.	3674171.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	307,819.	595,653.	1134208.	1143502.	492,989.	3674171.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	14260570.	16833910.	21555232.	24020186.	10994308.	87664206.
14	First five years. If the Form 990 is for check this box and stop here	r the organization's			•		·
Sec	ction C. Computation of Publi						
	Public support percentage for 2019 (I			column (f))		15	75.68 %
	Public support percentage from 2018					16	77.46 %
	ction D. Computation of Inves					10	7,020 70
	Investment income percentage for 20			ne 13 column (fl)		17	4.19 %
18	Investment income percentage from			(1)		18	3.45 %
	33 1/3% support tests - 2019. If the						,
198	more than 33 1/3%, check this box ar						7 IS HOL ▼ X
b	33 1/3% support tests - 2018. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a l	box on line 14, 19:	a, or 19b, check th	us box and see ins	tructions	

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		
3a		
3b		
- OD		
3с		
4a		
4b		
12		
4-		
4c		
5a		
Ja		
5b		
5c		
6		
7		
8		
9a		
-		
9b		
9с		
10a		
10b		

Schedule A (Form 990 or 990-EZ) 2019 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Page 6

Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 (explain in F	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must of	complete Sec	tions A through E.	
Sect	tion 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		
	tion 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		
	Total (add lines 1a, 1b, and 1c)	1d		
	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	tion 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-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

36-2181969 Page 7 Schedule A (Form 990 or 990-EZ) 2019 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 2019 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-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2019 **a** From 2014 **b** From 2015 **c** From 2016 **d** From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c.

Schedule A (Form 990 or 990-EZ) 2019

8 Breakdown of line 7:
 a Excess from 2015
 b Excess from 2016
 c Excess from 2017
 d Excess from 2018
 e Excess from 2019

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			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
	Total number at and of year	(a) Donor advised failes	(b) I unus and other accounts
1	Total number at end of year		
2			
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	witing that the assets hald in dance add	isod funda
5	Did the organization inform all donors and donor advisors in w	_	
6	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
Par	impermissible private benefit? t II Conservation Easements. Complete if the organization		
			o, Fait IV, lille 7.
1	Purpose(s) of conservation easements held by the organization	`	of a label of all the bound of and and
	Preservation of land for public use (for example, recreati		of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the for	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic structure of the conservation can be a certified historic structure.		
d	Number of conservation easements included in (c) acquired af	,	
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by t	ne organization during the tax
	year >		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period		
_	violations, and enforcement of the conservation easements it I		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcing co	riservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing concer	vation accoments during the year
7		ing of violations, and emorcing conser	valion easements during the year
8	▶ \$ Does each conservation easement reported on line 2(d) above	a action, the requirements of section 1	70/h)/41/P)/i)
0		-	
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation		
3	balance sheet, and include, if applicable, the text of the footnot	·	
	organization's accounting for conservation easements.	•	ments that describes the
Par	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" on Form 9		
	If the organization elected, as permitted under FASB ASC 958		t and halance sheet works
	of art, historical treasures, or other similar assets held for publ	, 1	
	service, provide in Part XIII the text of the footnote to its finance	, ,	•
b	If the organization elected, as permitted under FASB ASC 958		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	omination, addedicti, of receasor in the	raneral de public del vice,
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	400 A		. .
2	If the organization received or held works of art, historical trea		cial gain, provide
_	the following amounts required to be reported under FASB AS		3, p. 01/100
а	Revenue included on Form 990, Part VIII, line 1	-	> \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2019

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		CAGO COUNCI			0' 'I -	36-21			age 2
Pai	t III Organizations Maintaining C						(contin	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	following that make	significant	use of its			
	collection items (check all that apply):								
а	Public exhibition	d		hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's exe	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other simila	ar assets		_		_
	to be sold to raise funds rather than to be ma						Yes		_ No
Par	t IV Escrow and Custodial Arrang		ete if the organizatio	n answered "Yes" o	n Form 990	0, Part IV,	line 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi					_	_		_
	on Form 990, Part X?					L	Yes		_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:			1			
							Amoun	t	
	Beginning balance								
	Additions during the year				I				
е	Distributions during the year				I				
f	Ending balance						_		
	Did the organization include an amount on Fo				•	L	_ Yes		∐ No
	If "Yes," explain the arrangement in Part XIII.								
Pai	t V Endowment Funds. Complete i						T		
		(a) Current year	(b) Prior year	(c) Two years back		years back			
	Beginning of year balance	23,948,248.	17,027,419.	· · · · · ·	'	033,649.	+	<u> </u>	372.
	Contributions	598,194.	8,075,624.	· · · · · ·	+	947,662.		<u> </u>	421.
	Net investment earnings, gains, and losses	1,193,599.	533,774.	1,059,200.	1,6	577,070.		-98,	809.
	Grants or scholarships								
е	Other expenditures for facilities	400 040	1 664 500	1 000 001	, ,			000	0.00
	and programs	428,040.	1,664,790.		1	382,480.			000.
f	Administrative expenses	05 210 001	23,779.	· · · · · · · · · · · · · · · · · · ·	+	17,988.	1.0		335.
g	End of year balance	25,312,001.	23,948,248.		13,2	257,913.	12	,033,	649.
2	Provide the estimated percentage of the curr) held as:					
	Board designated or quasi-endowment	58.30	_%						
	Permanent endowment ► 41.70	%							
С		%							
	The percentages on lines 2a, 2b, and 2c sho	•							
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for	the organiz	ation	1		
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza						3b		
Do:	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm								
	Complete if the organization answered		<u> </u>	i		.			
	Description of property	(a) Cost or of basis (investment)	, , ,	' '	Accumulat epreciation	I	(d) Boo	k valu	е
1a	Land								
	Buildings								
	Leasehold improvements		2,58	1,114.	599,4		1,98		
	Equipment	I	2,78	8,686. 1,	596,3	78.	1,19	2,3	08.
	Other								
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part)	X. column (B), line 1	0c.)		. ▶	3,17	4,0	14.

3,174,014. Schedule D (Form 990) 2019

Schedule D	(Form 990) 2019) THE	CHICAGO	COUNCIL	on	GLO
Part VII	Investment	s - Other Se	ecurities.			

	Complete if the organization answered "Yes"	on Form 990, Part IV, line			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	n: Cost or end	-of-year market value
30 Other	(1) Financial derivatives				
All MUTUAL FUNDS 20,269,483. END-OF-YEAR MARKET VALUE	(2) Closely held equity interests				
Signature State	(3) Other				
CD CD CD CD CD CD CD CD	(A) MUTUAL FUNDS	20,269,483.	END-OF-YEAR	MARKET	VALUE
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Fo	(B)				
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Fo					
(E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F					
Fig. Go.					
G					
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 13.					
Total. (Col. (b) must equal Form 900, Part X, col. (B) line 12.)					
New Street Program Related.		20.269.483.			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (d) Method of valuation: Cost or end-of-year market value (e) Method of valuation: Cost or end-of-year market value (f) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end		20/203/2001			
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g		on Form 000 Part IV line :	110 Soo Form 000 Part V	lino 13	
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(4) (5) (6) (7) (8) (9) Iotal. (Col. (b) must equal Form 990, Part X, col. (8) line 13.) ▶ Part X Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (b) Book value (c) Book value (d) Book valu					
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(6) (7) (8) (9) (9) (10tol. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) DEFERRED COMPENSATION PLAN (3) LIABILITIES 480, 109. (4) DEFERRED RENT 388, 955. (5) LEASE INCENTIVE LIABILITY 2, 478, 943. (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (7) (8) (9) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (1) (2) (3) (4) (4) (5) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1					
(7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶					
(8) (9) (9) (7) (8) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10					
Column					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) DEFERRED COMPENSATION PLAN (3) LIABILITIES (480, 109. (4) DEFERRED RENT (388, 955. (5) LEASE INCENTIVE LIABILITY (2,478,943. (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 3,348,007. 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (1) Federal income taxes (2) DEFERRED COMPENSATION PLAN (3) LIABILITIES (480, 109. (4) DEFERRED RENT (388, 955. (5) LEASE INCENTIVE LIABILITY (2,478,943. (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 3 3 348, 007. 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (1) Federal income taxes (2) DEFERRED COMPENSATION PLAN (3) LIABILITIES (480, 109. (4) DEFERRED RENT (5) LEASE INCENTIVE LIABILITY (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (10) Federal income taxes (11) Federal income taxes (12) DEFERRED RENT (13) LEASE INCENTIVE LIABILITY (14) DEFERRED RENT (15) LEASE INCENTIVE LIABILITY (16) Substituting the part X and the part X a					
(a) Description (b) Book value (1)					
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X. col. (B) line 15) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) DEFERRED COMPENSATION PLAN (3) LIABILITIES (480, 109. (4) DEFERRED RENT (388, 955. (5) LEASE INCENTIVE LIABILITY (2,478,943. (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X. col. (B) line 25.) Protal. (Column (b) must equal Form 990, Part X. col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			11d. See Form 990, Part X,	line 15.	
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					2 2/0 007
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932053 10-02-19

Schedule D (Form 990) 2019

JOI ICCOUNT D	(1 01111 330	72013		0111 01100	00011011	<u></u>	0_0_		
Part XI	Recond	ciliation	of Reve	nue ner Aud	ited Financia	al Sta	tements V	With Revenue	ner R

га	neconclination of nevertie per Addited Financial Statem	iento Mithi	nevenue per nei	uiii.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	13,570,479.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	918,880.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	143,775.		
е	Add lines 2a through 2d			2e	1,062,655.
3	Subtract line 2e from line 1			3	12,507,824.
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			
b	Other (Describe in Part XIII.)	4b	13,738.		
С	Add lines 4a and 4b			4c	13,738. 12,521,562.
5			<u></u>	5	12,521,562.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		Expenses per R	etur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a			
1	Total expenses and losses per audited financial statements			1	6,983,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а					
b	Prior year adjustments	2b			
С					
d	Other (Describe in Part XIII.)		143,775.		
е	Add lines 2a through 2d			2e	143,775.
3	Subtract line 2e from line 1			3	6,839,225.
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	13,738.		
С	Add lines 4a and 4b			4c	13,738.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,852,963.
	rt XIII Supplemental Information.				

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

PART V, LINE 4:

TO PROVIDE FUNDING FOR BOTH CURRENT AND FUTURE PROGRAMS AND INITIATIVES.

PART X, LINE 2:

THE COUNCIL IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE COUNCIL'S MANAGEMENT BELIEVES THAT THERE WAS NO UNRELATED BUSINESS INCOME NOR UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED JUNE 30, 2018, AND ACCORDINGLY, THE FINANCIAL STATEMENTS CONTAIN NO PROVISIONS FOR INCOME TAXES. THE COUNCIL'S FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER IT IS FILED.

Schedule D (Form 990) 2019

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.

2019
Open to Public Inspection

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number

36-2181969

Pai	rt I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organization answered "Y	es" on						
	Form 990, Part IV, line 14b.											
1	For grantmakers. Doe	s the organization	n maintain record	ds to substantiate the amount of its gra	ants and other assistance,							
	the grantees' eligibility t	or the grants or a	assistance, and t	he selection criteria used to award the	grants or assistance? X	Yes No						
2	For grantmakers. Desc	cribe in Part V the	e organization's ¡	procedures for monitoring the use of its	s grants and other assistance outsi	de the						
	United States.											
_3	Activities per Region. (T	he following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)							
	(a) Region	(b) Number of	(c) Number of	, ,	, , , , , , , , , , , , , , , , , , , ,	(f) Total						
		offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and						
		in the region	independent	gram services, investments, grants to		investments						
			contractors in the region	recipients located in the region)	of service(s) in the region	in the region						
ETHI	OPIA & RWANDA	0	1	PROGRAM SERVICES	LEADERSHIP STUDY MISSION	417,896.						
					EMERGING LEADERS STUDY							
SOUT	H KOREA	0	3	PROGRAM SERVICES	MISSION	57,383.						
						,						
					ASIAN SECURITY							
SOUT	H KOREA	0	2	 PROGRAM SERVICES	TRILATERAL PROJECT	40,277.						
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10,2//.						

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

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Schedule F (Form 990) 2019

515,556.

515,556.

and 3b)

3 a Subtotalb Total from continuation

sheets to Part I
c Totals (add lines 3a

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
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)	
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									

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 2019 GUS HART VISITING CENTRAL AMERICA FELLOWSHIP AWARD AND THE CARIBBEAN 10,000. WIRE TRANSFER 0. 1

Schedule F (Form 990) 2019 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) 2019

932075 10-12-19 Schedule F (Form 990) 2019

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

	organizatio	

Employer identification number

36-2181969 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2019

Schedule G (Form 990 or 990-EZ) 2019 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events GLOBAL NONE (add col. (a) through LEADERSHIP A col. (c)) (event type) (total number) (event type) 1,246,029. 1,246,029. Gross receipts 1,102,254. 1,102,254. 2 Less: Contributions 143,775. **3** Gross income (line 1 minus line 2) 143,775. 4 Cash prizes 5 Noncash prizes Direct Expenses 14,518. 14,518. 6 Rent/facility costs 52,274. 52,274. 7 Food and beverages 1,500. 1,500. 8 Entertainment 75,483. 75,483. Other direct expenses **10** Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2019

932082 09-11-19

Schedule G	i (Form 990 or 990-EZ)	\mathtt{THE}	CHICAGO	COUNCIL	on	GLOBAL	AFFAIRS	36-2181969	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation	(continued)						
			, , , , , , , , , , , , , , , , , , , ,						
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-									

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.

2019

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number 36-2181969

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 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 Х reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, Х trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee 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: Х a Receive a severance payment or change-of-control payment? **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? Х 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a X Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 6 contingent on the net earnings of: X a The organization? 6a X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Х 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2019

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-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) IVO DAALDER	(i)	454,093.	79,178.	0.	94,500.	12,126.	639,897.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JENNIFER CIZNER	(i)	212,787.	25,000.	0.	16,242.	8,488.	262,517.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT CORDES	(i)	187,347.	10,000.	0.	15,786.	11,787.	224,920.	0.
VP, FINANCE AND ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BRIAN HANSON	(i)	189,887.	15,000.	0.	14,491.	7,632.	227,010.	0.
VP, STUDIES	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DANIELLE HARBISON	(i)	155,925.	10,000.	0.	11,839.	8,312.	186,076.	0.
EXECUTIVE DIRECTOR, BCT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JONATHAN MACHA	(i)	128,900.	7,500.	0.	10,365.	8,138.	154,903.	0.
MANAGING DIRECTOR, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SAMANTHA MONROE	(i)	137,626.	10,000.	0.	11,585.	7,827.	167,038.	0.
MANAGING DIRECTOR, COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DINA SMELTZ	(i)	145,754.	6,400.	0.	11,106.	8,243.	171,503.	0.
SENIOR FELLOW, PUBLIC OPINION	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ROGER THUROW	(i)	138,422.	1,000.	0.	7,386.	10,578.	157,386.	0.
SENIOR FELLOW, GLOBAL FOOD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 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 \$48,000 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.

Open to Public

OMB No. 1545-0047

Inspection

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:

BLACK CHICAGO TOMORROW: A 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 \$ 236,519. 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 Schedule O (Form 990 or 990-EZ) (2019) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

932211 09-06-19

Name of the organization THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	Employer identification number 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	SATION SURVEYS
AND DATA FROM COMPARABLE ORGANIZATIONS.	
FORM 990, PART VI, SECTION C, LINE 18:	
FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST A	ND ON THE
COUNCIL'S WEBSITE.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINAN	CIAL STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	
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	D FOR THE
SELECTION OF AN INDEPENDENT AUDITOR. THERE WAS NO CHANGE F	ROM THE PRIOR
FISCAL YEAR.	
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