Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For the	\pm 2023 calendar year, or tax year beginning \pm JUL \pm 1 , \pm 2023 and ending	, JU	N 30,	2024	
В	Check if applicable	C Name of organization	ı	D Employer	identific	cation number
	Addres	Foundation for Portland Public Schools				
	Name change			22-3	1797	38
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	suite F	E Telephone		
	Final return/	353 Cumberland Ave		207-		
	termin- ated			G Gross receipts		1433202.
	Ameno return		_ [i	H(a) Is this a	group re	eturn
	Application	F Name and address of principal officer: Marie Mueller		for subo		
	pendin	same as C above		H(b) Are all sub		
Τ.	Tax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," a	attach a	list. See instructions
J	Websit	e: www.foundationforpps.org	ı	H(c) Group e	xemptio	n number
K	Form of		Year of	formation: 1	992 N	State of legal domicile: ME
P	art I	Summary				
4	1	Briefly describe the organization's mission or most significant activities: $\ \underline{ t The \ Miss} $				
ğ		for Portland Public Schools is to be a cataly	yst	for in	crea	sed
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed of n	nore th	nan 25% of its	s net ass	
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)				22
ග	4	Number of independent voting members of the governing body (Part VI, line 1b)				22
es	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)				0
ΞΞ	6	Total number of volunteers (estimate if necessary)				40
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				<u> </u>
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	T	Prior Year		Current Year
		Ocal Stations and annuals (Dad MIII See Als)		1502		1407424.
e	8	Contributions and grants (Part VIII, line 1h)		1304	0.	140/424.
Revenue	9	Program service revenue (Part VIII, line 2g)		7	311.	25778.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			581.	-2940.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1507		1430262.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			712.	1094301.
		Benefits paid to or for members (Part IX, column (A), line 4)		070	0.	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		378	574.	240923.
ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
Expenses	b.	Total fundraising expenses (Part IX, column (D), line 25) 95141.				<u> </u>
ă	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		222	445.	104232.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1477	731.	1439456.
	10	Revenue less expenses. Subtract line 18 from line 12		30	117.	-9194.
Net Assets or	ű,		Begi	nning of Curre	nt Year	End of Year
sets	20	Total assets (Part X, line 16)		1287	145.	1302697.
ASS	21	Total liabilities (Part X, line 26)			838.	76584.
	22	Net assets or fund balances. Subtract line 21 from line 20		1232	307.	1226113.
	art II	Signature Block				
	-	lties of perjury, I declare that I have examined this return, including accompanying schedules and sta			-	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	oarer ha	as any knowled	ge.	
		Signature of officer		I Date		
Sig		ŭ		Date		
Hei	re	Marie Mueller, President Type or print name and title				
		District True appearance District Annual Control of the Control of	Da	te	Check	PTIN
Pai	. П	Print/Type preparer's name Peter Montano Preparer's Pth Montano		1/7/24	if	501000043
	u parer	Firm's name PGM LLC		Firm's	self-employe	2-4812448
	Only	Firm's address 319 Main Street		FIIIII S	CIN U	<u> </u>
036	Jilly	Biddeford, ME 04005	Phone	no (2	07) 415-5714	
Ma	v the IF	RS discuss this return with the preparer shown above? See instructions		I I HOHE	, 110. (🚨	X Yes No

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: The Mission of the Foundation for Portland Public Schools is to be a	
	catalyst for increased educational opportunities, achievement, and	
	equity for all Portland Public Schools students and staff.	
	equity for all foldiana fabile benedib beautiful and beautiful	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	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 expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1167116. including grants of \$1094301.) (Revenue \$)
	The Foundation for Portland Public Schools grants funds directly to the	
	Portland Public Schools and/or to organizations, individuals, or to purchase materials for the benefit of the school district. All FPPS	
	funds are meant to address unmet needs of the schools and/or to enhance	
	educational opportunities for present and future students.	
	eddoddional oppolodmiolog for propone and racare beddenost	
4b	(Code:) (Expenses \$)
	(Out	
40	(Code:) (Expenses \$	— '
		—
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1167116.	
	Form 990 (2023)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		х
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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
·	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	۰		
Ū	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,	ا		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	_		
Ü	,	8		х
9	Schedule D, Part III	ا ا		
Ū	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	۰		
10	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, VII, VII, 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,			
ŭ	Part VI	11a		x
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	٠ــ		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	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	

Form	1990 (2023) Foundation for Portland Public Schools 22-3179	738	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			3,7
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	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	040		
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		24u		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		1
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	, ,	25b		X
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	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? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		X
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 32			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

332004 12-21-23

(gambling) winnings to prize winners?

Form **990** (2023)

O23) Foundation for Portland Public Schools
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								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
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 O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 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 contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_		37					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			Х					
لم	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		Α					
d		7e							
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f							
g	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h							
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_							
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders 11a	4							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	,								
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c	1							
с 14а	Did the appropriation program on the few independence of the few independence of the few years.	14a		Х					
	15 Th C 11 Th C 11 Th C 1 Th C 11 Th C	14b							
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	TU							
.0	excess parachute payment(s) during the year?	15		х					
	If "Yes," see the instructions and file Form 4720, Schedule N.	.5							
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.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

Foundation for Portland Public Schools Form 990 (2023) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 22 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 22 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? Х 14 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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? 16h Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Another's website ___ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

Form **990** (2023)

04101

State the name, address, and telephone number of the person who possesses the organization's books and records

Marnie Morrione - Treasurer - 207-842-4658

353 Cumberland Ave, Portland,

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(do box	(C) 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	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Andrea Weisman Summers	40.00	_						0.7704		22427
Executive Director	0.00		_	Х			-	87791.	0.	30187.
(2) Marie Mueller	2.00	٠,,		,,					_	•
President	2 00	Х		Х				0.	0.	0.
(3) Jane Phelan	2.00	.,		7,7					_	0
Vice President	1 00	Х		Х				0.	0.	0.
(4) Melissa Knoll	1.00	х		х				0.	0.	0.
(5) Marnie Morrione	2.00	^		^				0.	0.	<u> </u>
Treasurer	2.00	х		х				0.	0.	0.
(6) Sheila Adell	1.00	^	\vdash	^				0.	0.	<u></u>
Director	1.00	Х						0.	0.	0.
(7) Jill Botler	1.00							· ·	•	
Director	1.00	х						0.	0.	0.
(8) Nathan Henry	1.00	<u></u>								
Director		Х						0.	0.	0.
(9) Casey McCormack	1.00									
Director		Х						0.	0.	0.
(10) James Murphy	1.00									
Director		Х						0.	0.	0.
(11) Morgan Myer	1.00									
Director		Х						0.	0.	0.
(12) Rachel Sears	1.00									
Director		Х						0.	0.	0.
(13) Sarah Southard	1.00									
Director		Х						0.	0.	0.
(14) Carol Hager	1.00									
Ex-Officio Director		Х						0.	0.	0.
(15) Derek Pierce	1.00]								
Ex-Officio Director	1	Х					<u> </u>	0.	0.	0.
(16) Dr. Ryan Scallon	1.00	1_							_	_
Ex-Officio Director		Х	_			_	<u> </u>	0.	0.	0.
(17) Faysal Hagi	1.00	l								_
Student Member Director		X						0.	0.	0.

Form **990** (2023)

Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	anc	<u>iH t</u>	ghe	st C	compensated Employee	s (continued)				
(A)	(B) (C)							(D)	(E)			(F)	
Name and title	Average	(do		Pos		1 than	one	Reportable	Reportable		Es	stimate	∍d
	hours per	box	, unle	ss per	rson i	is bot	h an	compensation	compensation	ו ו	ar	nount	
	week (list any	—	T		T	T	1	from the	from related organizations		000	other pensa	
	hours for	direct						organization	(W-2/1099-MIS			rom th	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	,		janizat	
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,		_	d relat	
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former				orga	anizati	ons
	line)	Indi	lust	Officer	Key	e Ei	윤						
(18) Emily Paton	1.00												•
Student Member Director	1 00	Х						0.		0.			0.
(19) Jayden Monteiro Rosado	1.00	.,								,			^
Student Member Director	1 00	Х				-		0.		0.			0.
(20) Lisa Page	1.00	.,								_			^
Director		Х				-		0.		0.			0.
		-											
						-				-			
		1											
						-				-			
		-											
						-							
		1											
						+				_			
		1											
		1											
1h Subtotal	L	<u> </u>			<u> </u>			87791.		0.		301	87
1b Subtotal c Total from continuation sheets to Part VI								0.		0.		<u> </u>	0.
d Total (add lines 1b and 1c)								87791.		0.	30187.		
Total number of individuals (including but n										0.01			<u> </u>
compensation from the organization	or minica to th	000	11010	a un	JO V C	, wi	10 10	occived more than \$100,	ood of reportable				0
												Yes	No
3 Did the organization list any former officer,	director, trust	ee. k	cev e	lame	love	e. or	r hic	ahest compensated empl	ovee on				
line 1a? If "Yes," complete Schedule J for s	•		•		•	-	_		•		3		х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150											4		Х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	nplete Schedule	e J f	or su	ıch ı	pers	son					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated inc	depe	nde	nt co	ontra	acto	rs th	hat received more than \$	100,000 of comp	ensat	ion fr	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	ithir	the organization's tax y	ear.				
(A)								(B)		_		C)	
Name and business	address	N	INC	3				Description of s	ervices	C	ompe	nsatio	n
O Tatal mumb an aftinday and and a said to the first of t	a ali i alia l- i -l				. .	"	4		and the an				
2 Total number of independent contractors (in	nciuaing but n	ot III	nited	J [0]	tnos	se IIS n	ied	above) who received mo	ore than				

Form **990** (2023)

Form	n 990	0 (2	Foundation for	Portlar	nd Public S	Schools	22-3179	738 Page 9
Pa								
			Check if Schedule O contains a response or	r note to any line	a in thic Dart VIII			
			Check if Schedule O contains a response of	Thote to any line	(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under
						Tanodon revenue	Daoineos revenae	sections 512 - 514
S. O	1	а	Federated campaigns 1a					
ant			Membership dues 1b					
Gr				43373.				
ts, Ar				1 3373•				
Gif			Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contributions) 1e					
itio		f	All other contributions, gifts, grants, and	0.540.54				
ibu			similar amounts not included above 1f 1	1364051.				
atr d C		g	Noncash contributions included in lines 1a-1f 1g \$	72915.				
a C u		h	Total. Add lines 1a-1f		1407424.			
				Business Code				
Ф	2	а						
vic		b						
ser iue		c						
m S		d						
Program Service Revenue								
ro		e						
т.			All other program service revenue					
			Total. Add lines 2a-2f					
	3		Investment income (including dividends, interes		05550			05550
			other similar amounts)		25778.			25778.
	4		Income from investment of tax-exempt bond pro	oceeds				
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
		d Net rental income or (loss)						
	7		Gross amount from sales of (i) Securities	(ii) Other				
	•	u	assets other than inventory 7a	()				
		h	Less: cost or other basis					
ø.		D						
enne			and sales expenses 7b					
eve.			Gain or (loss) 7c					
Ř			Net gain or (loss)					
Other Rev	8	а	Gross income from fundraising events (not					
ð			including \$ 43373 of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a	0.				
		b	Less: direct expenses 8b	2940.				
			Night in a construction of the second of the		-2940.			-2940.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19					
		h	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold 10b					
		С	Net income or (loss) from sales of inventory					
S			_	Business Code				
Miscellaneous Revenue	11	а					ļ	
ane		b						
eve		С						
Aisc B		d	All other revenue					
		е	Total. Add lines 11a-11d					
	12		Total revenue. See instructions		1430262.	0.	0.	22838.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**)
Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 978372. 978372. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 115929. 115929. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 117978. 28455. 42933. 46590. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 122945. 29654. 44740. 48551. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management Legal 23133. 23133. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 5600. 1680. 7280. column (A), amount, list line 11g expenses on Sch O.) 266. 266. Advertising and promotion 12 9520. 9520. Office expenses 13 10105. 10105. Information technology 14 15 Royalties 24000. 24000. 16 Occupancy 8898. 5942. 2956. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 6067. 6067. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 5349. 1201. 4148. Meals & entertainment Professional developeme 4136. 4136. 3515. 3515. Bank and merchant 1963. 1963. d Discretionary disbursem e All other expenses 1439456. 1167116. 177199. 95141. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form **990** (2023)

if following SOP 98-2 (ASC 958-720)

Check here

Form 990 (2023) Part X Balance Sheet

Par	τX	Balance Sneet				
		Check if Schedule O contains a response or I	note to any line in this Part X		·····	
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	982182.	1	790018	
	2	Savings and temporary cash investments		282439.	2	325571
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		2524.	4	187108
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, su	ostantial contributor, or 35%			
		controlled entity or family member of any of the	nese persons		5	
	6	Loans and other receivables from other disqu	alified persons (as defined			
		under section 4958(f)(1)), and persons describ	oed in section 4958(c)(3)(B)		6	
ပ္သ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
₹	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or othe	r			
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation		10c		
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, lin		12		
	13	Investments - program-related. See Part IV, lir		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must e	qual line 33)		16	1302697
	17	Accounts payable and accrued expenses			17	8177
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
S	22	Loans and other payables to any current or fo				
┋		trustee, key employee, creator or founder, su				
Liabilities		controlled entity or family member of any of the			22	
-	23	Secured mortgages and notes payable to unr			23	
	24	Unsecured notes and loans payable to unrela			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on lin	nes 17-24). Complete Part X	27704		60407
				37784.		68407
4	26	Total liabilities. Add lines 17 through 25		54838.	26	76584
s l		Organizations that follow FASB ASC 958, o	heck here X			
ဥ		and complete lines 27, 28, 32, and 33.		210271		161711
<u>a</u>	27			219371.		164741
Ě	28	Net assets with donor restrictions		1012936.	28	1061372
<u> </u>		Organizations that do not follow FASB ASC	958, check here			
-	00	and complete lines 29 through 33.	d-		00	
) IS	29	Capital stock or trust principal, or current fun			29	
SSE	30	Paid-in or capital surplus, or land, building, or			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			31	1 2 2 6 1 1 2
ž	32	Total net assets or fund balances		1232307.	32	1226113
	33	Total liabilities and net assets/fund balances		1287145.	33	1302697

Par	T XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u> 302</u>					
2	Total expenses (must equal Part IX, column (A), line 25)	2		394					
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>94.</u>				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12	323	07.				
5	5 Net unrealized gains (losses) on investments5								
6	Donated services and use of facilities	6		30	00.				
7	Investment expenses	7							
8	Prior period adjustments	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))								
Par	t XII Financial Statements and Reporting	•							
	Check if Schedule O contains a response or note to any line in this Part XII								
	·			Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.							
2a	Were the consciention in force sixted above and in the constitution of the constitution of the constitution in the constitution in the constitution in the constitution of the constitution in the constitutio		2a		Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed								
	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								
	consolidated basis, or both:	,							
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit.							
	review, or compilation of its financial statements and selection of an independent accountant?	•	2c	Х					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch								
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
ou	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?								
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit	3a		X				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	ou dudit	3b						
	or addite, explain mity on confedele o and describe any steps taken to undergo such addits			990	(2023)				

332012 12-21-23

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public

Inspection

Employer identification number

				Portland Pub					2-3179738			
Pa	ırt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions					
The	organ	ization is not a private found										
1		A church, convention of ch	urches, or association	on of churches described	in sectio	n 170(b)(1)(A)(i).					
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	າ 990).)							
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).					
4		A medical research organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,			
		city, and state:										
5		An organization operated for	or the benefit of a co	llege or university owned	or operat	ed by a go	overnmental un	it describe	ed in			
		section 170(b)(1)(A)(iv). (0	Complete Part II.)									
6		A federal, state, or local government	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).					
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from the	e general į	public described in			
		section 170(b)(1)(A)(vi). (Complete Part II.)										
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)							
9		An agricultural research org				ed in conju	unction with a l	and-grant	college			
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of t	he college	or			
		university:										
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership	o fees, and	d gross receipts from			
		activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	support f	rom gross investment			
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the orga	anization a	after June 30, 1975.			
		See section 509(a)(2). (Co	mplete Part III.)									
11		An organization organized a	and operated exclusi	ively to test for public sat	fety. See	section 50	09(a)(4).					
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	y out the	purposes of one or			
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 5	09(a)(3). (Check the box on			
		lines 12a through 12d that	describes the type o	f supporting organizatior	and com	plete lines	12e, 12f, and	12g.				
а			anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), typ	oically by	giving			
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority o	of the direc	ctors or trustee	s of the su	upporting			
	_	organization. You must o	-									
b	· L		anization supervised	or controlled in connect	ion with it	s supporte	ed organization	(s), by hav	/ing			
		control or management o			ame perso	ns that co	ntrol or manag	e the supp	ported			
		organization(s). You mus	-									
С	:							/ integrate	ed with,			
		its supported organization		•								
C	· L							-				
		that is not functionally int	•	• ,	•		•	an attentiv	veness			
		requirement (see instruct										
е	•	□ Check this box if the orga □					Type I, Type II	, Type III				
		functionally integrated, or										
		er the number of supported o vide the following information	•	d arganization(a)								
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monetary	(vi) Amount of other			
	,	organization	(,	(described on lines 1-10	in your governi	ing document?	support (see ins	-	support (see instructions)			
				above (see instructions))	Yes	No						
Tota	al											

332021 12-21-23

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	419545.	1082115.	1738255.	1502118.	1407424.	6149457.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	419545.	1082115.	1738255.	1502118.	1407424.	6149457.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						411783.
	Public support. Subtract line 5 from line 4.						5737674.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	419545.	1082115.	1738255.	1502118.	1407424.	6149457.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1902.	343.	808.	7311.	25778.	36142.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						_
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)		1368.				1368.
11	Total support. Add lines 7 through 10						6186967.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
_	organization, check this box and stor						
	ction C. Computation of Publi					Г	
	Public support percentage for 2023 (I					14	92.74 %
	Public support percentage from 2022					15	91.71 %
16a	33 1/3% support test - 2023. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact					VI how the organiz	ation
	meets the facts-and-circumstances te	-		*	-		
b	10% -facts-and-circumstances test	•				•	10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	on did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2023

(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		T	T			
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		*	•	.,.,	
0-	check this box and stop here						
	ction C. Computation of Publi					T I	
	Public support percentage for 2023 (I	, (,,	,	(//		15	<u>%</u>
	Public support percentage from 2022					16	%
	ction D. Computation of Inves			no 10! /^\		47	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from :					18	7 is not
198	33 1/3% support tests - 2023. If the						
ı.	more than 33 1/3%, check this box ar 33 1/3% support tests - 2022. If the						
i.	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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		
3с		
4a		
Tu		
4h		
4b		
_		
4c		
5a		
5b		
5c		
6		
7		
,		
9		
8		
0-		
9a		
9b		
9c		
10a		
10b		
	n 990)	2023
10b ule A (Forn	n 990)	2023

332024 12-21-23

332025 12-21-23

| 3b | | | Schedule A (Form 990) 2023

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes." describe in **Part VI** the role played by the organization in this regard.

see instructions).

6 Multiply line 5 by 0.035.

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

_ 7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Sec	tion C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		
	emergency temporary reduction (see instructions).	6	

4

5

6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continue	ed)							
Sect	Section D - Distributions								
1	Amounts paid to supported organizations to accomplish exempt purposes	1							
2	Amounts paid to perform activity that directly furthers exempt purposes of supported								
	organizations, in excess of income from activity	2							
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3							
4	Amounts paid to acquire exempt-use assets								
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5							
6	Other distributions (describe in Part VI). See instructions.	6							
7	Total annual distributions. Add lines 1 through 6.	7							
8	Distributions to attentive supported organizations to which the organization is responsive								
	(provide details in Part VI). See instructions.								
9	Distributable amount for 2023 from Section C, line 6								
10	Line 8 amount divided by line 9 amount	10							
	(1)		/***						

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2023 distributable amount			
i_	Carryover from 2018 not applied (see instructions)			
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
<u> </u>	Applied to 2023 distributable amount			
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2019			
<u>b</u>	Excess from 2020			
	Excess from 2021			
<u>d</u>	Excess from 2022			
<u> </u>	Excess from 2023			

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

Foundation for Portland Public Schools 22-3179738 Organization type (check one):

Filers of:	Section:							
Form 990 or 990-EZ \overline{X} 501(c)($\overline{3}$) (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
527 political organization								
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
, ,	nization is covered by the General Rule or a Special Rule . on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
General Rule								
-	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special Rules								
sections 5 contribute	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
contributo literary, or	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.							
year, cont is checked purpose.	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).								

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2023
Open to Public

e latest information.

Open to Public Inspection

Employer identification number

Foundation for Portland Public Schools 22-3179738 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included on line 2a 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

e Other

c Leasehold improvementsd Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, line 10c. column (B))

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Schedule D (Form 990) 2023

(9)

Schedule D (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury

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

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number Foundation for Portland Public Schools 22-3179738 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 е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g 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.

332081 09-13-23

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

Schedule G (Form 990) 2023

30) 2020	I Odiidacion	TOT TOTC	Tana .	LUDITO	DCHOOLD	22 311713	O rage z
raising Events.	Complete if the organ	nization answered	d "Yes" on	Form 990, P	art IV, line 18, or	reported more than \$	15,000

Pa	rt I	Fundraising Events. Complete if the	e organization answered	l "Yes" on Form 990, Par	t IV, line 18, or reported	more than \$15,000				
		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	ts greater than \$5,000.				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events				
			Spring for		None	1 ' '				
				Duathlon		(add col. (a) through				
			(event type)	(event type)	(total number)	col. (c))				
ne			, ,,,	, ,,	,					
Revenue	1	Gross receipts	18272.	25101.		43373.				
Be	'	Gross receipts	102,20	232021		233734				
	2	Less: Contributions	18272.	25101.		43373.				
	_	Less. Contributions	102720	231011		133731				
	3	Gross income (line 1 minus line 2)								
		arose micerne (inte 1 minue inte 2)								
	4	Cash prizes								
	·									
	5	Noncash prizes								
Ś	J	Nondash phizes								
Direct Expenses	6	Rent/facility costs								
кре	0	Theritraciiity costs								
Ĥ	7	Food and haverense								
irec	′	Food and beverages								
		Entertainment								
	8	Entertainment		2940.						
	40	Other direct expenses	·			2940.				
		Direct expense summary. Add lines 4 through				-2940.				
11 Net income summary. Subtract line 10 from line 3, column (d) -29 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than										
1 0		\$15,000 on Form 990-EZ, line 6a.	answered res on rom	1990, Part IV, line 19, or i	eported more than					
		ψ13,000 011 0111 990-LZ, line 0a.		(b) Pull tabs/instant		(d) Total gaming (add				
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))				
Revenue				gpgg-		(2)				
Вe	4	Cross valuenus								
		Gross revenue								
	2	Cash prizes								
ses		Odan prizes								
ens	2	Noncash prizes								
Direct Expenses	3	Noticasii prizes								
ç	4	Pont/facility costs								
۵	4	Rent/facility costs								
	_	Other direct expenses								
_	3	Other direct expenses	Yes %	Yes %	Yes %					
	6	Volunteer labor	No No	No	No No					
	0	Volunteer labor		I INO	140					
	7	Direct expense summary. Add lines 2 through	5 in column (d)							
	'	bireet expense summary. Add lines 2 timough	10 iii colaiiii (a)							
	R	Net gaming income summary. Subtract line 7	from line 1 column (d)							
_		Not garning moone summary. Subtract into r	nom line 1, column (a)							
9	Fnt	er the state(s) in which the organization condu	icts gaming activities:							
		he organization licensed to conduct gaming a				Yes No				
						100110				
b If "No," explain:										
10a	We	ere any of the organization's gaming licenses re	evoked suspended or te	erminated during the tax v	rear?	Yes No				
		Yes," explain:				00				
		, - · · · · · · · · · · · · · · · · · ·								
						dula C (Form 000) 2022				
		40.00			Caha	ALUA (1 1 AUM DOO) DOO?				

Sch	edule G (Form 990) 2023 Foundation for Portland Public Schools 22-3	<u>3179738</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
12	Indicate the percentage of gaming activity conducted in:		
		13a	%
	The organization's facility	13b	
	An outside facility	130	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	of gaming revenue retained by the third party \$		
С	: If "Yes," enter name and address of the third party:		
_	· · · · · · · · · · · · · · · · · · ·		
	Name		
	Name		
	Address		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatany diatributions:		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		□. .
	retain the state gaming license?	Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pa	TTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule G	i (Form 990)	Foundation	for	Portland	Public	Schools	22-3179738	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)						
		(

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Foundatio	n for Port	cland Publi	c Schools				22-3179738
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or assi	stance, and the selecti	
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to					ganization answered "\	es" on Form 990, Part	: IV, line 21, for any
recipient that received more than	· · ·	-			(f) Mathad of	Т	_
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
						Gift cards,	The Foundation for
Portland Public Schools						school	Portland Public Schools
353 Cumberland Ave					Appraisals and	supplies,	grants funds directly to
Portland, ME 04101	80-0581499		890896.	48915.	, FMV	books	the Portland Public
2 Enter total number of section 501(c)(3) a	nd government org	anizations listed in th	ne line 1 table	I	I	1	I
3 Enter total number of other organization							<u>'</u>

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

See Part IV for Column (h) descriptions

Schedule I (Form 990) 2023

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance				
Rental housing assistance	33	27029.	0.						
Academic scholarships	29	88900.	0.						
Part IV Supplemental Information. Provide the information req	Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.								
Part I, Line 2:									
FPPS maintains records of all income and expenses, as well as criteria and									

FPPS maintains records of all income and expenses, as well as criteria and governing documents for all funds. These materials are reviewed regularly by staff and board members. We meet with the organizations monthly for updates, administration and programming discussions. The programs produce an annual report with their accomplishments.

Part II, line 1, Column (h):

Name of Organization or Government: Portland Public Schools

SCHEDULE M (Form 990)

Name of the organization

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Open to Public Inspection **Employer identification number**

	Foundation f	or Por	tland Pubi	lic Schools		22-3179	738	
Par	t I Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	noncash	(d) nod of determin contribution ar	_	:s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications	X		4503.	FMV of	replace	nen	t c
5	Clothing and household goods					_		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other	X	1	24000.	FMV ink	ind rent	t	
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (Classroom Suppl)	X	500			ed on wl	<u> 101</u>	esa
26	Other (Gift Cards)	X	400	4653.	FMV			
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	zation durino	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	gh 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to be used	for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p				tions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is che	cked,			
	describe in Part II							

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

Schedule M (Form 990) 2023

Schedule M	(Form 990) 2023	Foundation	n for	Portland	Public	Schools	22-3179738	Page 2
Part II	Supplemental is reporting in Part this part for any actions to the supplemental sup	Information. I, column (b), the	Provide the	e information requi contributions, the	red by Part I, I number of iter	ines 30b, 32b, and 3 ns received, or a co	33, and whether the organiza mbination of both. Also comp	ntion plete
	<u> </u>							

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Foundation for Portland Public Schools

Employer identification number 22-3179738

Form 990, Part I, Line 1, Description of Organization Mission:

educational opportunities, achievement, and equity for all Portland

Public Schools students and staff.

Form 990, Part VI, Section B, line 11b:

The FPPS recognizes that the governance role of its Board of Directors includes the annual review and approval of Form 990 prior to its filing on an annual basis.

Form 990, Part VI, Section B, Line 12c:

The organization monitors compliance with the Conflict of Interest Policy
by reviewing the organization's business, decision making and financial
status at monthly board meetings through the President's Report,

Treasurer's Report, and Committee reports. Additionally, each director,

committee member with Board-delegated powers annually sign a statement
affirming that such person has received, read, understood and will comply
with such policy.

Form 990, Part VI, Section B, Line 15a:

The board of Directors make a recomendation to the school board based on review of local wage surveys.

Form 990, Part VI, Section C, Line 19:

Governing documents are available on our website and are also available upon request.

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

Schedule O (Form 990) 2023