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.

Open to Public Inspection

A	FOR THE	e 2023 calendar year, or tax year beginning 001 1, 2025 and	enaing J	UN 30, 2024				
В	Check if applicabl	C Name of organization		D Employer identific	cation number			
	Addre chang Name			0.5 0.5 0.5	^ -			
	chang	Doing business as		26-22593	07			
L	Initial return	,	Room/suite					
	□Final □return	851 Pearl Rd		630-957-				
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 5,811,359.				
	Amen return	West Chicago, IL 60185		H(a) Is this a group return				
	Applic	F Name and address of principal officer: Mai Ceia G. Sweetiey		for subordinates	? Yes X No			
	pendii	same as C above		H(b) Are all subordinates included? Yes No				
1	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions			
<u>J</u>	Websi	te: educarewestdupage.org		H(c) Group exemptio	n number			
		organization: X Corporation Trust Association Other	L Year	of formation: 2008 N	N State of legal domicile: IL			
P	art I	Summary						
	1	Briefly describe the organization's mission or most significant activities: Compa	rehens	ive child ca	are & early			
ဦ		learning experiences for children from bi	rth to	five years	old.			
na	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	sets.			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	11			
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11			
တို	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			84			
Activities & Governance	6	Total number of volunteers (estimate if necessary)			16			
ξį	7 a			7a	0.			
_ <	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.			
Revenue				Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		4,946,938.	5,657,811.			
	9	Program service revenue (Part VIII, line 2g)		65,053.	84,708.			
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		41,485.	68,840.			
ĕ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,053,476.	5,811,359.			
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
G	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,469,154.	4,253,870.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ē	. в	Total fundraising expenses (Part IX, column (D), line 25) 19, 98	31.					
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,731,083.	1,741,757.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,200,237.	5,995,627.			
	19	Revenue less expenses. Subtract line 18 from line 12		-146,761.	-184,268.			
Net Assets or	3			ginning of Current Year	End of Year			
ets	20	Total assets (Part X, line 16)		9,632,985.	9,136,656.			
ASS	21	Total liabilities (Part X, line 26)		619,087.	307,026.			
Net	22	Net assets or fund balances. Subtract line 21 from line 20		9,013,898.	8,829,630.			
Pa	art II	Signature Block						
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is			
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.				
Sig	n	Signature of officer		Date				
Hei		Marcela G. Sweeney, Executive Director						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN			
Pai	d	Mel Padillo Mel Padillo						
Pre	parer	Firm's name Desmond & Ahern, Ltd		1/27/25 self-employ Firm's EIN 3	P03172019 6-3321958			
	Only	Firm's address 10827 S. Western Ave.						
		Chicago, IL 60643		Phone no. 77	3-779-4720			
Ma	y the II	RS discuss this return with the preparer shown above? See instructions			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:	
	To increase access to quality, comprehensive child care and early	
	learning experiences for children from birth to five and their	
	families and to increase school readiness in children from low income	
	backgrounds.	
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.	
	(Code:) (Expenses \$5 , 208 , 955 . including grants of \$) (Revenue \$ 84 , 70	8 . \
- 10	Educare was organized in 2008 and for the first three years focused on	<u>. </u>
	acquiring a site and raising capital. Educare began directly serving	
	children and families in their current location in early July 2012. We	
	are a state-of-the-art early childhood school that gives low-income	
	young children and their families in West Chicago a strong start for a	
	successful future. Our comprehensive program incorporates what science	
	says young children need to flourish. The school is part of a national	
	network of effective early learning schools. Educare's approach helps	
	children, families and communities thrive. Educare unites education	
	professionals, private-sector leaders, policymakers, families and other	
	like-minded champions to improve access to high-quality early childhood	<u>a</u>
	education across the country.	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
4e	Total program service expenses 5,208,955.	
	Form 990	(2023)

Educare of West DuPage

Form 990 (2023) Educare of West DuPage Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? 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	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,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		
8	, ,			x
_	Schedule D, Part III	8		
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?			- T
	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, VII, 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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? 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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	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	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
	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 asschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
				X
14a		14a		 ^
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	444		x
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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			_V
40	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		<u> </u>
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		<u> X</u>
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
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Educare of West DuPage 26-2259307 Page 4 Form 990 (2023) Part IV | Checklist of Required Schedules (continued) Yes No 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 Х 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete 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 Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete Х 25b 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% Х controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 27 creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Х "Yes." complete Schedule L, Part IV 28a X **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV 29 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? |f "Yes," complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b

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? 36 Х If "Yes," complete Schedule R, Part V, line 2 36 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 Х <u>3</u>7 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			10	X	

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Form 990 (2023)

Form 990 (2023) Educare of West DuPage
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a	84					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns? .		2b	X			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		_X_		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account	accou	nt)?	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 A	ccour	its (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		_ <u>X</u> _		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		<u>X</u>		
	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	e orga	anization solicit			37		
	any contributions that were not tax deductible as charitable contributions?			6a		<u> X</u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributi		-	۵.				
_	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).	nuiono i	arouided to the never?	7.		X		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set		. ,	7a				
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		uirod	7b				
C		as req	uireu	7c		Х		
А		7d		70		- 21		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c			7e		Х		
_	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?							
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?			8				
9	Sponsoring organizations maintaining donor advised funds.							
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	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:	1	1					
а	Gross income from members or shareholders	11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b	•					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	1	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-				
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the							
b	organization is licensed to issue qualified health plans	13b						
c	Enter the amount of reserves on hand	13c						
			'	14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
	excess parachute payment(s) during the year?			15		X		
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	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 ac	tivitie	S					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17				
	If "Yes," complete Form 6069.							

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Form **990** (2023)

Educare of West DuPage 26-2259307 Page 6 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 11 **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. 11 **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 X 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 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? Х 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? 14 Х 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 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 Upon request X Another's website ___ Other (explain on Schedule O) Own website 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. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2023)

60185

IL

Justin McGrath - 815-762-0667 851 Pearl Road, West Chicago,

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)	(B)	J			C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle:	heck i ss per	more rson is	than o s both r/trus	n an	Reportable compensation from	Reportable compensation from related	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	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Marcela G. Sweeney	37.50	1								
Executive Director	25.50			Х				138,958.	0.	6,845.
(2) Monique Lopez	37.50	4				l		444 445		05 040
Director of School Operati	25 50		_			Х		111,115.	0.	25,313.
(3) Justin McGrath Director of Finance	37.50	1				x		110,976.	0.	22,640.
(4) Steve Rasher	3.00					^		110,970.	0.	22,040.
Board Chair	3.00	Х		х				0.	0.	0.
(5) Michael Burke	1.00							0.	0.	<u></u>
Vice Chair	1.00	x		х				0.	0.	0.
(6) Brian Beerman	3.00									
Treasurer		Х		х				0.	0.	0.
(7) Sarahay Terrazas	1.00								-	
Secretary		Х		Х				0.	0.	0.
(8) Barbara Abromitis	1.00									
Director		Х						0.	0.	0.
(9) Crystal Taylor	1.00									
Director		Х						0.	0.	0.
(10) Joie Frankovich	1.00	<u> </u>								
Director		Х						0.	0.	0.
(11) Norma Galllegos	1.00]							_	_
Director		Х						0.	0.	0.
(12) Sarah Norton	1.00	ļ								
Director	1 00	Х						0.	0.	0.
(13) David Sabthne	1.00	ļ								
Director	1 00	Х						0.	0.	0.
(14) Omar Espinosa	1.00	٠,,								
Director	+	Х	_					0.	0.	0.
		1								
		 								
		1								
-										
		1								
332007 12-21-23	•	•			-		•	•	•	Form 990 (2023)

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Educare of West DuPage 26-2259307 Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) Position Average Name and title Reportable Reportable **Estimated** (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations ndividual trustee or director the compensation hours for organization (W-2/1099-MISC/ from the Highest compensated related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations ey employee 1099-NEC) and related below organizations line) 361,049. 1b Subtotal 0. 0. c Total from continuation sheets to Part VII, Section A 361.049. 0. 54.798 d 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 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 OER Associates, LLC 615 Knox Avenue, Wilmette, IL 60091 Evaluation research 136,640.

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2023)

\$100,000 of compensation from the organization

	1 L V I	•••	_	ocnonco	ar note to any lin	o in this Dort VIII			
			Check if Schedule O contains a re	esponse	or note to any iin	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
		_	Fordered comparisons	4-1					300010113 0 12 0 14
Contributions, Gifts, Grants and Other Similar Amounts	1 6			1a					
25.00	,			1b					
ts, An	(1c					
ᇐ	•			1d	200 424				
ns,	•		·	<u>1e 5,</u>	380,434.				
er S	1	f	All other contributions, gifts, grants, and		000 000				
혈본			··· -	1f	<u>277,377.</u>				
d di	9	_		1g \$		E 655 011			
<u>ठ</u> ह	ı	h	Total. Add lines 1a-1f			5,657,811.			
			_		Business Code				
9	2 8		Program service fee	es	900099	77,208.	77,208.		
ē Š	ŀ	b	<u>Tuition</u>		611110	7,500.	7,500.		
Sch	(С							
ev.	(d							
Program Service Revenue	•	е							
4	1	f	All other program service revenue						
		g	Total. Add lines 2a-2f			84,708.			
	3		Investment income (including dividen	ds, intere	st, and				
						68,840.			68,840.
	4		Income from investment of tax-exemp	ot bond p	roceeds				
	5		Royalties						
			(i)	Real	(ii) Personal				
	6 a	а	Gross rents 6a						
	ŀ	b	Less: rental expenses 6b						
	(С	Rental income or (loss) 6c						
	(d							
	7 a	а	Gross amount from sales of (i) Se	curities	(ii) Other				
			assets other than inventory 7a						
	ŀ	b	Less: cost or other basis						
ne			and sales expenses						
Revenue	(С	Gain or (loss)7c						
Re			Net gain or (loss)						
her	8 8		Gross income from fundraising events (no						
₹			including \$	of					
			contributions reported on line 1c). See	e					
			Part IV, line 18	8a					
	ŀ	b	Less: direct expenses	8b					
	(С	Net income or (loss) from fundraising	events					
	9 a	а	Gross income from gaming activities.						
			Part IV, line 19	9a					
			Less: direct expenses						
	(С	Net income or (loss) from gaming acti	vities					
	10 a	а	Gross sales of inventory, less returns						
			and allowances	10a					
	ŀ	b	Less: cost of goods sold	10b					
	(С	Net income or (loss) from sales of inve	entory					
w					Business Code				
e go	11 a	а							
Miscellaneous Revenue	ŀ	b							
e e	(С							
Ais.	(d	All other revenue						
_	•	е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions			5,811,359.	84,708.	0.	68,840.

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26-2259307 Page 10 Educare of West DuPage Form 990 (2023) 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 (B) 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 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 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, 126,928. 145,803. 18,347. 528. 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) 3,334,918. 2,889,898. 432,660. 12,360. Other salaries and wages 7 Pension plan accruals and contributions (include 93,934. 10,172 83,456. 306. section 401(k) and 403(b) employer contributions) 395,396. 43,117. 350,986. 1,293. Other employee benefits 9 283,819. 251,915. 30,975 929. 10 Payroll taxes Fees for services (nonemployees): Management Legal 5,194. 31,656. 26,423. 39. Accounting Lobbying Professional fundraising services. See Part IV, line 17 5,077. 6,082. 998. 7. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 244,737. 209,617. 34,808. 312. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 65,856. 63,742. 1,991. 123. Office expenses 13 123,838. 103,367. 20,319. 152. Information technology 14 15 Royalties 258,613. 236,083. 21,904. 626. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses

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1,685.

140.

335.

1,146.

19,981.

19 20

21

22

23

24

25

452,892.

214,716.

84,013. 77,624.

74,056.

63,560.

5,995,627.

44,114.

d Bad Debt

Check here

e All other expenses

for any federal, state, or local public officials ... Conferences, conventions, and meetings

Payments to affiliates

Depreciation, depletion, and amortization

Other expenses. Itemize expenses not covered

Meal related cost

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.)

Classroom & educational

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

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

Repairs & Maintenance

417,402.

214,390.

84,013.

58,447.

46,552.

5,208,955.

40,659.

33,805.

3,315.

326.

18,842.

74,056.

15,862.

766,691.

Form 990 (2023) Part X Balance Sheet

Pari	נא	Datatice Street			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	141,649.	1	258,950
	2	Savings and temporary cash investments		2	2,904,697
	3	Pledges and grants receivable, net	562,281.	3	1,080,533
	4	Accounts receivable, net	142,337.	4	145,868
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
က္က	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ଝ	9	Prepaid expenses and deferred charges	41,881.	9	23,353
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 8,978,188			
	b	Less: accumulated depreciation 10b 4,266,627	5,146,022.	10c	4,711,561
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	11,694
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1 0 600 005	16	9,136,656
	17	Accounts payable and accrued expenses	260,401.	17	295,332
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ړي	22	Loans and other payables to any current or former officer, director,			
<u>≅</u>		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	358,686.		11,694
	26	Total liabilities. Add lines 17 through 25	619,087.	26	307,026
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	8,908,249.	27	8,571,684
Ba	28	Net assets with donor restrictions	105,649.	28	257,946
2		Organizations that do not follow FASB ASC 958, check here			
년		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	9,013,898.	32	8,829,630
	33	Total liabilities and net assets/fund balances	9,632,985.	33	9,136,656

Pa	rt XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,81		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,99	5,62	<u> 27.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	-18		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,01	3,89	98.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	coluṃn (B))	10	8,82	9,63	30 .
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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,			ı
	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 Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				ı
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				ı
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b	Х	
			Form	990 ((2023)

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SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

26-2259307

Name of the organization

Employer identification number Educare of West DuPage

Pa	ırt I	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.								
The	organ	nization is not a private found								
1		A church, convention of ch	•	-		-	I)(A)(i).			
2	一	A school described in sect i	•				N N			
3	H	A hospital or a cooperative		· ·		//h//1//Δ//ii	ii)			
4	H	A medical research organiza						the hospital's name		
7		city, and state:	ation operated in col	njunotion with a noopital	accombca	iii Scolio	11 17 0(B)(1)(A)(III). Entor	the noopital o name,		
_		An organization operated for	or the benefit of a col	llogo or university ewned	l or operat	od by a go	wornmontal unit describe	nd in		
5				nege of university owned	or operati	ed by a go	Werninental unit describe	5U III		
_		section 170(b)(1)(A)(iv). (C	•	and the second s		70/1-1/41/41	6.3			
6	Ū	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								
7	X	-	•	ntial part of its support fr	om a gove	ernmental	unit or from the general	public described in		
		section 170(b)(1)(A)(vi). (C	•							
8	Ш	A community trust describe								
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a land-grant	college		
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the college	or		
		university:								
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, an	d gross receipts from		
		activities related to its exem	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 organization a	after June 30, 1975.		
		See section 509(a)(2). (Cor	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 carry out the	purposes of one or		
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on		
		lines 12a through 12d that	describes the type o	f supporting organization	and com	plete lines	12e, 12f, and 12g.			
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supr	orted org	anization(s), typically by	giving		
		the supported organization	•		•	-				
		organization. You must o			, ,			11 3		
b	, [Type II. A supporting org			ion with it:	s supporte	ed organization(s), by hay	vina .		
		control or management o	•					-		
		organization(s). You mus			arric perso	110 11101 00	ntion of manage the supp	501100		
c		Type III functionally inte			in connect	tion with	and functionally integrate	ad with		
·		its supported organization	=				•	with,		
c		Type III non-functionally		·				zation(s)		
٠	' '-	that is not functionally int	=				• • • • •			
		requirement (see instructi		• ,	•		•	Veness		
_		¬ ' `	•	•	•					
e	,	☐ Check this box if the orga					Type I, Type II, Type III			
		functionally integrated, or		nany integrated supporti	ig organiz	ation.				
t		er the number of supported on the contraction of the following information or the contraction of the contrac		d organization(s)						
		(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	ng document?	support (see instructions)	support (see instructions)		
				above (see instructions))	162	NO				

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

(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
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4434022.	5202518.	5176935.	4946938.	5657811.	25418224.
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	4434022.	5202518.	5176935.	4946938.	5657811.	25418224.
	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.						25418224.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	4434022.	5202518.	5176935.	4946938.	5657811.	25418224.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	18,720.	1,460.	1,503.	41,485.	68,840.	132,008.
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.)			91,363.			91,363.
11	Total support. Add lines 7 through 10			,			25641595.
	Gross receipts from related activities,	etc. (see instructio	ins)			12	245,174.
	First 5 years. If the Form 990 is for th	•	,			1	
	organization, check this box and stop	•					
Sec	ction C. Computation of Publi						
14	Public support percentage for 2023 (li	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	99.13 %
	Public support percentage from 2022					15	99.27 %
	33 1/3% support test - 2023. If the o					ore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion		·	
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	_					
	meets the facts-and-circumstances te			=	•	3	
b	10% -facts-and-circumstances test	-		*	-		
	more, and if the organization meets the	_					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organizatio						s
	-		•	•			(Form 990) 2023

Schedule A (Form 990) 2023 Educare of West DuPage 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

Sec	ction A. Public Support	now, please comp	Diete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(4) 2010	(3) 2020	(0) 2021	(4) 2022	(6) 2020	(i) rotal
-	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						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness under section 513						
4							
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						
	Total. Add lines 1 through 5					+	
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				-	1	
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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
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
	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						
С	Add lines 10a and 10b						
	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						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's fi	ret second third	fourth or fifth tax	vear as a section	-I 501(c)(3) organizatio	n
17	check this box and stop here	ŭ		•	•	. , . ,	· —
Sec	etion C. Computation of Publi					•••••	
	Public support percentage for 2023 (li			column (f))		15	%
						16	<u> </u>
	Public support percentage from 2022 ction D. Computation of Inves					10	90
	Investment income percentage for 20			ine 13 column (f)\		17	%
	Investment income percentage from 2					18	
ıya	33 1/3% support tests - 2023. If the						r is not
	more than 33 1/3%, check this box ar	=	-	•			
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	 a. or 19b. check th 	ns box and see in	structions	

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")? |f "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?
- 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).
- 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		
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	8		
_ 9)a		
ç)b		
g	Эс		
1	0a		
	Ju		
	Λh		
1	0b		<u> </u>

332024 12-21-23

those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

Parent of Supported Organizations. Answer lines 3a and 3b below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b Schedule A (Form 990) 2023

2a

2b

За

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi:	zations					
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instru								
	All other Type III non-functionally integrated supporting organizations mus		·					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
	collection of gross income or for management, conservation, or							
	maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year):							
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 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						
7	Check here if the current year is the organization's first as a non-functional	Illy integrated	Type III supporting orga	nization (see				
	instructions).							

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

a Applied to underdistributions of prior yearsb Applied to 2023 distributable amount

c 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.
 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2024. Add lines 3j

Part VI. See instructions.

and 4c.

8 Breakdown of line 7:

a Excess from 2019

b Excess from 2020

c Excess from 2021

d Excess from 2022

e Excess from 2023

332028 12-21-23 Schedule A (Form 990) 2023

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizat	lions: Complete Part III.				
Nam	ne of organization			Į.	Employer identification no	
_	Educare	of West DuPage	504()		26-225930	/
Ра	rt I-A Complete if the org	anization is exempt und	er section 501(c) (or is a section 527	organization.	
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures				
Pa	rt I-B Complete if the org	anization is exempt und	er section 501(c)(3).		
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955		\$	
	Enter the amount of any excise tax					
	If the organization incurred a sectio					No
4a	Was a correction made?				Yes	No
	If "Yes," describe in Part IV.					
Pa	rt I-C Complete if the org	anization is exempt und	er section 501(c),	except section 50)1(c)(3).	
1	Enter the amount directly expended	by the filing organization for sec	ction 527 exempt funct	ion activities	\$	
2	Enter the amount of the filing organ		•			
	exempt function activities				\$	
3	Total exempt function expenditures		•			
	line 17b					_
	Did the filing organization file Form					No
5	Enter the names, addresses, and er					n
	made payments. For each organization contributions received that were pro-	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	3
	political action committee (PAC). If				arate segregated fund of t	a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om (e) Amount of pol	itioal
	(a) Name	(b) Address	(C) EIN	filing organization	1 ' '	
				funds. If none, enter	-0 promptly and dire	
					delivered to a sepa	
					If none, enter -(

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

Schedule C (Form 990) 2023

Ochcadic O (1 0111 330) 2020	Educate Of	west Durage		20 2	ZJJJU/ Tage Z
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
A Check if the filing organiza			Part IV each affiliated	group member's name	e, address, EIN,
	re of excess lobbying e				
B Check if the filing organiza	tion checked box A an	ia "ilmitea controi" pro	visions apply.	(-) Filter	(I-) A (CC) - 1 - 1 - 1 - 1
Limi	ts on Lobbying Exper	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	totalo
1a Total labbuing expanditures to influ	uongo public opinion (c	recerecte lebbying)		0.	
1a Total lobbying expenditures to influb Total lobbying expenditures to influ				0.	
c Total lobbying expenditures (add li		• • • • • • • • • • • • • • • • • • • •		0.	
d Other exempt purpose expenditures				0.	
e Total exempt purpose expenditure				0.	
f Lobbying nontaxable amount. Enter				0.	
If the amount on line 1e, column (a) o		bying nontaxable am			
not over \$500,000,		the amount on line 1e.			
over \$500,000 but not over \$1,000		0 plus 15% of the exce	ess over \$500.000.		
over \$1,000,000 but not over \$1,50		0 plus 10% of the exce			
over \$1,500,000 but not over \$17,		0 plus 5% of the exces			
over \$17,000,000,	\$1,000,0		. , ,		
g Grassroots nontaxable amount (en				0.	
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				
j If there is an amount other than ze	ro on either line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
	4-Year Ave	raging Period Under	Section 501(h)		
(Some organizations t		01(h) election do not la te instructions for lin	•	f the five columns be	low.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	356,093.	359,459.	369,020.		1,084,572.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					1,626,858.
c Total lobbying expenditures	301.				301.
d Grassroots nontaxable amount	89,023.	89,865.	92,255.		271,143.
e Grassroots ceiling amount					
(150% of line 2d, column (e))					406,715.
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 Educare of West DuPage 26-22593 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		,,	(b)	
ot the i	lobbying activity.	Yes	No	Amo	ount	
1 [During the year, did the filing organization attempt to influence foreign, national, state, or					
ŀ	local legislation, including any attempt to influence public opinion on a legislative matter					
c	or referendum, through the use of:					
a \	Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c N	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f (Grants to other organizations for lobbying purposes?					
_	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		05.00	tion		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	11 30 1 (0)(3)	, or se	Stion		
art						
art				Yes	N	
	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	N	
1 \				Yes	Ne	
1 \ 2 [Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5)	2 3), or se	ction		
1 \ 2 [3 ['art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5) 'No" OR (I), or seeb) Part	ction		
1 \2 [3 [7] 2 art 1 [2 [9]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) 'No" OR (I), or seeb) Part	ction		
1 \2 [3 [7] 2 art 1 [2 5	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) 'No" OR (l	2 3), or se b) Part	ction		
11 \\22 [33 [art]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	e prior year? n 501(c)(5) 'No" OR (l	2 3), or se b) Part	ction		
1 \2 [3 [3] 2 art 1 [2] 2 a (4)	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) 'No" OR (l	2 3), or see b) Part	ction		
11 \ 22 [2art 11 [22	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5) 'No" OR (I	2 3), or sec b) Part	ction		
1 \ \22 \ [\ \23 \ [\ \24 \] \] 11 \ [\ \24 \] 6 \ 6 \ 6 \ C \] 3 \ \ \/ 4 \ 3 \ \/ 4	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction	3, is	
1 \ \ 22 \ [\] 3 \ [2 \] 1 \ [2 \] 6 \ 6 \ (\) c \ \ 3 \ A \ 4 \ 1 \ \]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) 'No" OR (I	2 3), or sec b) Part	ction		
1 \\2 [3] 2 art 1 [2] 6 6 6 7 7 7 7 7 7 7 7 7 7	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) to the reasonable estimate of nondeductible lobbying and political section 162(e) dues does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political section 162(e) the organization 162(e) th	e prior year? n 501(c)(5) 'No" OR (I	2 3), or seeb) Part	ction		
11 \\22 \[\frac{1}{2}\] 11 \[\frac{1}{2}\] 22 \[\frac{1}{2}\] 3 \[\frac{1}{2}\] 4 \[\frac{1}{2}\] 6 \[\frac{1}{2}\]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction		

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.

2023
Open to Public Inspection

Name of the organization

Educare of West DuPage

Employer identification number 26-2259307

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		nilar Funds or A	Accounts. Complete if the
	organization answered Tes On Form 990, Fait IV, link	(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year	()		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held	in donor advised fu	nds
Ū	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor ac			
J	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?		•	
Pai				
1	Purpose(s) of conservation easements held by the organization		,	,
-	Preservation of land for public use (for example, recreat		Preservation of a his	storically important land area
	Protection of natural habitat			rtified historic structure
	Preservation of open space		1 10001 Valion of a 00	Timed motorio di dotale
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribut	ion in the form of a c	conservation easement on the last
_	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				<u> </u>
С	Number of conservation easements on a certified historic stru			
d	Number of conservation easements included on line 2c acqui			
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele			
	year	, ,	, ,	Ç
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri		n, handling of	
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enfo	rcing conservation e	easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of	f section 170(h)(4)(B))(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenu	e and expense state	ment and
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's fi	nancial statements t	hat describes the
	organization's accounting for conservation easements.	A	0.11	O: 11 A
Pai	t III Organizations Maintaining Collections of	-	sures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its reven	ue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for pub	•		ance of public
	service, provide in Part XIII the text of the footnote to its finan			
b	If the organization elected, as permitted under FASB ASC 958			
	art, historical treasures, or other similar assets held for public	exhibition, education, or r	esearch in furtherand	ce of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			, provide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			4
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023

Par	rt III Organizations Maintaining C	Collections of Art	t, Histo	orical Tre	asures, oi	r Other	Simila	r Assets	(contin	ued)			
3	Using the organization's acquisition, access	ion, and other records	s, check	any of the f	ollowing that	make sig	gnificant	use of its					
	collection items (check all that apply).												
а	Public exhibition	d	ι 🔲 ι	oan or exc	hange progra	am							
b													
С	c Preservation for future generations												
4													
5	During the year, did the organization solicit of	or receive donations of	of art, his	torical treas	sures, or othe	r similar	assets		_	_	_		
	to be sold to raise funds rather than to be m								Yes		No		
Par	rt IV Escrow and Custodial Arran		te if the o	organization	answered "	Yes" on F	orm 990	, Part IV, li	ne 9, or				
	reported an amount on Form 990, Pa												
1a	Is the organization an agent, trustee, custod	•	•						٦.,		٦		
	on Form 990, Part X?							L	」Yes		_ No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	able:					Λ				
	Description below as						4-		Amount				
	0 0												
a	Additions during the year												
e •	Distributions during the year						1e						
f	Ending balance Did the organization include an amount on F								Yes		No		
	If "Yes," explain the arrangement in Part XIII		•						_	F			
	rt V Endowment Funds Complete i												
	Complete	(a) Current year		rior year	(c) Two year			years back	(e) Four	vears	back		
1a	Beginning of year balance	,,	, ,		, ,		. ,		, ,				
b	Contributions												
c	Net investment earnings, gains, and losses												
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g	, column (a)) held as:								
а	Board designated or quasi-endowment		_%										
b	Permanent endowment	%											
С	Term endowment	_%											
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.											
За	Are there endowment funds not in the posse	ession of the organiza	tion that	are held ar	nd administer	ed for the	Э						
	organization by:									Yes	No		
	(i) Unrelated organizations?								3a(i)		<u> </u>		
									3a(ii)		<u> </u>		
b	If "Yes" on line 3a(ii), are the related organization	·							3b				
4	Describe in Part XIII the intended uses of the		wment fu	unds.									
Par	rt VI Land, Buildings, and Equipm		. D4 IV	line dda O	F 000	Dart V I	i.a. 10						
	Complete if the organization answere		i	·	I								
	Description of property	(a) Cost or o		` '	or other	٠,	ccumulat preciation		(d) Bool	k valu	ie		
		basis (investn	nent)	basis		dep	reciation	1	111	2 0	00		
_	Land				2,899. 1,000.	3 0	81,0	0.2	4,179		<u>99.</u>		
b	9			0,10	<u> </u>	3,3	, o , , 0	04.	- , ⊥ / :	, , 3	90.		
_	Leasehold improvements	II		3 5	8,664.	2	270,0	00	Ω	3 6	64.		
d	1 1				5,625.		15,6		0.0	<i>,</i> 0	0.		
	Other		V line 10						4,71	1 5			
ı uldi	ii. Add iiiles Ta tillough Te. (Column (d) must e	equal Form 990, Part	A, IINE 10	oc, column	(<u>D))</u>			······		_ , _	<u> </u>		

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Educare of w	rest Durage	∠0-	-2259307 Page
Part VII Investments - Other Securities	on Farma 000 Dart IV line	14b Coo Forms 200 Book V line 10	
Complete if the organization answered "Yes" or (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-vear market value
4) = 1 1 1 1 1	(b) Book value	(c) meaned of valuation. Cool of one	or your market value
1) Financial derivatives 2) Closely held equity interests			
		+	
Other		+	
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)		+	
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	(D))		
otal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	<u>(D))</u>		
	on Form 000 Port IV line	110 or 11f Soo Form 000 Bort V line 05	
Complete if the organization answered "Yes" o	TITIOHH 330, FAILIV, IINE	The or Thi. Gee Form 990, Part A, line 25.	(h) Dook value
(a) Description of liability			(b) Book value
(1) Federal income taxes			11 60
(2) Lease Liability			11,694
(3)			
(4)			
(4)			
(4)			
(5)			
(5) (6)			
(5) (6) (7) (8)			
(5) (6) (7)	(B))		11,694

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

26-2259307 Page 4

Pa	art XI Reconciliation of Revenue per Audited F	inancial Statements With Revenue p	er Return	. ago
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial	statements	1	5,811,359.
2	Amounts included on line 1 but not on Form 990, Part VIII, li	ne 12:		
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	d Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	5,811,359.
4	Amounts included on Form 990, Part VIII, line 12, but not on	line 1:		
а	a Investment expenses not included on Form 990, Part VIII, lin	e 7b 4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		0.	
5		5	5,811,359.	
Pa	art XII Reconciliation of Expenses per Audited		s per Return	
	Complete if the organization answered "Yes" on Forn	· · · · · · · · · · · · · · · · · · ·		F 00F 607
1	Total expenses and losses per audited financial statements		1	5,995,627.
2	Amounts included on line 1 but not on Form 990, Part IX, lin	1 1		
a				
b	Prior year adjustments			
С	Other losses	2c		
d				
				0
	Add lines 2a through 2d			0.
3	Add lines 2a through 2d Subtract line 2e from line 1			0. 5,995,627.
	Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on I	ine 1:		
3 4 a	Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on I Investment expenses not included on Form 990, Part VIII, line	ine 1: e 7b 4a		
3 4 a b	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on I Investment expenses not included on Form 990, Part VIII, line Other (Describe in Part XIII.)	ine 1: e 7b 4a 4b	3	5,995,627.
3 4 a b c	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on I Investment expenses not included on Form 990, Part VIII, line Other (Describe in Part XIII.) Add lines 4a and 4b	ine 1: e 7b 4a 4b	3 4c	5,995,627.
3 4 a b c	Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on I Investment expenses not included on Form 990, Part VIII, line Other (Describe in Part XIII.) Add lines 4a and 4b	ine 1: e 7b 4a 4b	3 4c	5,995,627.

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

Part X, Line 2:

FIN 48 Note from Audited Financial Statements

Educare was granted an exemption from federal income taxes by the Internal Revenue Service pursuant to the provisions of Internal Revenue Code Section 501(c)(3). Educare qualifies for the charitable contribution deduction under Section 170(b)(1)(A)(vi) and has been classified as an organization that is not a private foundation under Section 509(a)(1). The tax exempt purpose of Educare and the nature in which it operates is described above. Educare continues to operate in compliance with its tax exempt purpose. Educare's annual information and income tax returns filed with the federal and state governments are subject to examination for three years after they are filed.

Schedule D (Form 990) 2023

Part XIII Supplemental Information (continued)
Educare has adopted the requirements for accounting for uncertain tax
positions and management has determined that Educare was not required to
record a liability related to uncertain tax positions as of June 30, 2024.
Part XI, Line 2d - Other Adjustments:
Loss on disposal of asset
Part XII, Line 4b - Other Adjustments:
Loss on disposal of asset

SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

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

Name	of the	organizatio

Educare of West DuPage

Employer identification number

26-2259307

Part I	Excess Bene														
	Complete if the						e 25a or 25b	; or	Form 990-EZ, Pa	art V, I	ine 40	b			
1 (a) Name of disqualified person			Relationship bet			lified	16	:) De	escription of tran	sactio	n	(d) Corrected			cted?
- (a) Name of disqualified person			person and o	rganiza	ation								Y	es	No
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
section															
3 Enter	the amount of tax,	, if any, on line 2	, above, reimburs	sed by	the org	ganizatio	on				\$				
Part II	Loans to and	d/or From In	terested Per	sons											
	Complete if the	organization ans	wered "Yes" on	Form 9	990-F7	Part V	line 38a or	Forn	n 990 Part IV lir	ne 26:	or if th	ne oraz	anizati	on	
	reported an amo	-				,, ,			,	,	o	.c c.g.			
	a) Name of	(b) Relationship		(d) Lo	an to or	(e)	Original	(f) Balance due	(a)	In		proved	(i) V	/ritten
	ested person	with organizatio		organi	n the ization?	princi	pal amount	\ `.	, Daianes ads	defa	ult?	cómn	ard or nittee?	agree	ment?
				To	From			_		Yes	No	Yes	No	Yes	No
<u>(1)</u>				-	-							-			
(2)								_				-			
(3)								_				-			
(4)				-								-			_
(5)															
(6)				-	-							-			
(7)					-							-			
_(8)								_				-			_
(9)												-			
(10)															
Total		····		<u></u>			\$								
Part III			-				e 27								
Complete if the organization (a) Name of interested person			(b) Relationship interested per the organiz	betwe	en	(c	Amount of assistance		(d) Type assistan			•	Purp assista		f

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

Schedule L (Form 990) 2023

(1) (2) (3) (4) (5) (6) (7) (8) (9)

Part IV E	Business Transactions	Involving	Interested	Persons
-----------	------------------------------	-----------	------------	---------

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)Steve Rasher	Steve Rasher is the	136,640.	Steve Rashe		Х
(2)Barbara Abromitis	Director	0.	Contracted		Х
(3)Omar Espinosa	Treasurer	137,158.	Educare Wes		Х
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information					
Provide additional information for resp	oonses to questions on Schedule L. See	nstructions.			
anh i Dant III Daniman i		T	4 D		
Sch L, Part IV, Business T	ransactions involvin	g intereste	a rersons:		
(a) Name of Borgon: Chara	Paghor				
(a) Name of Person: Steve	rasilet				
(b) Relationship Between I	Interested Dergon and	Organizati	on:		
(n) retactouship between 1	inceresced rerson and	Organizati	011:		
Steve Rasher is the Board	Chair of Educare Wes	+ DuPage			
steve Rasher is the Board	Chair of Educate wes	t Durage			
(d) Description of Transac	stion: Steve Rasher	hag a 2% ow	merchin ctai	k۵	
(d) Description of Italisat	ction: Steve Rasher,	ilas a 26 Ow	nership sca.	v.e	
in OER, who is a contracto	or for Educare West D	unage			
in our, who is a concrace.	or ror nadeare webe b	apage			
(a) Name of Person: Barban	ra Abromitis				
· ·					
(d) Description of Transac	ction: Contracted emp	loyee of OE	R Associate	s,	
•					
LLC, no work done for Educ	care and resigned on	1/2025			
(a) Name of Person: Omar E	Espinosa				
(d) Description of Transac	ction: Educare West D	uPage recen	tly opened	a	
checking account and a CDA	ARs investment accoun	t at Republ	ic Bank of		
-1					
Chicago					

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

Educare of West DuPage

Employer identification number 26-2259307

Form 990, Part VI, Section A, line 4:

Updated bylaws approved in November 2023. The bylaws were changed to include clear definitions around electronic meetings. They also removed the requirement for a Board member to be from the Gustafson Family Foundation and from West Chicago School District 33. They clarified terms of Board members and more clearly defined the process for providing proxy votes in a member's absence.

Form 990, Part VI, Section A, line 6:

Members of the Organization shall consist of the Gustafson Family

Charitable Foundation (an Illinois Charitable Trust) and the Board of

Education of the West Chicago School District 33 (organized and operated under the Illinois School code).

Form 990, Part VI, Section A, line 7a:

The Board of Directors are appointed and removed by the members which meet at least annually.

Form 990, Part VI, Section A, line 7b:

In September, 2019, the Board of Education of West Chicago Elementary

School District 33 of DuPage County, Illinois ("District 33"), The

Gustafson Family Charitable Foundation ("GFF"), and Educare of West DuPage

("EWD") entered into an Agreement To Operate The Educare of West DuPage

(the "2019 Operating Agreement"), which superseded all previous operating

agreements, and, in September, 2019, Amended Bylaws of Educare West DuPage

were adopted pursuant to the 2019 Operating Agreement (the "2019 Amended

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization

Educare of West DuPage

Employer identification number 26-2259307

Bylaws"). Pursuant to the 2019 Operating Agreement and 2019 Amended Bylaws it is agreed that there are no members of EWD and all legal and fiscal responsibility of EWD is vested in the Board of Directors of EWD (the "Board"), and the Board may exercise all such powers of EWD as authorized by EWD's Articles of Incorporation or the 2019 Amended Bylaws, as may be amended from time to time; provided, however, that, pursuant to the 2019 Operating Agreement and the 2019 Amended Bylaws, District 33 shall have the right to appoint two members of the Board, GFF shall have the right to appoint one member of the Board, and the Educare Learning Network shall have the right to appoint one member of the Board.

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

The complete 990 will be reviewed by the Director of Finance and

Administration, along with the Executive Director. After reviewing

internally, the 990 will be sent to all members of the Educare West DuPage

Board of Directors for review and final approval.

Form 990, Page 5, Part V, #2a

Number of W-2s issued - Educare staff was compensated through a PEO agreement with PBS of Central Florida (FEIN 59-3101031). As such,

Educare did not file any payroll tax returns for 2021 or issue 2021

W-2s. There were 84 Educare employees during the fiscal year.

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

On an annual basis, the Directors review the Conflict of Interest Policy
and sign a statement that they have read and understand the policy and meet
the requirements. When a potential conflict occurs, the remaining Board
Members review the situation to determine if there is a conflict. If it is
determined that there is a conflict, the Board Member with the conflict is

332212 11-14-23

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** Educare of West DuPage 26-2259307 excluded from discussions and decisions related to the conflict. Form 990, Part VI, Section B, Line 15: As a part of the annual budgeting process, salaries of the Executive Director and key employees are reviewed by the Board and compared to similar positions in DuPage County. Form 990, Part VI, Section C, Line 19: Governing documents, financial statements, and conflict of interest policy are available upon request. Form 990, Part XII, line 2c: The process has not changed from the prior year.