

Form **990**

OMB No. 1545-0047

**Return of Organization Exempt From Income Tax****2009**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.







**Open to Public Inspection**For the 2009 calendar year, or tax year beginning **7/01**, 2009, and ending **6/30**, 2010

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Please use IRS label or print or type. See specific instructions. <b>The Art Institute of Chicago</b> <b>111 South Michigan Avenue</b> <b>Chicago, IL 60603</b>	<b>D</b> Employer Identification Number <b>36-2167725</b>
		<b>E</b> Telephone number <b>312-443-3600</b>
<b>F</b> Name and address of principal officer: <b>Eric Anyah</b> <b>Same As C Above</b>		<b>G</b> Gross receipts \$ <b>387,422,493.</b> <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list. (see instructions)
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number ▶
<b>J</b> Website: ▶ <b>www.artic.edu and www.saic.edu</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1879</b> <b>M</b> State of legal domicile: <b>IL</b>

**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To found, build, maintain and operate museums, schools, and libraries of art and theatres.</u>																																																										
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.																																																										
	3 Number of voting members of the governing body (Part VI, line 1a)	3	44																																																								
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	40																																																								
Revenue	5 Total number of employees (Part V, line 2a)	5	3,253																																																								
	6 Total number of volunteers (estimate if necessary)	6	880																																																								
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	478,029.																																																								
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	-1,695,940.																																																								
Expenses	<table border="1"> <thead> <tr> <th></th> <th>Prior Year</th> <th>Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td>94,787,691.</td> <td>66,514,047.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td>126,243,707.</td> <td>135,434,821.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td>-46,526,439.</td> <td>43,632,738.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td>5,277,762.</td> <td>10,809,074.</td> </tr> <tr> <td>12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td>179,782,721.</td> <td>256,390,680.</td> </tr> <tr> <td>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td> <td>25,469,838.</td> <td>27,712,714.</td> </tr> <tr> <td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td> <td></td> <td></td> </tr> <tr> <td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td> <td>91,307,211.</td> <td>93,657,225.</td> </tr> <tr> <td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td> <td>522,994.</td> <td>195,599.</td> </tr> <tr> <td>16b Total fundraising expenses (Part IX, column (D), line 25) ▶</td> <td>6,100,305.</td> <td></td> </tr> <tr> <td>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)</td> <td>104,548,148.</td> <td>107,700,445.</td> </tr> <tr> <td>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td> <td>221,848,191.</td> <td>229,265,983.</td> </tr> <tr> <td>19 Revenue less expenses. Subtract line 18 from line 12</td> <td>-42,065,470.</td> <td>27,124,697.</td> </tr> <tr> <td rowspan="3">Net Assets or Fund Balances</td> <td colspan="2"> <table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td>1255400533.</td> <td>1,268,164,380.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td>451,261,971.</td> <td>420,837,362.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td>804,138,562.</td> <td>847,327,018.</td> </tr> </tbody> </table> </td> </tr> </tbody></table>			Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	94,787,691.	66,514,047.	9 Program service revenue (Part VIII, line 2g)	126,243,707.	135,434,821.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-46,526,439.	43,632,738.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,277,762.	10,809,074.	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	179,782,721.	256,390,680.	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	25,469,838.	27,712,714.	14 Benefits paid to or for members (Part IX, column (A), line 4)			15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	91,307,211.	93,657,225.	16a Professional fundraising fees (Part IX, column (A), line 11e)	522,994.	195,599.	16b Total fundraising expenses (Part IX, column (D), line 25) ▶	6,100,305.		17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	104,548,148.	107,700,445.	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	221,848,191.	229,265,983.	19 Revenue less expenses. Subtract line 18 from line 12	-42,065,470.	27,124,697.	Net Assets or Fund Balances	<table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td>1255400533.</td> <td>1,268,164,380.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td>451,261,971.</td> <td>420,837,362.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td>804,138,562.</td> <td>847,327,018.</td> </tr> </tbody> </table>			Beginning of Year	End of Year	20 Total assets (Part X, line 16)	1255400533.	1,268,164,380.	21 Total liabilities (Part X, line 26)	451,261,971.	420,837,362.	22 Net assets or fund balances. Subtract line 21 from line 20	804,138,562.	847,327,018.
		Prior Year	Current Year																																																								
	8 Contributions and grants (Part VIII, line 1h)	94,787,691.	66,514,047.																																																								
	9 Program service revenue (Part VIII, line 2g)	126,243,707.	135,434,821.																																																								
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-46,526,439.	43,632,738.																																																								
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,277,762.	10,809,074.																																																								
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	179,782,721.	256,390,680.																																																								
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	25,469,838.	27,712,714.																																																								
	14 Benefits paid to or for members (Part IX, column (A), line 4)																																																										
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	91,307,211.	93,657,225.																																																								
16a Professional fundraising fees (Part IX, column (A), line 11e)	522,994.	195,599.																																																									
16b Total fundraising expenses (Part IX, column (D), line 25) ▶	6,100,305.																																																										
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	104,548,148.	107,700,445.																																																									
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	221,848,191.	229,265,983.																																																									
19 Revenue less expenses. Subtract line 18 from line 12	-42,065,470.	27,124,697.																																																									
Net Assets or Fund Balances	<table border="1"> <thead> <tr> <th></th> <th>Beginning of Year</th> <th>End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td>1255400533.</td> <td>1,268,164,380.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td>451,261,971.</td> <td>420,837,362.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td>804,138,562.</td> <td>847,327,018.</td> </tr> </tbody> </table>			Beginning of Year	End of Year	20 Total assets (Part X, line 16)	1255400533.	1,268,164,380.	21 Total liabilities (Part X, line 26)	451,261,971.	420,837,362.	22 Net assets or fund balances. Subtract line 21 from line 20	804,138,562.	847,327,018.																																													
		Beginning of Year	End of Year																																																								
	20 Total assets (Part X, line 16)	1255400533.	1,268,164,380.																																																								
21 Total liabilities (Part X, line 26)	451,261,971.	420,837,362.																																																									
22 Net assets or fund balances. Subtract line 21 from line 20	804,138,562.	847,327,018.																																																									

**Part II Signature Block**

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
	Signature of officer 	Date <b>5/10/11</b>	
Paid Preparer's Use Only	Signature of preparer <b>Self-Prepared</b>		Preparer's identifying number (see instructions) 
	Firm's name (or yours if self-employed), address, and ZIP + 4 		EIN ▶  Phone no. ▶ 
	Date 		
	Check if self-employed <input type="checkbox"/>		

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes ☐ No ☒

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/29/09

Form 990 (2009)

**\*\*PUBLIC DISCLOSURE COPY\*\***

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 2

**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 117,483,222. including grants of \$ 27,712,714.) (Revenue \$ 117,191,847.)

The School of the Art Institute is an accredited post-secondary institution of higher learning which provides both graduate and undergraduate study. This curriculum provides for the preparation of visual artists, teachers of art, designers and others in areas that include written, spoken, and media formats. Overall full-time-equivalent enrollment of degree-seeking students was 2,746, an increase of 4% over last year. The curriculum has attracted students from 48 countries.

4b (Code: ) (Expenses \$ 85,659,048. including grants of \$ ) (Revenue \$ 26,865,962.)

See Schedule O

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ 203,142,270.

**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? . . . . .	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I . . . . .	3	X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II . . . . .	4 X	
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III . . . . .	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I . . . . .	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II . . . . .	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III . . . . .	8 X	
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV . . . . .	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V . . . . .	10 X	
11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . .	11 X	
• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI . . . . .		
• 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 . . . . .		
• 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 . . . . .		
• 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 . . . . .		
• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X . . . . .		
• 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? If 'Yes,' complete Schedule D, Part X . . . . .		
12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII . . . . .	12	X
12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional . . . . .	12 A X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E . . . . .	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I . . . . .	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II . . . . .	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III . . . . .	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I . . . . .	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II . . . . .	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III . . . . .	19 X	
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H . . . . .	20	X

**\*\*PUBLIC DISCLOSURE COPY\*\*****Part IV Checklist of Required Schedules (continued)**

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	X	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		X
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II.	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	X	
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	X	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	X	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2.	X	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

BAA

Form 990 (2009)

**\*\*PUBLIC DISCLOSURE COPY\*\*****Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. <span style="float: right;">794</span>		
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <span style="float: right;">4</span>		
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2 a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. <span style="float: right;">3,253</span>		
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	X	
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>3 b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	X	
<b>4 a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		X
<b>6 a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>6 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7 a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
<b>7 e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>7 h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9 b</b>	Did the organization make any distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10 b</b>	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11 a</b>	Gross income from other members or shareholders.		
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

**\*\* PUBLIC DISCLOSURE COPY \*\***

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 6

**Part VI** **Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

		Yes	No
1 a	Enter the number of voting members of the governing body.....		
1 a	44		
1 b	Enter the number of voting members that are independent.....		
1 b	40		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? <u>See Schedule O</u> .....	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.....		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?.....		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?.....		X
6	Does the organization have members or stockholders? <u>See Schedule O</u> .....	X	
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? <u>See Schedule O</u> .....	X	
7 b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?.....		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?.....	X	
8 b	Each committee with authority to act on behalf of the governing body?.....	X	
9	Is there any officer, director or 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 in Schedule O.....		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10 a	X	
10 a	Does the organization have local chapters, branches, or affiliates?.....	
10 b	X	
10 b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?.....	
11		X
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?.....	
11 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. <u>See Schedule O</u>	
12 a	X	
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13.....	
12 b	X	
12 b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?.....	
12 c	X	
12 c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. <u>See Schedule O</u> .....	
13	X	
13	Does the organization have a written whistleblower policy?.....	
14	X	
14	Does the organization have a written document retention and destruction policy?.....	
15		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
15 a	X	
15 a	The organization's CEO, Executive Director, or top management official.....	
15 b	X	
15 b	Other officers of key employees of the organization. <u>See Schedule O</u> .....	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)	
16 a	X	
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.....	
16 b	X	
16 b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.....	

**Section C. Disclosures**

17 List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☒ Own website      ☒ Another's website      ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  
▶ Patricia Rowlands, Controller 111 South Michigan Avenue Chicago IL 60603 312-499-4050

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors****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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Anne Searle Bent Trustee	1	X						0.	0.	0.
Robert H. Bergman Trustee	1	X						0.	0.	0.
Barbara Bluhm-Kaul Trustee	1	X						0.	0.	0.
Gilda Buchbinder Trustee	1	X						0.	0.	0.
Linda Buonanno Trustee	1	X						0.	0.	0.
Francie Comer Trustee	1	X						0.	0.	0.
Lester Coney Trustee	1	X						0.	0.	0.
A. Steven Crown Trustee	1	X						0.	0.	0.
William M. Daley Trustee	1	X						0.	0.	0.
Janet Duchossois Trustee	1	X						0.	0.	0.
John A. Edwardson Trustee	1	X						0.	0.	0.
Marshall Field Trustee	1	X						0.	0.	0.
Karen Frank Trustee	1	X						0.	0.	0.
Barbara E. Franke Trustee	1	X						0.	0.	0.
Denise Gardner Trustee	1	X						0.	0.	0.
Roxy Beatty Goebel Trustee	1	X						0.	0.	0.
James A. Gordon Trustee	1	X						0.	0.	0.

# \*\*PUBLIC DISCLOSURE COPY\*\*

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 8

## Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont.)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Kenneth C. Griffin Trustee	1	X						0.	0.	0.
Ann Grube Trustee	1	X						0.	0.	0.
Caryn Harris Trustee	1	X						0.	0.	0.
John W. Jordan II Trustee	1	X						0.	0.	0.
Rita Knox Trustee	1	X						0.	0.	0.
Anstiss Hammond Krueck Trustee	1	X						0.	0.	0.
Eric P. Lefkofsky Trustee	1	X						0.	0.	0.
Lawrence F. Levy Trustee	1	X						0.	0.	0.
Robert M. Levy Trustee	1	X						0.	0.	0.
Elizabeth Souder Louis Trustee	1	X						0.	0.	0.
John Manley Trustee	1	X						0.	0.	0.
Nancy Lauter McDougal Trustee	1	X						0.	0.	0.
Eric T. McKissack Trustee	1	X						0.	0.	0.
<b>1 b Total</b>								4,123,338.	0.	1,130,749.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 63

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 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

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of Services	(C) Compensation
US Equities Asset Mgmt LLC 20 N Michigan Ave #400 Chicago, IL 60602	Bldg Maint Services	1,439,716.
Hirtle Callaghan LLC 300 Barr Harbor Dr West Conshohocken, PA 19428	Investmnt Advsr/Mgmt	761,951.
Performance Direct LLC 4241 N Ravenswood Ave #200 Chicago, IL 60613	Membershp Consulting	566,309.
Deloitte & Touche LLP 111 S Wacker Dr Chicago, IL 60606	Audit Services	363,500.
Hinshaw & Culbertson LLP 8142 Solutions Center Dr Chicago, IL 60677	Attorney Services	253,940.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 14

**\*\*PUBLIC DISCLOSURE COPY\*\***

**SCHEDULE J-2**  
**(Form 990)**

**Continuation Sheet for Form 990**

OMB No. 1545-0047

**2009**

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.  
► See instructions for Form 990.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the Organization <b>The Art Institute of Chicago</b>	Employer Identification number <b>36-2167725</b>
---	---

**Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Cary D. McMillan Trustee	1	X						0.	0.	0.
Samuel M. Mencoff Trustee	1	X						0.	0.	0.
Alexandra C. Nichols Trustee	1	X						0.	0.	0.
Cynthia Perucca Trustee	1	X						0.	0.	0.
Thomas J. Pritzker Chairman	1	X						0.	0.	0.
J. Christopher Reyes Trustee	1	X						0.	0.	0.
Linda Johnson Rice Trustee	1	X						0.	0.	0.
Andrew M. Rosenfield Trustee	1	X						0.	0.	0.
John W. Rowe Trustee	1	X						0.	0.	0.
Shirley Welsh Ryan Trustee	1	X						0.	0.	0.
Gordon Segal Trustee	1	X						0.	0.	0.
Brenda Shapiro Trustee	1	X						0.	0.	0.
Edward Byron Smith, Jr. Trustee	1	X						0.	0.	0.
Isabel Carter Stewart Trustee	1	X						0.	0.	0.
Melinda Martin Sullivan Trustee	1	X						0.	0.	0.
Oakleigh Thorne Trustee	1	X						0.	0.	0.
Byron D. Trott Trustee	1	X						0.	0.	0.
David J. Vitale Trustee	1	X						0.	0.	0.
Fredrick H. Waddell Trustee	1	X						0.	0.	0.
Todd Warnock Trustee	1	X						0.	0.	0.
James Cuno President	40			X				655,058.	0.	444,781.

**SCHEDULE J-2**  
(Form 990)**Continuation Sheet for Form 990**

OMB No. 1545-0047

2009

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.  
► See instructions for Form 990.

Name of the Organization

Employer Identification number

The Art Institute of Chicago

36-2167725

<b>Part I</b>	<b>Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b>
---------------	--

[illegible]

# \*\* PUBLIC DISCLOSURE COPY \*\*

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 9

## Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns.....	1a				
	b Membership dues.....	1b	6,057,753.			
	c Fundraising events.....	1c	1,969,554.			
	d Related organizations.....	1d				
	e Government grants (contributions).....	1e	8,016,870.			
	f All other contributions, gifts, grants, and similar amounts not included above.....	1f	50,469,870.			
	g Noncash contribns included in lns 1a-1f: \$		8,364,357.			
	<b>h Total.</b> Add lines 1a-1f.....		66,514,047.			
PROGRAM SERVICE REVENUE			Business Code			
	2a Tuition and Fees.....	611600	115018656.	115018656.		
	b Museum Admissions.....	900099	9,148,433.	9,148,433.		
	c Membership Dues & Assessments.....	900099	5,203,369.	5,203,369.		
	d Other Restricted Prog Rev.....	900099	1,683,739.	1,683,739.		
	e Member Program Revenues.....	900099	974,380.	974,380.		
	f All other program service revenue.....		3,406,244.	2,668,529.		737,715.
	<b>g Total.</b> Add lines 2a-2f.....		135434821.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts).....		7,412,288.			7,412,288.
	4 Income from investment of tax-exempt bond proceeds.....					
	5 Royalties.....		201,763.			201,763.
	6a Gross Rents.....	(i) Real	2,611,785.			
		(ii) Personal				
		b Less: rental expenses.....	1,024,794.			
		c Rental income or (loss).....	1,586,991.			
	d Net rental income or (loss).....		1,586,991.			1,586,991.
	7a Gross amount from sales of assets other than inventory.....	(i) Securities	150859234.	5,970,925.		
		(ii) Other				
		b Less: cost or other basis and sales expenses.....	120570959.	38,750.		
		c Gain or (loss).....	30288275.	5,932,175.		
	d Net gain or (loss).....		36,220,450.			36,220,450.
	8a Gross income from fundraising events (not including \$ 1,969,554. of contributions reported on line 1c). See Part IV, line 18.....	a	802,230.			
		b Less: direct expenses.....	b	1,299,205.		
		c Net income or (loss) from fundraising events.....		-496,975.		
	9a Gross income from gaming activities. See Part IV, line 19.....	a	24,186.			
		b Less: direct expenses.....	b	20,566.		
		c Net income or (loss) from gaming activities.....		3,620.	3,620.	
	10a Gross sales of inventory, less returns and allowances.....	a	16700527.			
b Less: cost of goods sold.....		b	8,077,539.			
c Net income or (loss) from sales of inventory.....			8,622,988.	7,083,739.	1,539,249.	
Miscellaneous Revenue		Business Code				
11a Other Invest. Inc (Loss).....	900099	860,537.		-1,061,220.	1,921,757.	
b Other.....	900099	30,150.			30,150.	
c.....						
d All other revenue.....						
e Total. Add lines 11a-11d.....		890,687.				
<b>12 Total revenue.</b> See instructions.....		256390680.	141784465.	478,029.	47,614,139.	

BAA

TEEA0109L 02/12/10

Form 990 (2009)

**\*\* PUBLIC DISCLOSURE COPY \*\***

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 10

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.	27,712,714.	27,712,714.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	3,765,119.	2,138,198.	1,320,716.	306,205.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	66,741,717.	57,181,466.	7,293,718.	2,266,533.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	7,487,281.	6,021,918.	1,134,715.	330,648.
9 Other employee benefits.	10,812,175.	9,136,929.	1,376,541.	298,705.
10 Payroll taxes.	4,850,933.	4,090,376.	595,087.	165,470.
11 Fees for services (non-employees).				
a Management.				
b Legal.	842,993.		842,993.	
c Accounting.	392,894.		392,894.	
d Lobbying.	14,016.	14,016.		
e Prof fundraising svcs. See Part IV, ln 17.	195,599.			195,599.
f Investment management fees.	1,877,877.		1,877,877.	
g Other.	13,691,244.	12,156,448.	415,802.	1,118,994.
12 Advertising and promotion.	1,542,126.	1,523,310.		18,816.
13 Office expenses.	9,902,159.	8,518,359.	585,218.	798,582.
14 Information technology.	1,720,009.	946,912.	767,328.	5,769.
15 Royalties.	181,594.	181,594.		
16 Occupancy.	17,156,599.	16,166,147.	856,966.	133,486.
17 Travel.	2,638,214.	2,336,547.	31,079.	270,588.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	275,926.	209,977.	57,302.	8,647.
20 Interest.	10,815,726.	10,243,720.	572,006.	
21 Payments to affiliates.	11,865.	11,865.		
22 Depreciation, depletion, and amortization.	25,517,555.	24,394,719.	1,122,836.	
23 Insurance.	1,608,216.	1,608,216.		
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Accessions/Books/Other Art	6,968,062.	6,968,062.		
b Other Expenses	4,854,346.	4,366,440.	326,285.	161,621.
c Furniture, Fixtures, Equipment	4,320,966.	3,952,550.	347,774.	20,642.
d Loss on Debt Defeasance	2,008,400.	1,902,129.	106,271.	
e Exhibition Related Expenses	1,359,658.	1,359,658.		
f All other expenses.				
25 Total functional expenses. Add lines 1 through 24f.	229,265,983.	203,142,270.	20,023,408.	6,100,305.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

BAA

Form 990 (2009)

# \*\*PUBLIC DISCLOSURE COPY\*\*

Form 990 (2009) The Art Institute of Chicago

36-2167725

Page 11

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
<b>ASSETS</b>	<b>1</b> Cash — non-interest-bearing .....		<b>1</b>		
	<b>2</b> Savings and temporary cash investments .....	24,018,043.	<b>2</b>	3,784,874.	
	<b>3</b> Pledges and grants receivable, net .....	74,232,762.	<b>3</b>	56,771,250.	
	<b>4</b> Accounts receivable, net .....	3,660,620.	<b>4</b>	4,778,154.	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....	176,250.	<b>5</b>	171,250.	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....	3,723,794.	<b>7</b>	3,715,772.	
	<b>8</b> Inventories for sale or use .....	7,130,368.	<b>8</b>	7,137,403.	
	<b>9</b> Prepaid expenses and deferred charges .....	6,377,913.	<b>9</b>	6,866,541.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	612,630,336.			
	<b>b</b> Less: accumulated depreciation .....	122,991,478.	486,216,924.	<b>10c</b>	489,638,858.
	<b>11</b> Investments — publicly-traded securities .....	418,278,270.	<b>11</b>	416,411,071.	
	<b>12</b> Investments — other securities. See Part IV, line 11 .....	223,216,104.	<b>12</b>	278,584,873.	
	<b>13</b> Investments — program-related. See Part IV, line 11 .....		<b>13</b>		
	<b>14</b> Intangible assets .....		<b>14</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....	8,369,485.	<b>15</b>	304,334.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1,255,400,533.	<b>16</b>	1,268,164,380.		
<b>LIABILITIES</b>	<b>17</b> Accounts payable and accrued expenses .....	44,750,295.	<b>17</b>	38,693,962.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	24,922,918.	<b>19</b>	18,667,201.	
	<b>20</b> Tax-exempt bond liabilities .....	330,098,613.	<b>20</b>	304,170,901.	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	8,800,000.	<b>23</b>	900,000.	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	42,690,145.	<b>25</b>	58,405,298.	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	451,261,971.	<b>26</b>	420,837,362.	
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	43,012,353.	<b>27</b>	53,965,851.	
	<b>28</b> Temporarily restricted net assets .....	483,495,417.	<b>28</b>	503,678,873.	
	<b>29</b> Permanently restricted net assets .....	277,630,792.	<b>29</b>	289,682,294.	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, and equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
	<b>33</b> Total net assets or fund balances .....	804,138,562.	<b>33</b>	847,327,018.	
	<b>34</b> Total liabilities and net assets/fund balances .....	1,255,400,533.	<b>34</b>	1,268,164,380.	

BAA

Form 990 (2009)

**Part XI Financial Statements and Reporting**

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....

	Yes	No

2a		X
----	--	---

b Were the organization's financial statements audited by an independent accountant? .....

2b	X	
----	---	--

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....

2c	X	
----	---	--

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: .....

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....

3a	X	
----	---	--

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....

3b	X	
----	---	--

BAA

Form 990 (2009)



**\*\* PUBLIC DISCLOSURE COPY \*\***

Schedule A (Form 990 or 990-EZ) 2009 The Art Institute of Chicago

36-2167725

Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'. . . . .)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf . . . . .						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . . . .						
4 <b>Total.</b> Add lines 1-through 3. . . . .						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . . . .						
6 <b>Public support.</b> Subtract line 5 from line 4. . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4. . . . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . . .						
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 IV.) . . . . .						
11 <b>Total support.</b> Add lines 7 through 10. . . . .						
12 Gross receipts from related activities, etc. (see instructions). . . . .					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. . . . .						<input type="checkbox"/>

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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)). . . . .	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14. . . . .	15	%
16a <b>33-1/3 support test – 2009.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. . . . .		
b <b>33-1/3 support test – 2008.</b> If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. . . . .		
17a <b>10%-facts-and-circumstances test – 2009</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. . . . .		
b <b>10%-facts-and-circumstances test – 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. . . . .		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. . . . .		

BAA

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 <b>Total.</b> Add lines 1 through 5.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 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.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 <b>Total support.</b> (add lns 9, 10c, 11, and 12.)						
14 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15.	16	%

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

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17.	18	%
19a <b>33-1/3 support tests — 2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b <b>33-1/3 support tests — 2008.</b> If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ <input type="checkbox"/>		

**\*\*PUBLIC DISCLOSURE COPY\*\***

Schedule A (Form 990 or 990-EZ) 2009 The Art Institute of Chicago

36-2167725

Page 4

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area for supplemental information with horizontal dashed lines.

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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. ▶ See separate instructions.**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

**If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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,' to 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,' to Form 990, Part IV, line 5 (Proxy Tax), then**

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

Name of organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures. ▶ \$ \_\_\_\_\_

3 Volunteer hours. ▶ \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ \_\_\_\_\_ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ \_\_\_\_\_ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If 'Yes,' describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ \_\_\_\_\_

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ \_\_\_\_\_

3 Total of exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ \$ \_\_\_\_\_

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**\*\* PUBLIC DISCLOSURE COPY \*\*****Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check ☐ if the filing organization belongs to an affiliated group.  
**B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply.

**Limits on Lobbying Expenditures –  
(The term 'expenditures' means amounts paid or incurred.)****(a)** Filing  
organization's totals**(b)** Affiliated  
group totals**1 a** Total lobbying expenditures to influence public opinion (grass roots lobbying) .....**b** Total lobbying expenditures to influence a legislative body (direct lobbying) .....**c** Total lobbying expenditures (add lines 1a and 1b) .....**d** Other exempt purpose expenditures .....**e** Total exempt purpose expenditures (add lines 1c and 1d) .....**f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

**g** Grassroots nontaxable amount (enter 25% of line 1f) .....**h** Subtract line 1g from line 1a. If zero or less, enter -0- .....**i** Subtract line 1f from line 1c. If zero or less, enter -0- .....**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No**4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)****Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2 a</b> Lobbying non-taxable amount .....					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e)) .....					
<b>c</b> Total lobbying expenditures .....					
<b>d</b> Grassroots nontaxable amount .....					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) .....					
<b>f</b> Grassroots lobbying expenditures .....					

BAA

Schedule C (Form 990 or 990-EZ) 2009

**\*\* PUBLIC DISCLOSURE COPY \*\***

**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)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities? If 'Yes,' describe in Part IV. See Part IV.	X		14,016.
j Total. Add lines 1c through 1i			14,016.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions).	5	

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

**Part II-B, Line 1i - Other Activities Description**

The amount represents the Art Institute of Chicago's portion of funds utilized by Museums in the Park for lobbying activities.

**\*\*PUBLIC DISCLOSURE COPY\*\***

## Part IV Supplemental Information (continued)

[illegible]

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

- ▶ **Complete if the organization answered 'Yes,' to Form 990,  
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**  
▶ **Attach to Form 990. ▶ See separate instructions**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts** Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit??..... <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements.....	2a
b Total acreage restricted by conservation easements.....	2b
c Number of conservation easements on a certified historic structure included in (a).....	2c
d Number of conservation easements included in (c) acquired after 8/17/06.....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds?..... ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?..... ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. See Part XIV

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1..... ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X..... ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1..... ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X..... ▶ \$ \_\_\_\_\_

# **\*\*PUBLIC DISCLOSURE COPY\*\***

Schedule D (Form 990) 2009 The Art Institute of Chicago

36-2167725

Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☒ Public exhibition

d ☒ Loan or exchange programs

b ☒ Scholarly research

e ☐ Other \_\_\_\_\_

c ☒ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. See Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

**Part IV Escrow and Custodial Arrangements** Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

c Beginning balance

Amount

d Additions during the year

e Distributions during the year

f Ending balance

1c

1d

1e

1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

**Part V Endowment Funds** Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	616,716,313.	840,448,838.			
b Contributions	25,467,861.	10,847,284.			
c Net Investment earnings, gains, and losses	64,519,514.	-189934854.			
d Grants or scholarships	3,199,183.	2,778,756.			
e Other expenditures for facilities and programs	37,713,043.	38,338,254.			
f Administrative expenses	1,877,877.	3,527,945.			
g End of year balance	663,913,585.	616,716,313.			

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ 34.00 %

b Permanent endowment ▶ 44.00 %

c Term endowment ▶ 22.00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds. See Part XIV

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land		11,324,688.		11,324,688.
b Buildings		58,517,837.	19,093,585.	39,424,252.
c Leasehold improvements		525,838,737.	97,347,173.	428,491,564.
d Equipment		12,747,352.	4,817,289.	7,930,063.
e Other		4,201,722.	1,733,431.	2,468,291.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 489,638,858.

BAA

Schedule D (Form 990) 2009



**\*\*PUBLIC DISCLOSURE COPY\*\***

Schedule D (Form 990) 2009 The Art Institute of Chicago

36-2167725

Page 4

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

N/A

1	Total revenue (Form 990, Part VIII, column (A), line 12) .....	
2	Total expenses (Form 990, Part IX, column (A), line 25) .....	
3	Excess or (deficit) for the year. Subtract line 2 from line 1 .....	
4	Net unrealized gains (losses) on investments .....	
5	Donated services and use of facilities .....	
6	Investment expenses .....	
7	Prior period adjustments .....	
8	Other (Describe in Part XIV) .....	
9	Total adjustments (net). Add lines 4 through 8 .....	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 .....	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** N/A

1	Total revenue, gains, and other support per audited financial statements .....	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments .....	2a	
b	Donated services and use of facilities .....	2b	
c	Recoveries of prior year grants .....	2c	
d	Other (Describe in Part XIV) .....	2d	
e	Add lines 2a through 2d .....	2e	
3	Subtract line 2e from line 1 .....	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b .....	4a	
b	Other (Describe in Part XIV) .....	4b	
c	Add lines 4a and 4b .....	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) .....	5	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return** N/A

1	Total expenses and losses per audited financial statements .....	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities .....	2a	
b	Prior year adjustments .....	2b	
c	Other losses .....	2c	
d	Other (Describe in Part XIV) .....	2d	
e	Add lines 2a through 2d .....	2e	
3	Subtract line 2e from line 1 .....	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b .....	4a	
b	Other (Describe in Part XIV) .....	4b	
c	Add lines 4a and 4b .....	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .....	5	

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**Part III, Line 1a - F/S Footnote For Art, Treasures, Etc.**

From Page 7 of the Institute's Consolidated Audited Financial Statements: "Art

Objects and Library Collections - The value of the art objects in the permanent

collection, as well as the holdings of the libraries, is excluded from the

consolidated statements of financial position. Additions to the permanent collection

are made either by gifts, bequests, or through purchases using Institute acquisition

funds. Institute acquisition funds may be classified as permanently restricted, for

which only the income earned on principal balances may be used for acquisitions;

**Part XIV Supplemental Information** (continued)

**Part III, Line 1a - F/S Footnote For Art, Treasures, Etc. (continued)**

temporarily restricted, for which both the principal and earned income may be used for acquisitions; or unrestricted, representing funds designated by the Board to be used for acquisitions.

The withdrawal of works of art from the collection of the Institute is performed in accordance with a formal policy adopted in 1975. The objects are generally offered for sale at a public auction, and the proceeds from such sales are classified as temporarily restricted for the purchase of works of art. All works of art and certain library collections are held for public exhibition, education, or research; are protected, kept unencumbered, cared for, and preserved; and are subject to strict organizational policies governing their use. The value of the Institute's permanent collection is not subject to reasonable estimation."

**Part III, Line 4 - Description Of Organization's Collections And How Furthers Exempt Purpose**

The Institute's permanent collection consists of art objects as well as the holdings of the libraries. All works of art and certain library collections are held for public exhibition, education, or research in furtherance of the Institute's exempt purpose.

**Part V, Line 2c - Term Endowment Percentage**

Includes term endowment funds and portion of perpetual endowment funds subject to a time restriction under UPMIFA.

**Part V, Line 4 - Intended Uses Of Endowment Fund**

The Institute establishes endowment funds for the purpose of investing assets in a manner that preserves the real value of the endowment principal and, in addition, provides spendable funds that can be used to fulfill the purposes for which the endowments were established. The Institute's Investment and Executive Committees determine the method to be used to appropriate endowment funds for expenditure. The appropriation amounts are determined as of the end of the year, prior to when it becomes available for expenditure, and is equal to the spendable amount or additional

**Part XIV** Supplemental Information *(continued)*

**Part V, Line 4 - Intended Uses Of Endowment Fund (continued)**

amounts as approved by the Executive Committee during the year. Depending upon market conditions and the needs and available resources of the Institute, appropriations for expenditure from individual endowments may be temporarily suspended to facilitate preservation of the endowment or in excess of the spending policy as deemed prudent by the Committees.

**Part X - FIN 48 Footnote**

From Page 9 of the Institute's Consolidated Audited Financial Statements: "The Institute is a not-for-profit corporation exempt from federal income tax under Section 501(a) of the Internal Revenue Code, as an organization described in Section 501(c)(3); the Institute is similarly exempt from state income taxes. Despite the general exemption from income taxation, the Institute is subject to federal and state income tax at corporate rates on its unrelated business income."

**\*\* PUBLIC DISCLOSURE COPY \*\***

**SCHEDULE E**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Schools**

- ▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 13,  
or Form 990-EZ, Part VI, line 48.**  
▶ **Attach to Form 990 or Form 990-EZ.**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

	YES	NO
<b>1</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	<b>1</b> X	
<b>2</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....	<b>2</b> X	
<b>3</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it had no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe. If 'No,' please explain. If you need more space, use Schedule O (Form 990) .....	<b>3</b> X	
<u>The nondiscriminatory policy is publicized in a variety of materials,</u> <u>including the student bulletin, the course schedule issued each semester,</u> <u>initial marketing material, and the student handbook.</u>		
<b>4</b> Does the organization maintain the following?		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? .....	<b>4a</b> X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	<b>4b</b> X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	<b>4c</b> X	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? .....	<b>4d</b> X	
If you answered 'No,' to any of the above, please explain. If you need more space, use Schedule O (Form 990).		
<b>5</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? .....		<b>5a</b> X
<b>b</b> Admissions policies? .....		<b>5b</b> X
<b>c</b> Employment of faculty or administrative staff? .....		<b>5c</b> X
<b>d</b> Scholarships or other financial assistance? .....		<b>5d</b> X
<b>e</b> Educational policies? .....		<b>5e</b> X
<b>f</b> Use of facilities? .....		<b>5f</b> X
<b>g</b> Athletic programs? .....		<b>5g</b> X
<b>h</b> Other extracurricular activities? .....		<b>5h</b> X
If you answered 'Yes,' to any of the above, please explain. If you need more space, use Schedule O (Form 990).		
<b>6a</b> Does the organization receive any financial aid or assistance from a governmental agency? .....	<b>6a</b> X	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? .....		<b>6b</b> X
If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990).		
<b>7</b> Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' explain on Schedule O (Form 990) .....	<b>7</b> X	

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

Schedule **E** (Form 990 or 990-EZ) 2009

**\*\*PUBLIC DISCLOSURE COPY\*\*****Schedule F  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Statement of Activities Outside the United States**

- **Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.**  
 ► **Attach to Form 990. ► See separate instructions.**

OMB No. 1545-0047

**2009****Open to Public  
Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I General Information on Activities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?... ☐ Yes ☐ No

- 2 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

- 3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Central Amer & Caribbean	0	0	Passive Investments	N/A	0.
Central Amer & Caribbean	0	0	Program Services	Travel/Educt'l	2,502.
East Asia & the Pacific	0	0	Program Services	Exhibition Exp	8,628.
East Asia & the Pacific	0	0	Program Services	Scholarly Publ.	82,599.
East Asia & the Pacific	0	0	Program Services	Study Tours	25,303.
East Asia & the Pacific	0	0	Program Services	Travel/Educt'l	80,392.
East Asia & the Pacific	0	0	Program Services	Travel/Recruit.	24,473.
Europe	0	0	Passive Investments	N/A	0.
Europe	0	0	Program Services	Exhibition Exp	65,660.
Europe	0	0	Program Services	Scholarly Publ.	422,806.
Europe	0	0	Program Services	Travel/Educt'l	151,678.
Europe	0	0	Program Services	Travel/Exhib	21,222.
Europe	0	0	Program Services	Travel/Recrut'g	1,227.
Europe	0	1	Program Services	Study Tours	441,098.
Middle East & N. Africa	0	0	Program Services	Travel/Educt'l	4,899.
North America	0	0	Marketing	N/A	892.
North America	0	0	Passive Investments	N/A	0.
<b>Totals</b> .....	0	1			1,553,732.

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

Schedule F (Form 990) (2009)

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. . . . ☐ X

[illegible]

<b>2</b>	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501 (c)(3) equivalency letter.	0
<b>3</b>	Enter total number of other organizations or entities.	0

**BAA**  
**Schedule F (Form 990) 2009**



**Part IV** Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Area for supplemental information with horizontal dashed lines.



**SCHEDULE G**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18,  
or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.  
Form 990EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Mail solicitations               | <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <input checked="" type="checkbox"/> Internet and email solicitations | <input checked="" type="checkbox"/> Solicitation of government grants     |
| <input checked="" type="checkbox"/> Phone solicitations              | <input checked="" type="checkbox"/> Special fundraising events            |
| <input checked="" type="checkbox"/> In-person solicitations          |   |

**2a** Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

**b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col.(i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SD&A Teleservice, Inc.	Telemarketing		X	434,737.	195,599.	239,138.
<b>Total</b>				434,737.	195,599.	239,138.

**3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

IL AL AK AZ CA CO FL KS KY LA MD MA MI MS NH NJ NY ND OH OK OR SC UT VA WA WI

**\*\*PUBLIC DISCLOSURE COPY\*\***

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 Matisse Gala (event type)	(b) Event #2 Photoghy Gala (event type)	(c) Other Events 11 (total number)	(d) Total Events (Add col. (a) through col. (c))
1	Gross receipts .....	840,865.	414,347.	1,516,572.	2,771,784.
2	Less: Charitable contributions .....	739,659.	223,492.	1,006,403.	1,969,554.
3	Gross income (line 1 minus line 2) .....	101,206.	190,855.	510,169.	802,230.
DIRECT EXPENSES	4	Cash prizes .....			
	5	Noncash prizes .....			
	6	Rent/facility costs .....			
	7	Food and beverages .....			
	8	Entertainment .....			
	9	Other direct expenses .....	311,202.	144,901.	843,102.
	10	Direct expense summary. Add lines 4- through 9 in column (d) .....			1,299,205.
	11	Net income summary. Combine lines 3, column (d) and line 10 .....			-496,975.

**Part III Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
1	Gross revenue .....			24,186.	24,186.
DIRECT EXPENSES	2	Cash prizes .....			
	3	Non-cash prizes .....		20,566.	20,566.
	4	Rent/facility costs .....			
	5	Other direct expenses .....			
6	Volunteer labor .....	<input type="checkbox"/> Yes _____ 0 % <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes _____ 0 % <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes _____ 100 % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d) .....				20,566.
8	Net gaming income summary. Combine lines 1, column (d) and line 7 .....				3,620.

9 Enter the state(s) in which the organization operates gaming activities: IL

a Is the organization licensed to operate gaming activities in each of these states?

b If 'No,' explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If 'Yes,' explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	YES	NO
9a	X	
10a		X
11	X	
12		X

**\*\*PUBLIC DISCLOSURE COPY\*\***

Schedule G (Form 990 or 990-EZ) 2009 The Art Institute of Chicago

36-2167725

Page **3**

**13** Indicate the percentage of gaming activity operated in:

<b>a</b> The organization's facility .....	<b>13a</b> 83.0 %
<b>b</b> An outside facility .....	<b>13b</b> 17.0 %

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name: ▶ Patricia C. Rowlands

Address: ▶ 111 South Michigan Avenue, Chicago, IL 60603

**15a** Does the organization have a contact with a third party from whom the organization receives gaming revenue? .....

<b>15a</b>	YES	NO
		X

**b** If 'Yes,' enter the amount of gaming revenue received by the organization \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_.

**c** If 'Yes,' enter name and address of the third party:

Name: ▶ \_\_\_\_\_

Address: ▶ \_\_\_\_\_

**16** Gaming manager information

Name: ▶ N/A

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided: ▶ \_\_\_\_\_

☐ Director/officer

☐ Employee

☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? .....

<b>17a</b>	YES	NO
		X

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ▶ \$ \_\_\_\_\_

**BAA**

TEEA3703L 02/05/10

Schedule G (Form 990 or 990-EZ) 2009

OMB No: 1545-0047

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.  
▶ Attach to Form 990.

Employer identification number

36-2167725

## 2009

Open to Public Inspection

☒ Yes ☐ No

**Part II** **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

2	Enter total number of section 501(c)(3) and government organizations.	0
3	Enter total number of other organizations.	0

TFFA3901 02/10/10

Schedule I (Form 990) 2009

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Student Scholarships and Stipends	2,694	27,712,714.		N/A	N/A

**Part IV**      **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

**Part I, Line 2 - Grantmaker's Description of How Grants are Used**

Scholarships and stipends are available to undergraduate students and graduate students through the admissions process. Once awarded depending on the type of aid, payment is credited to either the student account or directly to the student. All payments are monitored and approved by the Financial Services department before payment is applied or paid to the student. All students receiving scholarships and stipends have been selected on a non-discriminatory basis.

**\*\*PUBLIC DISCLOSURE COPY\*\***

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

- **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.**  
► **Attach to Form 990.** ► **See separate instructions.**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I Questions Regarding Compensation**

**1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. **Part III**

- |   |   |
|---|---|
| <input type="checkbox"/> First-class or charter travel                        | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain. **1 b**

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? **2**

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4 a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4 b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4 c**
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. **Part III**

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5 a**
- b** Any related organization? **5 b**
- If 'Yes' to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6 a**
- b** Any related organization? **6 b**
- If 'Yes' to line 6a or 6b, describe in Part III.

**7** For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III. **7**

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III. **Part III** **8**

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

Yes No

1 b X

2 X

4 a X

4 b X

4 c X

5 a X

5 b X

6 a X

6 b X

7 X

8 X

9 X

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
James Cuno	(i) 626,548	(ii) 0	(iii) 28,510	421,341	23,440	1,099,839	1,900
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Wellington Reiter	(i) 434,189	(ii) 0	(iii) 113,596	22,050	22,210	592,045	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Julia E. Getzels	(i) 268,761	(ii) 0	(iii) 40,760	43,816	22,722	376,059	23,602
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Eric Anyah	(i) 203,800	(ii) 0	(iii) 23,787	16,581	10,334	254,502	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Edward McNulty	(i) 233,512	(ii) 0	(iii) 35,176	70,773	14,417	353,878	12,932
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Meredith Mack	(i) 229,577	(ii) 0	(iii) 55,579	41,995	9,126	336,277	16,358
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Mary Jane Drews	(i) 204,224	(ii) 0	(iii) 40,019	49,559	12,402	306,204	95
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Elizabeth Grainer	(i) 157,042	(ii) 0	(iii) 23,054	44,453	7,617	232,166	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Lisa Wainwright	(i) 174,476	(ii) 0	(iii) 9,260	17,024	13,389	214,149	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Anthony Jones	(i) 258,407	(ii) 0	(iii) 162,961	161,786	19,871	603,025	108,713
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Eugene Adams	(i) 158,385	(ii) 0	(iii) 28,629	29,484	20,018	236,516	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Karen Savage Martin	(i) 46,655	(ii) 0	(iii) 167,642	6,611	8,171	229,079	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Theodore Halkin	(i) 44,509	(ii) 0	(iii) 162,482	4,468	7,894	219,353	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
Steven Waldeck	(i) 42,438	(ii) 0	(iii) 149,360	4,122	5,075	200,995	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
	(i) 0	(ii) 0	(iii) 0	0	0	0	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0
	(i) 0	(ii) 0	(iii) 0	0	0	0	0
	(ii) 0	(ii) 0	(ii) 0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Part J, Line 1a - Relevant Information Regarding Compensation Benefits

The Presidents of the Museum and the School are allowed to have their spouses accompany them on business related trips with certain limitations outlined in the employment contracts. The spousal travel is reported as base compensation. During calendar year 2009 no spousal travel occurred for the President of the Museum. The President of the School had \$8,374 of spousal travel during calendar year 2009 which was reported as base compensation.

The President of the School received a housing stipend. Additionally, this housing stipend was grossed-up for applicable taxes. The stipend and gross-up were both addressed in the President's employment contract.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation

The following individuals participated in a supplemental non qualified retirement plan:

James Cuno amount paid in calendar year 2009 of \$1,900

Julia E. Getzels amount paid in calendar year 2009 of \$23,602

Edward McNulty amount paid in calendar year 2009 of \$12,932

Meredith Mack amount paid in calendar year 2009 of \$16,358

Mary Jane Drews amount paid in calendar year 2009 of \$95

Anthony E. Jones amount paid in calendar year 2009 of \$108,713

**Part III** Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

**Part I, Line 8 - Amounts Reported Pursuant to a Contract Subject to Initial Contract**

The payments reported in Form 990, Part VII for the President of the School of the Art Institute, were paid pursuant to a contract that was subject to the initial contract exception described in Regs. Section

53.4958-4(a)(3). The initial contract exception applies because the payments were made pursuant to a

written contract and, as a new hire with no previous connection to the organization, Mr. Reiter was not a

disqualified person immediately prior to entering the contract. The payments were fixed payments as defined

under Regs. Section 53.4958-4(a)(3)(ii).

Although the initial contract exception applies to these payments, the Executive Committee of the Board of Trustees reviewed compensation survey data prepared by the Institute's outside compensation expert and

considered other relevant factors to determine the appropriate initial offer. One member of the Executive

Committee, an independent Trustee, then oversaw the ensuing contract negotiations. The Institute's outside

compensation expert was consulted during the course of the negotiations to assure that the compensation

under discussion was competitively reasonable. The final terms were reviewed by the compensation expert,

who determined that the total remuneration was competitively reasonable, and then approved by the

independent Trustee in consultation with the Chairman of the Board of Trustees. The Board of Trustees

received a description of the terms of the compensation package before voting to hire Mr. Reiter.

**SCHEDULE K**  
**(Form 990)**

## Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).  
▶ Attach to Form 990. See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

2009

**Open to Public Inspection**

Part I	Bond Issues
--------	-------------

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer
						Yes	No	
A IL Educ Facil Authority	52-1297563	4520015W6	7/09/2003	18,737,797.	Refund 6/16/1993 Bonds			X
B IL Finance Authority	86-1091967	45200FVM8	3/26/2009	139,158,000.	Constr./Renov. Museum Facil		X	X
C IL Finance Authority	86-1091967	45200F3N7	6/09/2010	113,537,854.	See Schedule O		X	X
D IL Finance Authority	86-1091967	45200F3B3	5/20/2010	55,941,880.	Ref. 3/26/2009 2009B Bonds		X	X
F								

Part II	Proceeds
---------	----------

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Total proceeds of issue	18,750,756		139,158,000		113,537,854		55,941,880			
2 Gross proceeds in reserve funds										
3 Proceeds in refunding or defeasance escrows					36,731,866					
4 Other unspent proceeds										
5 Issuance costs from proceeds	219,546									
6 Working capital expenditures from proceeds	30,148									
7 Capital expenditures from proceeds			139,158,000							
8 Year of substantial completion	1988		2009		2002		2002			
9 Were the bonds issued as part of a current refunding issue?	X		X		X		X			
10 Were the bonds issued as part of an advance refunding issue?		X	X		X		X			
11 Has the final allocation of proceeds been made?	X		X		X		X			
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X			

Part III	Private Business Use
----------	----------------------

Part III Private Business Use											
	A		B		C		D		E		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . . . . .				X				X			
2 Are there any lease arrangements with respect to the financed property which may result in private business use? . . . . .				X				X			

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule K (Form 990) 2009

**Part III Private Business Use (Continued)**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use? .....				X				X		
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use? .....				X				X		
<b>3 c</b> Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property? .....			X				X			
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....				0.000 %				0.000 %		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....				0.000 %				0.000 %		%
<b>6</b> Total of lines 4 and 5 .....				%				%		%
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? .....			X				X			

**Part IV Arbitrage**

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? .....		X		X		X		X		
<b>2</b> Is the bond issue a variable rate issue? .....		X	X			X		X		
<b>3a</b> Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records? .....		X		X		X		X		
<b>b</b> Name of provider .....	N/A		N/A		N/A		N/A			
<b>c</b> Term of hedge .....										
<b>4a</b> Were gross proceeds invested in a GIC? .....		X		X		X		X		
<b>b</b> Name of provider .....	N/A		N/A		N/A		N/A			
<b>c</b> Term of GIC .....										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....										
<b>5</b> Were any gross proceeds invested beyond an available temporary period? .....		X		X		X		X		
<b>6</b> Did the bond issue qualify for an exception to rebate? .....	X		X			X	X			

**BAA**

Schedule K (Form 990) 2009

**SCHEDULE L**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**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. ► See separate instructions.**

OMB No. 1545-0047

**2009****Open to Public Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. . . . . ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. . . . . ► \$

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
James Cuno		X	200,000.	171,250.		X	X		X	
Mortgage Loan										
<b>Total</b> . . . . .				► \$ 171,250.						

**Part III Grants or Assistance Benefitting Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(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
W Daley JPMorganChase Officer	Trustee	818,675.	LOC/Banking Serv.		X
A Jones Spouse Patty Carroll	Chanc/Prev Officer	14,440.	Employee Compensation		X
J Rowe Exelon CEO/Director	Trustee	1,054,391.	ComEd Electrical Serv.		X
J Rowe Nthrn Trst Board Memb	Trustee	668,850.	Inv.Custody/Perf Serv.		X
F Waddell Nthrn Trst Pres/CEO	Trustee	668,850.	Inv.Custody/Perf Serv.		X
S Ryan Spouse AON Chairman	Trustee	386,375.	Insurance Serv/Consult.		X

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

Schedule L (Form 990 or 990-EZ) 2009

**\*\*PUBLIC DISCLOSURE COPY\*\*****SCHEDULE M  
(Form 990)****Noncash Contributions**

OMB No. 1545-0047

**2009****Open To Public  
Inspection**Department of the Treasury  
Internal Revenue Service

- **Complete if the organizations answered 'Yes'**  
on Form 990, Part IV, lines 29 or 30.  
► **Attach to Form 990.**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Part I Types of Property**

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art.....	X	388	1.	See Part II
2 Art—Historical treasures.....				
3 Art—Fractional interests.....	X	71	0.	See Part II
4 Books and publications.....	X		4,060.	FMV
5 Clothing and household goods.....				
6 Cars and other vehicles.....				
7 Boats and planes.....				
8 Intellectual property.....				
9 Securities—Publicly traded.....	X	117	7,873,022.	FMV
10 Securities—Closely held stock.....				
11 Securities—Partnership, LLC, or trust interests.....				
12 Securities—Miscellaneous.....				
13 Qualified conservation contribution— Historic structures.....				
14 Qualified conservation contribution—Other.....				
15 Real estate—Residential.....				
16 Real estate—Commercial.....				
17 Real estate—Other.....				
18 Collectibles.....				
19 Food inventory.....				
20 Drugs and medical supplies.....				
21 Taxidermy.....				
22 Historical artifacts.....				
23 Scientific specimens.....				
24 Archeological artifacts.....				
25 Other ► (Special Events).....	X	193	274,698.	FMV
26 Other ► (Equipment).....	X	1	33,700.	FMV
27 Other ► (Airfare).....	X	255	178,877.	FMV
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement.....

29

22

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?.....

	Yes	No
30 a		X
31	X	
32 a	X	

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?.....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.....

b If 'Yes,' describe in Part II.

See Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

See Part II

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule M (Form 990) 2009

**\*\*PUBLIC DISCLOSURE COPY\*\***

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

**Part I, Line 32 - Hire and Use of Third Parties**

The Institute utilizes its investment custodian Northern Trust to receive and sell stock gifts made to the organization.

**Part II, Line 33 - Revenue Not Reported in Column C**

The Institute does not capitalize its collection items nor report contributions of collection items as revenue as permitted under generally accepted accounting principles.

**\*\*PUBLIC DISCLOSURE COPY\*\***

**SCHEDULE O**  
**(Form 990)**

**Supplemental Information to Form 990**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Form 990, Part V, Line 7g**

The Institute is not required to file Form 8899. The Institute receives contributions of intellectual property from time to time, however, the type of property contributed does not meet the definition of "qualified intellectual property" for Form 8899 filing purposes.

**Form 990, Part V, Line 7h**

Form 1098-C is not applicable to the Institute.

**Form 990, Part VII, Line 1a, Column B**

The amount of hours per week devoted to position has been noted as 1 hour for all Trustees. The amount of hours per week devoted by Trustees varies depending on the position held and the committees the Trustee devotes time to.

**Schedule A, Part I, Line 2**

Although The Art Institute of Chicago is exempt under two categories listed in Part I, box 2 which describes a school, section 170(b)(1)(A)(ii) and box 6 which describes an organization that normally receives a substantial part of its support from a governmental unit or from the general public, Section 170(b)(1)(A)(vi). The Art Institute of Chicago has selected box 2, because per instructions only one applicable box should be checked.

**Schedule B, Special Rules, Box 1**

The Art Institute of Chicago is exempt under two categories listed in Schedule A Part I, box 2 which describes a school, section 170(b)(1)(A)(ii) and box 7 which describes an organization that normally receives a substantial part of its support from a governmental unit or from the general public, Section 170(b)(1)(A)(vi).

The Art Institute of Chicago has selected box 2, because per instructions only one applicable box should be checked. Because the Institute is also exempt under Schedule A Part I box 7, Schedule B Parts I and II have been completed under the

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

Special Rules Box 1 as the Institute has met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi).

**Schedule K, Part I, Line C, Column F**

Description of Purpose - Refund 10/15/1992 Bonds, Refund 2/23/1995 Bonds, Refund 3/27/1996 Bonds, and Advance Refund Portion of 2/9/2000 Series 2000A Bonds.

**Schedule K, Part II, Question 11**

Bond Issue "D" - The Borrower reserves the right to modify final allocation.

**Form 990, Part III, Line 1 - Organization Mission**

The Art Institute of Chicago's primary exempt purpose is to found, build, maintain and operate museums, schools, and libraries of art and theatres; to provide support facilities in connection therewith; to conduct appropriate activities conducive to the artistic development of the region; and to conduct and participate in activities of national and international significance.

**Form 990, Part III, Line 4b - Program Service Accomplishments**

The Museum provides a variety of educational programs focusing on the collection, conservation, research, publication, exhibition, and interpretation of the museum's internationally significant permanent collection of art. The museum also presents temporary exhibitions of international importance, which include loaned objects from other collections. Included in the exhibition programming for fiscal year 2010 were several non-ticketed temporary exhibitions, including Cy Twombly: The Natural World, Matisse: Radical Invention, Apostles of Beauty: Arts and Crafts from Britain to Chicago, Beyond Golden Clouds: Japanese Screens from the Art Institute of Chicago and Saint Louis Art Museum, and Contemporary Photography. In May 2009, the Art Institute of Chicago celebrated the opening of The Modern Wing. The new building has allowed us to expand our mission as Chicago's encyclopedic art museum, with beautiful new galleries for our modern and contemporary collections and a new center for museum education. During fiscal year 2010, the first full year of operating our

**\*\*PUBLIC DISCLOSURE COPY\*\***

Schedule O (Form 990) 2009

Page 2

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Form 990, Part III, Line 4b - Program Service Accomplishments (continued)**

expanded facility, the museum served 1.8 million visitors.

**Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.**

A family relationship exists between Trustees Robert Bergman and Andrew M. Rosenfield. Business relationship(s) exist between the following Trustees: Samuel M. Mencoff and John A. Edwardson; Thomas J. Pritzker and Byron Trott; Thomas J. Pritzker and Samuel M. Mencoff; Byron Trott and Janet Duchossois; Byron Trott and A. Steven Crown; John W. Rowe and Frederick H. Waddell; John W. Rowe and Marshall Field.

**Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder**

Members of the Institute consist of 5 classes: Governing, Honorary Governing, Life, Honorary Life and Annual. All Governing, Honorary Governing and Honorary Life Members shall be elected by the Board of Trustees from among those persons who meet the qualifications as set forth below, except that all persons who are elected Benefactors shall become Honorary Governing Members and shall have the privileges of Governing Members.

Governing Members, not to exceed 1,500, are elected from Members that have demonstrated a significant interest in the programs of the Institute and made a contribution to the unrestricted endowment fund in such sum as determined from time to time by the Board of Trustees. A donor at the Sustaining Fellow level automatically becomes a Governing Member after a third consecutive annual Fellows gift and serves as long as Fellow status is retained. Once a donor's cumulative giving totals \$50,000, the donor becomes an Honorary Governing Member with all the rights and privileges of a Governing Member.

Any person at least 18 years of age may become a Life Member upon the payment of

Name of the organization

Employer identification number

The Art Institute of Chicago

36-2167725

**Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder (continued)**

such sum as may be fixed from time to time by the Board of Trustees, which sum shall be credited to an unrestricted endowment fund. Each Life Member shall be entitled to all the rights and privileges of Annual Members without payment of dues.

Honorary Life Members shall be chosen from among persons who have rendered continuing financial support or performed continuing voluntary services for the Institute or have attained distinction as artists, patrons of art, or educators.

Any person may become an Annual Member upon such terms as may be fixed from time to time by the Board of Trustees.

The sole right of Governing Members and Honorary Governing Members is to elect Trustees at the annual Governing Members meeting.

**Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body**

Final authority for the management of the Institute is vested in a Board of Trustees (the "Trustees"), 45 voting Trustees per the Institute's bylaws. The Governing Members of the Institute meet annually to elect 40 of the voting Trustees, who serve for staggered four-year terms. The remaining 5 voting Trustees consist of the following individuals who serve ex officio, unless they are elected by the Governing Members: Chairman of the Board of Governors of the School, the President of the Institute's Woman's Board, the President of the Auxiliary Board, the President of the Sustaining Fellows and the Chair of the Leadership Advisory Committee, each of whom serves as a voting Trustee for as long as the office is held. The President and the General Superintendent of the Chicago Park District and the Mayor and Comptroller of the City of Chicago, Illinois are ex-officio Honorary Trustees without voting rights. The President and Director of the Museum and the President

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body (continued)**

of the School serve as ex-officio Trustees without voting rights.

**Form 990, Part VI, Line 11 - Form 990 Review Process**

The Form 990 is reviewed by the Institute's Audit Committee before filing with the Internal Revenue Service. The Board of Trustees are provided a copy of the Form 990.

**Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts**

All members of the Board of Trustees, Board of Governors, and Standing and Advisory Committees, and all officers and assistant officers of the Institute (collectively known as "Related Parties") must act in the best interests of the Institute, without regard to their business, family, or personal activities and concerns. If a Related Party believes he or she has an actual or potential financial conflict of interest, the Related Party shall immediately disclose such conflict to the Chairman of the Board and to the Institute's General Counsel. The Related Party may not vote on, approve, or recommend any action or matter in which he or she has an actual or potential conflict of interest. The Related Party shall not be counted for purposes of determining whether there is a quorum. Financial interests or other activities that would constitute a conflict of interest if undertaken by a Related Party also constitute a conflict of interest if undertaken by an immediate family member of the Related Party and must be disclosed by the Related Party. All Related Parties, other than members of the curatorial and library Advisory Committees, are required to attest annually to their familiarity with this policy and to provide any information the Institute deems relevant concerning any possible conflicts of interest. The annual conflict of interest replies are logged and monitored by the Institute's General Counsel's office.

Name of the organization

Employer identification number

The Art Institute of Chicago

36-2167725

**Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees**

The Institute's Executive Committee, composed entirely of independent Trustees, approves compensation for the President & Director of the Museum and for the President of the School. The Institute's Compensation Committee, composed entirely of independent Trustees and Life Trustees, approves compensation for other employed officers and for certain key employees.

The two committees use the following process in considering compensation. The Institute's outside compensation expert prepares a written compensation analysis report for each person whose compensation is to be presented to either the Executive Committee or the Compensation Committee. That report includes information such as a valuation of the proposed total remuneration, comparison data on total remuneration provided by similar institutions for similar services, an analysis of how the proposed remuneration compares to competitive practice, and conclusions on the competitive reasonableness of the proposed compensation. The report is provided to the Committee in advance of the meeting. The Committee may also receive other written materials relevant to compensation, such as performance evaluations.

At the meeting, the compensation expert and/or the Institute's Vice President for Human Resources reviews the compensation analysis report with the Committee. The Committee also receives input from officers and Trustees on the performance of the persons being reviewed. Committee deliberations and decisions on compensation are documented in contemporaneous meeting minutes. In the case of the President & Director of the Museum and the President of the School, the decisions may be reflected in employment contracts as well.

For key employees' whose compensation is not reviewed and approved by the

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

**Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees (continued)**

Compensation Committee, their compensation is based on independent salary surveys maintained by the Institute's Human Resources Department and is decided by the employee's supervisor based on factors such as experience and performance.

**Form 990, Part VI, Line 17 - List of States which this Return is Filed**

IL AL AK AZ CA CO KS KY LA MD MA MI MS NH NJ NY ND OH OK OR SC UT VA WA WI

**Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available**

The Institute's governing documents are available to the public through applicable governmental agencies and via written request to the Institute. The Institute's financial statements are available to the public via the Institute's own website, via the Illinois Attorney General's website and upon written request. The conflict of interest policy is available to the public upon written request to the Institute.



**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(F) Share of total income	(G) Share of end-of-year assets	(H) Dispropor- tionate allocations?		(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	
							Yes	No		Yes	No
- - - - -											
- - - - -											
- - - - -											
- - - - -											
- - - - -											
- - - - -											
- - - - -											
- - - - -											
- - - - -											

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							
- - - - -							

**Part V Transactions With Related Organizations** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:

<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	Yes	No
<b>b</b> Gift, grant, or capital contribution to other organization(s)		X
<b>c</b> Gift, grant, or capital contribution from other organization(s)	X	
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses		X
<b>p</b> Reimbursement paid by other organization for expenses		X
<b>q</b> Other transfer of cash or property to other organization(s)		
<b>r</b> Other transfer of cash or property from other organization(s)		

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(1)	Ox-Bow			b	91,800.
(2)	Ox-Bow			g	466,230.
(3)					
(4)					
(5)					
(6)					





Form **8879-EO**

**IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2009, or fiscal year beginning 7/01, 2009, and ending 6/30, 2010.

**2009**

Department of the Treasury  
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.  
▶ See instructions.

Name of exempt organization

The Art Institute of Chicago

Employer identification number

36-2167725

Name and title of officer

Patricia C. Rowlands

Controller

**Part I Tax Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here... ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12).....	1b <u>256,390,680.</u>
2a Form 990-EZ check here... ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9).....	2b _____
3a Form 1120-POL check here... ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22).....	3b _____
4a Form 990-PF check here... ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5).....	4b _____
5a Form 8868 check here... ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c).....	5b _____

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2009 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☐ I authorize \_\_\_\_\_ to enter my PIN                      as my signature  
ERO firm name Enter five numbers, but  
do not enter all zeros

on the organization's tax year 2009 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☒ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2009 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ [Signature] Date ▶ 5/10/11

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 36511967725  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2009 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ [Signature] Date ▶ 5/10/11

**ERO Must Retain This Form — See Instructions  
Do Not Submit This Form to the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2009)