Return of Organization Exempt From Income Tax

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

, 2011, and ending

6/30

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

7/01

Open to Public Inspection

OMB No. 1545-0047

2011

2012

| Inte | Check if applicable: Address change Name change | The organization may h |
|------|---|----------------------------------|
| Α | For the 2011 caler | ndar year, or tax year beginning |
| В | Check if applicable: | С |
| | Address change | The Art Institute of |
| | Name change | 111 South Michigan |
| | Initial return | Chicago, IL 60603 |
| | Terminated | |
| | Amended return | |

| address drange Inside reference The Art Institute of Chicago Inside reference 36-2167725 Inside drange Inside reference South Michigan Avenue 312-443-3600 Amended refun Application pending F man and address of principal officer Eric Anyah Application pending F man and address of principal officer Eric Anyah Hib Are all difference I Tax-onempt status X Sito(2) 0 (16) (2) (-) (mset no.) 497(9)(1) or 0 (2) I Tax-onempt status X Sito(2) 0 (16) (2) (-) (mset no.) Hib Are all difference I Tax-onempt status X Sito(2) 0 (16) (2) (-) (mset no.) Hib Are all difference I Tax-onempt status X Carporation Trust Association Other * L ven of Formation Hib Are all dimode induces Hib Part I Summary M state of regula dumode: II III Part all dimode induces of the governing body (Part Vi, line 1a) 3 45 A Number of indigenembers of the governing body (Part Vi, line 1a) 3 45 3(2) 5 3(2) Total number of undigenembers of the governing body (Part Vi, line 1a) 3 45 45 45 | В | Check | if applicable: | C | DE | mployer Ident | ification Number |
|---|---------------|--------|--------------------|--|--------------------------|---------------|-------------------|
| Instruction Chicago, IL 60663 312-443-3600 Instruction Gross recepts 5 566,433,822. Application pending F Name and address of principal efficer: Eric Anyah Same As C Above Web Site: - WWW. artic.edu Web Site: - WWW. artic.edu J Website: - WWW. artic.edu Mo WWW. Saic.edu J Website: - WWW. artic.edu The argument of multiler: J Website: - WWW. artic.edu The argument of multiler: J Briefly describe the organization: The argument of multiler: Part Summary L Vear of formation: 187.9 M Briefly describe the organization ission or most significant activities: To_foundbuild.maintain_and_operate. | | A | ddress change | | | 86-2167 | 725 |
| Image return Differentiated Differentiated Differentiated Amended return Amended return Same As C Above Image return for antilates Image Return Image Ret | | N | ame change | | E Te | elephone num | ber |
| G Gross recempts \$ 566, 433, 822. Application perioring F Name and address of principal officer: Eric Anyah No No <t< th=""><th></th><th>In</th><th>nitial return</th><th>3</th><th>312-443</th><th>-3600</th></t<> | | In | nitial return | 3 | 312-443 | -3600 | |
| Application pending F Name and address of principal efficie: Eric Anyah H0 be as a group return for allitudes: Hvs | | Т | erminated | | | | |
| Same As C Above Hey Are al attitutes include? I Tax-exempt status X [501(c)3] 50(c) () ((inset no.) 4947(a)(1) or [27] If No. attach a list. (see instructions) If No. attach a list. (see instructions) J Website: + WrW. attach a list. (see instructions) It association or most significant activities: To found, build, maintain and operate K Form of organization: Substrain or most significant activities: To found, build, maintain and operate I Briefly describe the organization's mission or most significant activities: To found, build, maintain and operate museums, schools, and libraries of art and theatres. 2 Check this box + if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1b). 3 45 4 Number of independent voting members of the governing body (Part VI, line 1b). 3 45 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a). 5 3,237 6 Total number of volunteers (estimate if necessary). 6 819 7 a total unrelated business revoure from Part VIII, column (C), line 12. 7a 262,334. 9 Forgram service revenue (Part VIII, line 1b). 94,124,670. 14,444,567. 154,790,347. 9 Houstement income (Part VIII, column (A), lines 3,4, | | A | mended return | | G G | ross receipts | \$ 566,433,822. |
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| I Tax-exempt status X [S01(c)] \$90(c) (| | | | Same As C Above | • • | | tructions) |
| K Form of organization: X Corporation Trust Association Other* L Year of Formation: 1879 M State of tegal domicile: IL Part I Summary I Briefly describe the organization's mission or most significant activities: TOfound,_build,_maintain_and_operate_museums,_schools,_and_libraries of_art_and_theatres. 2 Check this box * if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of voting members of the governing body (Part VI, line 1a). 3 4 4 42 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a). 3 4.5 5 3,2,37 6 Restination of more from Form 990-T, line 34. 7b -1,059,661. 7a 826,334. 9 Program service revenue (Part VIII, line 1h). 79,911,597. 62,275,319. 214,444,567. 154,790,347. 10 Investment income (Part VIII, loued M, A), lines 3, 4, and 7d). 94,124,670. 11,886,523. 11 Other revenue (Part VIII, column (A), lines 4. 30,538,203. 31,571,808. 34,571,808. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 5-10. </th <th>I</th> <th>Tax</th> <th></th> <th></th> <th></th> <th></th> <th></th> | I | Tax | | | | | |
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| | at As nd B | 21 | Total liabilitie | s (Part X, line 26) | | | |
| Part II Signature Block | | | | | 10061 | 12492. | 956,029,502. |
| | Pa | nrt II | Signatur | e Block | | | |

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.

| Sign | Signature of officer | | | C | Date | | |
|-------------|--|------------------|---------------------------------|-------------|-------------------------|-----------------|--------|
| Here | Patricia Re | | wson | Cont | roller | | |
| | Type or print name and | d title. | | | | | |
| | Print/Type preparer's name | 2 | Preparer's signature | Date | Check if PTI | Ν | |
| Paid | DELOITTE TAX, | LLP | | | self-employed | | |
| Preparer | Firm's name ► DELO | OITTE TAX, LI | LP | | | | |
| Use Only | Firm's address 111 SOUTH WACKER DRIVE, CHICAGO, IL 60606-4301 | | | 01 | Firm's EIN ► 86-1065772 | | |
| | | | | | Phone no. (312) 486 | -1000 | |
| May the IRS | discuss this return wi | th the preparer | shown above? (see instructions) | | | X Yes | No |
| BAA For Pa | perwork Reduction A | ct Notice, see t | he separate instructions. | TEEA0113L 0 | 8/18/11 | Form 990 | (2011) |



Exempt Organization Declaration and Signature for **Electronic Filing**

, 2011, and ending 07/01

For calendar year 2011, or tax year beginning ,20 12 06/30 For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868 See instructions on back.

OMB No. 1545-1879 **匆(1)11**

Department of the Treasury Internal Revenue Service Name of exempt organization

The Art Institute of Chicago

Employer identification number

36-2167725

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-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 of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

| 1a | Form 990 check here ► 🗹 b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b | 242,355,755. |
|----|--|----|--------------|
| 2a | Form 990-EZ check here b D Total revenue, if any (Form 990-EZ, line 9) | 2b | |
| 3a | Form 1120-POL check here b Total tax (Form 1120-POL, line 22) | 3b | |
| 4a | Form 990-PF check here b D Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b | |
| 5a | Form 8868 check here b 🔲 b Balance due (Form 8868, Part I, line 3c or Part II, line 8c) | 5b | |
| | | | |

Part II **Declaration of Officer**

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) 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.
 - \checkmark If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2011 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) the reason for any delay in processing the return or refund, and (c) the date of any refund.

| Sign | | | 5/1/13 | | Controller |
|------|---|----------------------|--------|--|------------|
| Here | / | Signature of officer | Date | | Title |

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

| ERO's Use | ERO's signature | Date | Check if also paid preparer | Check if self- employed | ERO's SSN or PTIN | |
|-----------------------|--|---|--|---------------------------------|---|------------------------|
| | Firm's name (or yours if self-employed), | | | | EIN | |
| Only | address, and ZIP code | | | | Phone no. | |
| Under pe and belie | nalties of perjury, I declare that I have exa f, they are true, correct, and complete. De | amined the above return and acc sclaration of preparer is based on | companying schedule all information of wh | is and statem iich the prepa | ents, and to the best rer has any knowledg | of my knowledge je. |
| Paid | Print/Type preparer's name | Part i i | | Date | Check if | PTIN |
| | Margaret E. Grinnell | | | 5/7/13 | self- employed | |
| Prepar Use Or | | | N | | Firm's EIN ► | 86-1065772 |
| | Firm's address ► 111 SOUTH W | ACKER DRIVE, CHICAGO, IL | 60606-4301 | | Phone no. (3 | 12) 486-1000 |

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form 8453-EO (2011)

| | m 990 (2011) The Art Institute of Chicago | 36-2167725 | Page |
|----|--|---|----------------------------|
| Pa | rt III Statement of Program Service Accomplishme | | |
| | | n in this Part III | Х |
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| | | | |
| _ | | - denting the company which company with light of any the context | |
| 2 | Did the organization undertake any significant program services Form 990 or 990-EZ? | | X No |
| | If 'Yes,' describe these new services on Schedule O. | | A NO |
| 2 | Did the organization cease conducting, or make significant char | nges in how it conducts, any program services? | X No |
| J | If 'Yes,' describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments f Section 501(c)(3) and 501(c)(4) organizations and section 4947 others, the total expenses, and revenue, if any, for each progra | or each of its three largest program services, as measured by ex (a)(1) trusts are required to report the amount of grants and allow m service reported. | penses. cations to |
| 4; | The School of the Art Institute is an ac learning which provides both graduate an | ng grants of \$ <u>31,509,350.</u>) (Revenue \$ <u>132,357</u> ccredited post-secondary institution of h nd_undergraduate study This curriculum artists, teachers of art, designers and c and media formatsOverall | nigher |
| | full-time-equivalent enrollment of degree has attracted students from over 50 courses of the students from over 50 courses | ee-seeking_students_was_2,858The_curri ntries | iculum |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | conservation, research, publication, ex internationally significant permanent co temporary exhibitions of international other collections. Included in the exhi several non-ticketed temporary exhibition Retrospective; Rethinking Typologies: An Architecture of Invention; Avant-Garde | rchitecture and Design; Bertrand Goldberg | um's ts from were |
| | Soviet TASS Posters and Home and Abroad 1.4 million visitors. | . During fiscal year 2012, the Museum ser | |
| 4 | <u>1.4 million visitors.</u> | | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 4. | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 40 | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| 4. | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | rved |
| | 1.4 million visitors. c (Code:) (Expenses \$ includin | . During fiscal year 2012, the Museum ser | rved |
| | <u>1.4 million visitors.</u> | . During fiscal year 2012, the Museum ser | r <u>ved</u> |

| | | | | Institute | | |
|---------|------|---------|--------|--------------|------|---|
| Part IV | Chec | klist (| of Red | quired Sched | lule | S |

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| | | 1 | Yes | No |
|------|--|------|--------|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part 1 | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II | 4 | Х | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III</i> | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i> . | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i> | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. | 8 | Х | |
| 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? <i>If 'Yes,' complete Schedule D, Part IV</i> . | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | Х | |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| đ | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. | 11 a | Х | |
| ł | 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 | 11 b | Х | |
| C | c 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 | 11 c | | Х |
| | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. | 11 d | | Х |
| e | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X | 11 f | Х | |
| 12 a | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12a | | Х |
| | b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> | 12b | Х | |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i> | 13 | X X | |
| | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Ă | |
| ł | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i> . | 14b | Х | |
| 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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i> | 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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i> | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | 17 | Х | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. | 18 | Х | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. | 19 | Х | |
| | a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H | 20 | | Х |
| ł | b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20 b | | |

| | The Art Institute of Chicago | |
|-------------|--|--|
| Part IV Che | cklist of Required Schedules (continued) | |

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| Pa | | | Yes | No |
|------|---|------|-------|-------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the | | | |
| 21 | United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II | 21 | Х | |
| 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 | 22 | Х | |
| 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? <i>If 'Yes,' complete Schedule J</i> . | 23 | х | |
| 24 - | a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of | 23 | Λ | |
| 240 | 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 | 24a | Х | |
| Ł | bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | Х | |
| (| 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? | 24c | Х | |
| C | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | Х |
| 25 a | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | Х |
| ł | b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I | 25b | | Х |
| 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 | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i> | 27 | | Х |
| 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): | | | |
| ä | a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28a | Х | |
| ł | b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> | 28b | Х | |
| C | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i> | 28c | Х | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> | 30 | Х | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I | 33 | Х | |
| 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 | 34 | Х | |
| 35 a | a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Х | |
| ł | b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 | 35b | Х | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |
| BAA | | Form | 990 (| 2011) |

Form 990 (2011)

| Form 990 (2011) The Art Institute of Chicago | 36-2167725 | P | age 5 |
|---|--------------------------------------|-----|-------|
| Part V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| Check if Schedule O contains a response to any question in this Part V | | | |
| | | Yes | No |
| 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 857 | | |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b | 1 | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners? | d reportable gaming | Х | |
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a | 3,237 | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax | | Х | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruct | tions) | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | |
| b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i> | | Х | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or of financial account in a foreign country (such as a bank account, securities account, or other finance) | ther authority over, a ial account)? | | х |
| b If 'Yes,' enter the name of the foreign country: ► | | | |
| See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance | cial Accounts. | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax yea | | | Х |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra | | | Х |
| c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | <u>5</u> c | | |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and di solicit any contributions that were not tax deductible? | d the organization 6a | | х |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contrib not tax deductible? | outions or gifts were | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor? | for goods and 7a | X | |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which i Form 8282? | | | х |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | | | |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene | fit contract? 7 e | | Х |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit c | ontract? | | Х |
| g If the organization received a contribution of qualified intellectual property, did the organization fil as required? | e Form 8899 | | х |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the orga Form 1098-C? | nization file a 7h | | х |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or | ganizations. Did the | | |
| supporting organization, or a donor advised fund maintained by a sponsoring organization, have e holdings at any time during the year? | excess business | | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | |
| a Did the organization make any taxable distributions under section 4966? | | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | | | |
| 10 Section 501(c)(7) organizations. Enter: | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: | | | |
| a Gross income from members or shareholders | | | |
| b Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| against amounts due or received from them.) | | | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | m 1041? 12a | | |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| a Is the organization licensed to issue qualified health plans in more than one state? | <u>13a</u> | | |
| Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. | | | |
| c Enter the amount of reserves on hand | | | v |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | | | Х |
| b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sched | dule O 14b | 1 | 1 |

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| Par | t VI | Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bel | ow, a | and f | or |
|-------------|-----------------------|---|------------|--------|--------|
| | | a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change | ges i | n | |
| | | Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI | | | . X |
| Sec | tion | A. Governing Body and Management | | | . 21 |
| | | | | Yes | No |
| 1a | If the of the | the number of voting members of the governing body at the end of the tax year 1a 45 re are material differences in voting rights among members governing body, or if the governing body delegated broad rity to an executive committee or similar committee, explain in Schedule O. | | | |
| Ł | | the number of voting members included in line 1a, above, who are independent 1b | | | |
| | Did a | ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee or key employee?See. Schedule 0 | 2 | Х | |
| 3 | Did th of off | ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did th | ne organization make any significant changes to its governing documents | | | |
| | | the prior Form 990 was filed? | 4 | | Х |
| 5 | | ne organization become aware during the year of a significant diversion of the organization's assets? | 5 | | Х |
| 6 | | ne organization have members or stockholders?See.Schedule.O | 6 | Х | |
| 7 a | Did th meml | he organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body?See.Schedule.0. | 7a | Х | |
| Ł | Are a stock | ny governance decisions of the organization reserved to (or subject to approval by) members, holders, or other persons other than the governing body? | 7b | | Х |
| | the fo | ne organization contemporaneously document the meetings held or written actions undertaken during the year by Illowing: | | | |
| | - | joverning body? | 8a | X | |
| | | committee with authority to act on behalf of the governing body? | 8b | Х | |
| 9 | Is the | ere any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i> | 9 | | Х |
| | | B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | - | | |
| | | | | Yes | No |
| 10 a | Did th | ne organization have local chapters, branches, or affiliates? | 10 a | | Х |
| Ł |) If 'Yes, operati | ' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their ons are consistent with the organization's exempt purposes? | 10b | | |
| 11 a | Has the | e organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11 a | | Х |
| Ł | Desci | ribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O | | | |
| | | ne organization have a written conflict of interest policy? If 'No,' go to line 13 | 12a | Х | |
| | | officers, directors or trustees, and key employees required to disclose annually interests that could give rise nflicts? | 12b | Х | |
| | | ne organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in dule O how this is doneSee. Schedule . O | 12c | X | |
| | | ne organization have a written whistleblower policy? | 13 | X X | |
| 14 | | ne organization have a written document retention and destruction policy? | 14 | Λ | |
| 15 | | ne process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 15 - | v | |
| | | organization's CEO, Executive Director, or top management official | 15a 15b | X X | |
| Ľ | | s' to line 15a or 15b, describe the process in Schedule O. (See instructions.) | מכו | Λ | |
| 16 <i>a</i> | Did th taxab | ne organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a le entity during the year? | 16a | Х | |
| Ł | partic | s,' did the organization follow a written policy or procedure requiring the organization to evaluate its ipation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the nization's exempt status with respect to such arrangements? | 16b | Х | |
| | tion (| C. Disclosure | | | |
| 17 | List tl | he states with which a copy of this Form 990 is required to be filed ► <u>See_Schedule_O</u> | | | |
| 18 | inspe | on 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av ction. Indicate how you make these available. Check all that apply. Iven website IX Another's website IX Upon request | vailabl | e for | public |
| 19 | Descrit the put | be in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements availa blic during the tax year. See Schedule O | ible to | | |
| 20 | State | the name, physical address, and telephone number of the person who possesses the books and records of the orga | anizat | on: | |

▶ Patricia Rowlands Lawson 111 South Michigan Avenue Chicago IL 60603 312-499-4050

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

Check if Schedule O contains a response to any question in this Part VII.....

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 neither the organization nor any related organization compensated any current officer, director, or trustee.

| | | (C) | | | | | | | | |
|----------------------------------|--|---|-----------------------|---------|--------------|---|---|--|--|--|
| (A) Name and title | (B) Average hours per week | Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | box, cer | (D) Reportable compensation from | (E) Reportable compensation from | (F) Estimated amount of other | | |
| | (describe hours for related organiza- tions in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | relatéd organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) Anne Searle Bent | _ | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (2) Robert H. Bergman Trustee | 1 | х | | | | | | 0. | 0. | 0. |
| (3) Linda Buonanno | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (4) Francie Comer | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (5) Lester N. Coney | _ | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| <u>(6) A. Steven Crown</u> | _ | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| _7_William M. Daley | | | | | | | | | _ | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| <u>(8) Janet Duchossois</u> | | | | | | | | | - | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (9) John A. Edwardson | 1 | v | | | | | | 0 | 0 | 0 |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (10) Marshall Field Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (11) Karen Frank | 1 | Λ | | | | | | 0. | 0. | 0. |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (12) Denise B. Gardner | | 7 | | | | | | 0. | 0. | 0. |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (13) Sarah Nava Garvey | _ | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| (14) James A. Gordon | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |

Form **990** (2011) The Art Institute of Chicago

36-2167725

| Form 990 (2011) The Art Institute of Chic | | | | | | | | 36-216772 | |
|--|--|-----------------------------------|-----------------------|--------------------------------|----------------------|---|--|---|--|
| Part VII Section A. Officers, Directors, Trust | ees, k | ۲ey | Em | plo | bye | es, an | d Highest Com | pensated Emp | loyees (cont) |
| (A) Name and title | (B) Average hours per | box offic | , unle: cer an | Pos heck ss pe id a d | erson i | than one s both an r/trustee) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations | (F) Estimated amount of other compensation |
| | week (describ e hours for related organi- zations in Sch O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Former Highest compensated employee | (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization and related organizations |
| (15) Kenneth C. Griffin Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (16) Joseph P. Gromacki Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (17) Ann Grube Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (18) Caryn Harris Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (19) John W. Jordan II Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (20) Rita Knox Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (21) Eric P. Lefkofsky Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (22) Lawrence F. Levy Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| (23) Robert M. Levy Trustee (24) John Manley | 1 | Х | | | | | 0. | 0. | 0. |
| <u>Trustee</u> (25) Nancy Lauter McDougal | 1 | Х | | | | | 0. | 0. | 0. |
| Trustee | 1 | Х | | | | | 0. | 0. | 0. |
| c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c). | | | | | | | 5,060,355. 5,060,355. | 0. | |
| 2 Total number of individuals (including but not limite from the organization ► 79 | | | | | | | | | |
| 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in | | | | | | | | | Yes No 3 X |
| 4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual | han \$1 | 50,0 | 00'? | lf 'Y | (es' | comple | te Schedule J for | | 4 X |
| 5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? <i>If 'Yes,'</i> of the organization? | ompen comple | satio <i>te S</i> | on fr chea | om Iule | any <i>J fo</i> i | unrelate r <i>such p</i> | ed organization or person | individual | 5 X |
| Section B. Independent Contractors 1 Complete this table for your five highest compensate | ed inde | eper | Ident | t cor | ntrac | tors the | at received more t | han \$100,000 of | |
| compensation from the organization. Report compe | nsatior | for | the | cale | enda | r year e | nding with or with | in the organization | 's tax year. |
| (A) Name and business addres | s | | | | | | (B) Description |) of services | (C) Compensation |
| US Equities Asset Mgmt LLC 20 N Michigan Ave | | | | | IL | 60602 | Bldg Maint Se | | 1,649,571. |
| Harris Winick LLP 333 W Wacker Dr, #2060 Chic | | | | 6 | | | Attorney Serv | | <u>823,775.</u> 288,618. |
| Deloitte & Touche LLP 111 S Wacker Dr Chicag Hirtle Callaghan LLC 300 Barr Harbor Dr West | | | | n | P۵ | 19428 | Audit Service Investmnt Adv | | 274,509. |
| Lakeshore Waste Services LLC 6132 Oakton St | | | | | | | Recycle Waste | 2 | 205,010. |
| 2 Total number of independent contractors (including | but no | t lim | ited | to t | hose | listed | above) who receiv | red more than | |

\$100,000 in compensation from the organization \succ 7

Form 990

Continuation Sheet for Form 990

****PUBLIC DISCLOSURE COPY****

OMB No. 1545-0047

2011

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

The Art Institute of Chicago 36-2167725 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| Employees | | | | | | | - | | - | |
|------------------------------------|------------------------------|-----------------------------------|-----------------------|-------------------|--------------|---------------------------------|-----|--|---|--|
| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
| Name and Title | Average hours per week | | | (checl Officer | 1 | that app empl | 1 | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the |
| | | Indivídual trustee or director | Institutional trustee | ē, | Key employee | est comp oyee | ner | | · · · · | organization and related organizations |
| | | ustee | trustee | | 8 | Highest compensated employee | | | | |
| Eric T. McKissack | 1 | х | | | | | | 0. | 0. | 0. |
| Cary D. McMillan Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| Samuel M. Mencoff Trustee | 1 | X | | | | | | 0. | 0. | 0. |
| Alexandra C. Nichols | | X | | | | | | 0. | 0. | 0. |
| Cynthia Perucca | | | | | | | | | | |
| Trustee Paulita Pike | 1 | X | | | | | | 0. | 0. | 0. |
| Trustee Anne Pramaggiore | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee Thomas J. Pritzker | 1 | X | | | | | | 0. | 0. | 0. |
| Chairman Mark Pu | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee J. Christopher Reyes | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee Dana D. Rice | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee Linda Johnson Rice | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee Andrew M. Rosenfield | 1 | Х | | | | | | 0. | 0. | 0. |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. |
| John W. Rowe | 1 | х | | | | | | 0. | 0. | 0. |
| Michael Sacks Trustee | 1 | х | | | | | | 0. | 0. | 0. |
| Stephanie Sick Trustee | 1 | х | | | | | | 0. | 0. | 0. |
| Prabhakant Sinha Trustee | 1 | х | | | | | | 0. | 0. | 0. |
| Edward Byron Smith, Jr. | 1 | Х | | | | | | 0. | 0. | 0. |
| Melinda Martin Sullivan Trustee | 1 | х | | | | | | 0. | 0. | 0. |
| Marilynn Thoma Trustee | 1 | X | | | | | | 0. | 0. | 0. |
| Byron D. Trott | | | | | | | | 0. | 0. | 0. |
| Trustee | 1 | Х | | | | Ĺ | | 0. | 0. | 0. Form 990 Cont 201 |

Form 990

Continuation Sheet for Form 990

****PUBLIC DISCLOSURE COPY****

OMB No. 1545-0047

2011

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

The Art Institute of Chicago 36-2167725 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| Employees | | | | | | | | | | | |
|----------------------------|------------------|-----------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-------------------------------------|--|--------------------------------------|--|
| (A) | (B) | | | | C) | | | (D) | (E) | (F) | |
| Name and Title | Average hours | | tion (| | | hat app | | Reportable compensation from | Reportable compensation from | Estimated amount of other | |
| | per week | or d | Insti | Officer | Key | High | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the | |
| | | vídua | itutic | cer | emj | lest o | ner | (W-2/1055-W100) | (W-2/1055-10100) | organization and related | |
| | | orth | nal | | Key employee | e | | | | organizations | |
| | | Indivídual trustee or director | Institutional trustee | | ď | Highest compensated employee | | | | | |
| | | | ee | | | ated | | | | | |
| David J. Vitale | | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. | |
| Frederick H. Waddell | | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. | |
| Todd Warnock | | | | | | | | | | | |
| Trustee | 1 | Х | | | | | | 0. | 0. | 0. | |
| Walter E. Massey | | | | | | | | | | | |
| President | 40 | | | Х | | | | 505,625. | 0. | 0. | |
| Douglas Druick | | | | | | | | | | | |
| President | 40 | | | Х | | | | 325,212. | 0. | 85,785. | |
| Julia E. Getzels | | | | | | | | | | | |
| Vice President | 40 | | | Х | | | | 313,817. | 0. | 63,324. | |
| <u>Eric Anyah</u> | | | | | | | | | | | |
| CFO | 40 | | | Х | | | | 260,399. | 0. | 42,235. | |
| David Thurm | | | | | | | | | | | |
| COO Museum | 40 | | | | Х | | | 400,276. | 0. | 41,538. | |
| Edward McNulty | | | | | | | | | | | |
| SVP/Planning/COO SAIC | 40 | | | | Х | | | 280,647. | 0. | 48,603. | |
| <u>Elissa Tenny</u> | | | | | | | | | | | |
| Provost/SVP Acad Affairs | 40 | | | | Х | | | 306,217. | 0. | 22,050. | |
| Elizabeth Hurley | _ | | | | | | | | | | |
| VP for Museum Development | 40 | | | | Х | | | 239,901. | 0. | 27,768. | |
| Elizabeth Grainer | | | | | | | | | | | |
| VP of Aux Ops | 40 | | | | Х | | | 180,336. | 0. | 60,667. | |
| Lisa Wainwright | | | | | | | | | | | |
| Faculty Dean/VP Acad Admin | 40 | | | | Х | | | 196,998. | 0. | 32,717. | |
| Rose Milkowski | | | | | | | | | | | |
| VP for Enrollment Mgmt | 40 | | | | Х | | | 170,327. | 0. | 17,480. | |
| Andrea_Reynders | | | | | | | | | 0 | 0 FFF | |
| Chair Fashn Design | 40 | | | | | Х | | 243,034. | 0. | 9,557. | |
| Eugene Adams | 4.0 | | | | | | | 100 504 | 0 | F0 10C | |
| VP of IS/CIO | 40 | | | | | Х | | 192,504. | 0. | 53,106. | |
| Brian Esker | 40 | | | | | v | | 104 000 | 0 | 22.014 | |
| VP Fin/Admn SAIC | 40 | | | | | Х | | 184,822. | 0. | 32,814. | |
| Samuel Quigley | 40 | | | | | v | | 170 107 | 0 | 07 440 | |
| VP, CMIIT | 40 | | | | | Х | | 179,137. | 0. | 27,440. | |
| Carrie Heinonen | 40 | | | | | v | | | 0 | 0 007 | |
| VP for Marketing | 40 | | | | | Х | | 181,557. | 0. | 9,997. | |
| James Cuno | 4.0 | | | | | | 17 | C07 070 | 0 | | |
| Former President of Museum | 40 | | | | | | Х | 607,873. | 0. | 29,260. | |
| Anthony Jones | 40 | | | | | | v | 161 640 | 0 | 17 000 | |
| Former President of SAIC | 40 | | | | | | Х | 151,548. | 0. | 17,000. Form 990 Cont 2011 | |

Form 990 Cont 2011

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2011

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

The Art Institute of Chicago 36-2167725 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| (A) | (B) | (C) | | | | (D) | (E) | (F) | | |
|---|------------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
| | | Posi | tion (| | | hat app | lv) | | | |
| Name and Title | Average hours per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| Wellington_Reiter Former President of SAIC | 40 | | | | | | Х | 140,125. | 0. | 0. |
| | | | | | | | | | | |
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Form 990 (2011) The Art Institute of Chicago Part VIII Statement of Revenue

36-2167725

Page 9

| Pa | t 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 11,081,458. c Fundraising events 1c 2,681,328. d Related organizations 1d e Government grants (contributions) 1e 11,285,046. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above1f37,227,487.g Noncash contributions included in Ins 1a-1f:\$6,295,536.h Total. Add lines 1a-1f.► | 62,275,319. | | | |
| REVENUE | Za Tuition and FeesBusiness Codeb Proceeds from Sale of Art900099 | 128598123. 9,701,901. | 128598123. 9,701,901. | | |
| PROGRAM SERVICE REVENUE | c Museum Admissions 900099 d Other Restricted Prog Rev900099 | 9,568,375. 1,661,963. | 9,568,375. 1,661,963. | | |
| PROGRAN | e Member Program Revenues 900099 f All other program service revenue g Total. Add lines 2a-2f | 1,104,446. 4,155,539. 154790347. | 1,104,446. 3,298,280. | | 857,259. |
| | 3 Investment income (including dividends, interest and other similar amounts) | 7,981,987. | | | 7,981,987. |
| | 5 Royalties► (i) Real (ii) Personal 6a Gross rents | 206,719. | | | 206,719. |
| | b Less: rental expenses. 1,051,464. c Rental income or (loss) 1,602,124. d Net rental income or (loss) ► | 1,602,124. | | 184,130. | 1,417,994. |
| | 7a Gross amount from sales of assets other than inventory. (i) Securities (ii) Other 317485316. | 1,002,124. | | 104,130. | 1,417,554. |
| | b Less: cost or other basis and sales expenses 313580780. c Gain or (loss) | 0.004.500 | | | 0.004.506 |
| OTHER REVENUE | d Net gain or (loss) 8a Gross income from fundraising events (not including. \$ 2,681,328. of contributions reported on line 1c). See Part IV, line 18 | 3,904,536. | | | 3,904,536. |
| ОТ | c Net income or (loss) from fundraising events | -863,647. | | | -863,647. |
| | b Less: direct expenses b 25,973. c Net income or (loss) from gaming activities | -6,713. | | | -6,713. |
| | and allowancesa <u>15261431</u> . b Less: cost of goods sold b 7,755,071. c Net income or (loss) from sales of inventory► | 7,506,360. | 6,177,036. | 1,329,324. | |
| | Miscellaneous Revenue Business Code 11 a Other 900099 b Other Invest. Inc (Loss) 900099 c 900099 | 2,500,000. 2,458,723. | 2,500,000. | -687,120. | 3,145,843. |
| BAA | d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions | 4,550,725. | 162610124. | 826,334. | 16,643,978. Form 990 (2011) |

PUBLIC DISCLOSURE COPY The Art Institute of Chicago

Form 990 (2011) The Art Institute of Ch Part IX Statement of Functional Expenses

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

| | Check if Schedule O contains a response to any question in this Part IX | | | | | | | | | | | |
|-----------|--|--------------------------------|---|---|---------------------------------------|--|--|--|--|--|--|--|
| Do 6b, | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (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 United States. See | | | | | | | | | | | |
| | Part IV, line 21 | 62,458. | 62,458. | | | | | | | | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | 31,509,350. | 31,509,350. | | | | | | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | | | | | | | | |
| 4 | Benefits paid to or for members | | | | | | | | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 3,634,198. | 1,909,888. | 1,456,243. | 268,067. | | | | | | | |
| 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. | 71,480,950. | 60,825,027. | 7,815,914. | 2,840,009. | | | | | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and section 403(b) | 5,390,954. | 4 010 740 | 830,159. | 247 052 | | | | | | | |
| 9 | employer contributions) Other employee benefits | 12,113,313. | 4,213,742. | 1,553,847. | <u> </u> | | | | | | | |
| 9 10 | Payroll taxes | 5,186,369. | 4,385,920. | 598,240. | 202,209. | | | | | | | |
| | Fees for services (non-employees): | 5,100,000. | 1,000,020. | 550,240. | 202,203. | | | | | | | |
| | a Management | | | | | | | | | | | |
| | b Legal | 1,011,759. | | 1,011,759. | | | | | | | | |
| (| c Accounting | 369,068. | | 369,068. | | | | | | | | |
| | d Lobbying | 15,375. | 15,375. | | | | | | | | | |
| (| e Professional fundraising services. See Part IV, line 17 | 152,059. | | | 152,059. | | | | | | | |
| | Investment management fees | 2,651,750. | | 2,651,750. | | | | | | | | |
| | g Other | 15,601,791. | 14,267,725. | 578,809. | 755,257. | | | | | | | |
| | Advertising and promotion | 1,942,305. | 1,942,305. | 255 504 | | | | | | | | |
| 13 | Office expenses. | 10,136,842. | 9,053,211. | 355,794. | 727,837. | | | | | | | |
| 14 | Information technology | 1,519,052. | 705,353. | 772,306. | 41,393. | | | | | | | |
| 15 16 | Royalties | <u>154,564.</u> 18,105,217. | <u>154,564.</u> 17,288,686. | 683,747. | 132,784. | | | | | | | |
| 17 | Travel. | 2,966,396. | 2,776,825. | 50,409. | 139,162. | | | | | | | |
| 18 | | 2,500,550. | 2,110,023. | | 139,102. | | | | | | | |
| 19 | Conferences, conventions, and meetings | 269,082. | 215,173. | 38,173. | 15,736. | | | | | | | |
| 20 | Interest | 12,099,822. | 10,624,779. | 1,475,043. | | | | | | | | |
| 21 | Payments to affiliates | 10,748. | 10,748. | | | | | | | | | |
| 22 | Depreciation, depletion, and amortization | 25,985,819. | 25,090,939. | 894,880. | | | | | | | | |
| 23 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e | 989,692. | 989,692. | | | | | | | | | |
| | expenses on Schedule O.) A Accessions/Books/Other Art | 11,283,056. | 11,283,056. | | | | | | | | | |
| | 9 Furniture, Fixtures, Equipment | 4,302,074. | 3,894,361. | 336,655. | 71,058. | | | | | | | |
| | c Other Expenses | 3,340,677. | 2,869,036. | 407,487. | 64,154. | | | | | | | |
| (| Exhibition Related Expenses All other expenses | 853,733. | 853,733. | | | | | | | | | |
| | Total functional expenses. Add lines 1 through 24e | 243,138,473. | 215,065,752. | 21,880,283. | 6,192,438. | | | | | | | |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following | | ,, | , , | | | | | | | | |
| | SOP 98-2 (ASC 958-720) | | | | | | | | | | | |

Form 990 (2011)

Form 990 (2011) The Art Institute of Chicago
Part X Balance Sheet

36-2167725

Page 11

| 1 4 | ΠLΛ | Dalalice Sheet | | | 1 | | |
|-----------------|-----|--|-----------------------------|---|---------------------------------|------------|------------------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash – non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 2,036,795. | 2 | 1,076,571. |
| | 3 | Pledges and grants receivable, net | | | 57,582,006. | 3 | 48,350,135. |
| | 4 | Accounts receivable, net | | | 5,677,235. | 4 | 5,494,197. |
| | 5 | Receivables from current and former officers, director and highest compensated employees. Complete Part | s, trus II of Se | tees, key employees, chedule L | | 5 | |
| | 6 | Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr sponsoring organizations of section 501(c)(9) voluntar organizations (see instructions). | ed und ibuting ry emp | er section 4958(f)(1)), employers and loyees' beneficiary | | 6 | |
| A | 7 | Notes and loans receivable, net. | | | 3,731,782. | 7 | 3,824,138. |
| Š | 8 | Inventories for sale or use | | | 7,112,547. | 8 | 5,564,485. |
| ASSETS | 9 | Prepaid expenses and deferred charges | | | 5,967,587. | 9 | 5,588,113. |
| 5 | - | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | | | | 5 | 575007115 |
| | h | Less: accumulated depreciation | 104 | 165,345,677. | | 10 - | 172 712 011 |
| | | Investments – publicly traded securities | | | 476,579,918. 492,489,913. | 10 c 11 | 472,712,941. 431,959,462. |
| | | | | | | | 371,306,876. |
| | 12 | Investments – other securities. See Part IV, line 11. | | | · · · · · | 12 | 371,300,870. |
| | 13 | Investments – program-related. See Part IV, line 11. | | | | 13 | |
| | 14 | Intangible assets. | | | | 14 | F 007 1F0 |
| | 15 | Other assets. See Part IV, line 11 | | | | 15 | 5,807,153. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line | 34) | | 1,414,483,069. | | 1,351,684,071. |
| | 17 | Accounts payable and accrued expenses | | | 41,768,632. | 17 | 37,827,004. |
| | 18 | Grants payable | | | 20,300,620. | 18 | 10 400 216 |
| | 19 | Deferred revenue | | | | 19 | 19,408,216. |
| L | 20 | Tax-exempt bond liabilities | | | · · · · · | 20 | 269,374,229. |
| A B I | 21 | Escrow or custodial account liability. Complete Part I | | | | 21 | |
| T | 22 | Payables to current and former officers, directors, true highest compensated employees, and disqualified per of Schedule L | stees, sons. | key employees, Complete Part II | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated th | | | 700,000. | 23 | 1,100,000. |
| E S | 24 | Unsecured notes and loans payable to unrelated third | • | | | 24 | , , |
| | 25 | Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com | | | 44,064,632. | 25 | 67,945,120. |
| | 26 | Total liabilities. Add lines 17 through 25. | <u></u> . | <u></u> | 408,370,577. | 26 | 395,654,569. |
| NET | | Organizations that follow SFAS 117, check here ► | X an | d complete lines | | | |
| Ť | | 27 through 29 and lines 33 and 34. | | | | | |
| A S | 27 | Unrestricted net assets | | | | 27 | 75,797,147. |
| เงงยุคง | 28 | Temporarily restricted net assets | | | | 28 | 560,060,837. |
| | 29 | Permanently restricted net assets | | | 312,283,467. | 29 | 320,171,518. |
| 0 R | | Organizations that do not follow SFAS 117, check he | and complete | | | | |
| E | | lines 30 through 34. | | | | | |
| FUZD | 30 | Capital stock or trust principal, or current funds | | | 30 | | |
| | 31 | Paid-in or capital surplus, or land, building, or equipm | | | 31 | | |
| Ê | 32 | Retained earnings, endowment, accumulated income, | | | | 32 | |
| BALAZCES | 33 | Total net assets or fund balances | | | 1,006,112,492. | 33 | 956,029,502. |
| ËS | 34 | Total liabilities and net assets/fund balances | | | | | 1,351,684,071. |
| BA | | | | | | | Form 990 (2011 |

BAA

Form 990 (2011)

| Form 990 (2011) The Art Institute of Chicago 36-2167725 | | Pag | ge 12 | | | | | | | |
|---|--------|------------|--------------|--|--|--|--|--|--|--|
| Part XI Reconciliation of Net Assets | | | <u> </u> | | | | | | | |
| Check if Schedule O contains a response to any question in this Part XI | | | Х | | | | | | | |
| | | | | | | | | | | |
| | 2,35 | • | | | | | | | | |
| | 3,13 | 8,4 2,7 | | | | | | | | |
| 3 Revenue less expenses. Subtract line 2 from line 1 | | | | | | | | | | |
| | 6,11 | · · | | | | | | | | |
| 5 Other changes in net assets or fund balances (explain in Schedule O). See. Schedule .0 5 -4 | 9,30 | 0,2 | 72. | | | | | | | |
| 6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))6 | 6,02 | 9,5 | 02. | | | | | | | |
| Part XII Financial Statements and Reporting | | | | | | | | | | |
| Check if Schedule O contains a response to any question in this Part XII | | | | | | | | | | |
| | 1 | Yes | No | | | | | | | |
| 1 Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | | | | | | | |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | | | | | | | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | Х | | | | | | | |
| b Were the organization's financial statements audited by an independent accountant? | 2b | Х | | | | | | | | |
| 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 | Х | | | | | | | | |
| 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 separate basis, consolidated basis, or both: | | | | | | | | | | |
| Separate basis X 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 | Х | | | | | | | | |
| 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 | Зb | Х | | | | | | | | |
| | Form 9 | 990 (2 | 2011) | | | | | | | |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047 2011

| | | f the Treasury nue Service | | ► Attach to F | orm 990 or Form 990-E | Z. ► Se | e separa | ate instr | uctions | | | | ection | |
|-------|----------|---|-----------------------|---|--|---------------------------------|--|------------------|--|---|-------------------------|----------------------------|------------------|---------------|
| | | organization | | | | | | | | Employe | r identificat | ion number | | |
| | | | | of Chicago | | | | | | | 167725 | | | |
| Par | | | | | (All organizations | | | | | See i | nstructi | ons. | | |
| The c | <u> </u> | | • | | e it is: (For lines 1 thro | - | | - | | | | | | |
| 1 | _ | | | | ciation of churches des | | section | 1 1 70(b) | (1)(A)(i). | | | | | |
| 2 | | | | | (ii). (Attach Schedule I | | | | | | | | | |
| 3 | _ | • | • | | e organization describe | | | | | | | | | |
| 4 | | A medical re name, city, a | | | in conjunction with a h | iospital d | describe | d in sec | tion 170 | 0(b)(1)(A | A)(iii) . En | iter the hos | spital's | > |
| 5 | ΠA | An organizat | tion oper | | f a college or university | / owned | or oper | ated by | a gover | nmenta | l unit des | scribed in s | section | י |
| 6 | | | | | overnmental unit descri | | | | | | | | | |
| 7 | Hi | n section 17 | 70(b)(1)(A | A)(vi). (Complete Par | • | | - | overnme | ntal unit | t or from | 1 the ger | eral public | ; descr | ribed |
| 8 | | - | | | '0(b)(1)(A)(vi). (Comple | | | | | | | | | |
| 9 | fi ir | from activitie nvestment i | es relateo ncome a | d to its exempt function |) more than 33-1/3% of ons – subject to certain s taxable income (less mplete Part III.) | n except | ions, ar | nd (2) no | more t | han 33- | 1/3% of | its support | from o | gross |
| 10 | A | An organizat | ion orga | nized and operated e | xclusively to test for pu | ublic safe | ety. See | sectior | n 509(a)(| (4). | | | | |
| 11 | n | more publicly | v suppor | ted organizations des | xclusively for the bene cribed in section 509(a ion and complete lines | (1) or s | section 5 | 509(a)(2 | ctions c). See s | of, or ca | rry out th 509(a)(3) | e purpose . Check th | s of or e box | าe or that |
| | | a Type I | 51 | b Type II | | I — Func | | | ted | | d | Type III - | - Othe | r |
| e | 0 | By checking other than fo section 509(a | oundatior | , I certify that the org managers and other | anization is not control | led direc | tly or in | directly | by one | or more scribed | disquali in sectio | fied persor on 509(a)(1 | าร) or | |
| f | lt | f the organiz | zation re | ceived a written dete | rmination from the IRS | that is a | а Туре I | , Type II | or Type | e III sup | porting c | organizatio | n, | |
| g | | | | | on accepted any gift o | | | | of the fo | llowing | persons | ? | | - |
| | | | | | | | | | ., | | | | Yes | No |
| | (| (i) A perso below, | on who c the gove | firectly or indirectly co erning body of the sup | ontrols, either alone or oported organization? | together | r with pe | ersons d | escribed | d in (ii) | and (III) | 11 g (i) | | |
| | (i | ••• | - | | oed in (i) above? | | | | | | | 11 g (ii) | └──┤ | |
| | • | | | | described in (i) or (ii) a | | | | | | | 11 g (iii) | | |
| h | F | Provide the f | following | information about th | e supported organization | on(s). | | | | | | | | |
| | (| (i) Name of supp organization | oorted n | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organiz column (i your go | Is the zation in i) listed in overning ment? | the organ | ou notify iization in n (i) of upport? | (vi) Is the organization in column (i) organized in the U.S.? | | it of supp | port | |
| | | | | | | Yes | No | Yes | No | Yes | No | | | |
| (A) | | | | | | | | | | | | | | |
| (B) | | | | | | | | | | | | | | |
| (C) | | | | | | | | | | | | | | |
| (D) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| (E) | | | | | | | | | | | | | | |
| Total | | | | | | | | | | | | | | |

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

Schedule A (Form 990 or 990-EZ) 2011

Page 2

Schedule A (Form 990 or 990-EZ) 2011The Art Institute of Chicago36-2167725Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | 1 | 1 | 1 | 1 | | |
|--------------|---|---------------------------------------|--|---|--------------------------------------|---------------------------------------|--------------------------|
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | |
| Sec | tion B. Total Support | | 1 | | | 1 | |
| | ndar year (or fiscal year nning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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 | Total support. Add lines 7 through 10 | | | | | | |
| 12 | Gross receipts from related activ | vities, etc (see ins | structions) | | | 12 | |
| 13 | organization, check this box and | stop here | | nd, third, fourth, a | or fifth tax year as | a section 501(c)(| 3) ►□ |
| Sec | tion C. Computation of Pu | blic Support F | Percentage | | | | |
| 14 | Public support percentage for 20 | | | | | | % |
| 15 | Public support percentage from | | | | | · | % |
| 16 <i>a</i> | a 33-1/3% support test – 2011. If and stop here. The organization | the organization of qualifies as a pu | did not check the blicly supported o | box on line 13, ai rganization | nd the line 14 is 3 | 3-1/3% or more, c | heck this box |
| k | 33-1/3% support test – 2010. If and stop here. The organization | the organization of qualifies as a pu | did not check a bo blicly supported o | ox on line 13 or 10 rganization | 6a, and line 15 is | 33-1/3% or more, | check this box ·····► |
| 17 <i>a</i> | 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts | meets the 'facts- | and-circumstance | s' test, check this | box and stop he | re. Explain in Part | IV how |
| Ł | o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an | meets the 'facts- d-circumstances' | and-circumstance test. The organiza | s' test, check this ation qualifies as | box and stop he a publicly suppor | re. Explain in Part ted organization. | IV how the► |
| 18 | Private foundation. If the organi | zation did not che | eck a box on line | 13, 16a, 16b, 17a | | | |
| BAA | | | | | Sc | hedule A (Form 99 | 0 or 990-EZ) 2011 |

Schedule A (Form 990 or 990-EZ) 2011 The Art Institute of Chicago

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

36-2167725

Page 3

| Sec | tion A. Public Support | | | | - | • | | |
|-----|--|--|---|---|---|------------------------------------|--------------------------------|---------|
| | dar year (or fiscal yr beginning in) Þ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) ⊤ | otal |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include | | | | | | | |
| ~ | any 'unusual grants.') | | | | | | | |
| 2 | Gross receipts from admis- sions, merchandise sold or | | | | | | | |
| | services performed, or facilities | | | | | | | |
| | furnished in any activity that is related to the organization's | | | | | | | |
| | tax-exempt purpose | | | | | | | |
| 3 | Gross receipts from activities | | | | | | | |
| _ | that are not an unrelated trade or business under section 513. | | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and | | | | | | | |
| | either paid to or expended on | | | | | | | |
| 5 | its behalf The value of services or | | | | | | | |
| 5 | facilities furnished by a | | | | | | | |
| | governmental unit to the organization without charge | | | | | | | |
| c | ъ така така така така така така така так | | | | | | | |
| | Total. Add lines 1 through 5 | | | | | | | |
| 70 | 2, and 3 received from | | | | | | | |
| | disqualified persons | | | | | | | |
| t | Amounts included on lines 2 and 3 received from other than | | | | | | | |
| | disqualified persons that | | | | | | | |
| | exceed the greater of \$5,000 or 1% of the amount on line 13 | | | | | | | |
| | for the year | | | | | | | |
| c | Add lines 7a and 7b | | | | | | | |
| 8 | Public support (Subtract line | | | | | | | |
| Sec | 7c from line 6.) | | | | | | | |
| | dar year (or fiscal yr beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) T | otal |
| | , , , , , , , , | (a) 2007 | (b) 2008 | (C) 2009 | (u) 2010 | (9) 2011 | 0 | olai |
| | Amounts from line 6 | | | | | | | |
| 100 | dividends, payments received | | | | | | | |
| | on securities loans, rents, royalties and income from | | | | | | | |
| | similar sources | | | | | | | |
| Ł | 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 in line 10b, whether or not the business is | | | | | | | |
| | regularly carried on | | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of | | | | | | | |
| | capital assets (Explain in | | | | | | | |
| | Part IV.) | | | | | | | |
| | Total support. (Add Ins 9, 10c, 11, and 12.) | | | | | | | |
| 14 | First five years. If the Form 990 organization, check this box and | is for the organization is for the organization is the second second second second second second second second s | ation's first, seco | nd, third, fourth, (| or fifth tax year as | a section 501 | (c)(3) | ► |
| Sec | tion C. Computation of Pu | blic Support P | Percentage | | | | | |
| 15 | Public support percentage for 20 | 011 (line 8, colum | n (f) divided by lir | ne 13, column (f) |) | | 15 | 010 |
| 16 | Public support percentage from | 2010 Schedule A, | , Part III, line 15 | | | | 16 | 00 |
| Sec | tion D. Computation of Inv | estment Incor | me Percentage | 9 | | | | |
| 17 | Investment income percentage f | - | •• | - | | | 17 | 0/0 |
| 18 | Investment income percentage f | | | | | | 18 | 010 |
| | 33-1/3% support tests – 2011. It is not more than 33-1/3%, check | k this box and sto | p here. The orgar | nization qualifies | as a publicly supp | orted organiza | ation | 🏲 🔄 |
| Ł | 33-1/3% support tests – 2010. If line 18 is not more than 33-1/3% | f the organization 6, check this box a | did not check a b and stop here. Th | oox on line 14 or le organization qu | line 19a, and line ualifies as a public | 16 is more that by supported of | an 33-1/3%, ai organization | nd ► |
| 20 | Private foundation. If the organi | ization did not che | eck a box on line | 14, 19a, or 19b, | check this box and | d see instructio | ons | ► |

Schedule A (Form 990 or 990-EZ) 2011 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. Also complete this part for any additional information. (See instructions). Support Schedule Additional Supplemental Information Part I, Line 2 - 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_7 which ___ <u>__describes an organization that_normally_receives a_substantial_part_of_its_support____</u> <u>from a governmental unit or from the general public, Section 170(b)(1)(A)(vi). The</u> <u>Art Institute of Chicago has selected box 2, because per instructions only one ____</u> applicable box should be checked.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

4

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.

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

• Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' 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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

| Name | of organization | | | Employer identifica | ation number | |
|------|----------------------------------|--|--|--|--|-----------------------------|
| | e Art Institute of | | | 36-216772 | | |
| Par | rt I-A Complete if the or | rganization is exempt under section | o <mark>n 501(c)</mark> or is a s | section 527 organiz | zation. | |
| | • | organization's direct and indirect political c | 1 0 | | | |
| 2 | Political expenditures | | | ▶\$ | | |
| 3 | Volunteer hours | | | | | |
| Par | rt I-B Complete if the or | rganization is exempt under section | on 501(c)(3). | | | |
| | | ise tax incurred by the organization under | | | | 0. |
| 2 | Enter the amount of any exc | ise tax incurred by organization managers | under section 4955. | ▶\$ | | 0. |
| 3 | If the organization incurred a | a section 4955 tax, did it file Form 4720 for | this year? | | Yes | No |
| 4 a | Was a correction made? | | | | Yes | No |
| | If 'Yes,' describe in Part IV. | | | | | |
| Par | rt I-C Complete if the or | rganization is exempt under section | on 501(c) , excep | t section 501(c)(3). | I. | |
| 1 | Enter the amount directly ex | pended by the filing organization for section | on 527 exempt function | n activities 🕨 🕏 | | |
| 2 | | g organization's funds contributed to other | | | | |
| _ | | | | Υ | | |
| 3 | line 17b | ditures. Add lines 1 and 2. Enter here and | | ▶\$ | | |
| 4 | Did the filing organization file | e Form 1120-POL for this year? | | | Yes | No |
| 5 | organization made payments | and employer identification number (EIN) s. For each organization listed, enter the ar ons received that were promptly and direct I action committee (PAC). If additional spa | mount paid from the f tly delivered to a sepa | filing organization's fundation and a fundation of the second second second second second second second second s | ds. Also enter the ion, such as a sep | arate |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter-0 | (e) Amount of politi contributions received promptly and direct delivered to a separ political organizatio If none, enter -0- | d and tly rate on. |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |

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

Schedule C (Form 990 or 990-EZ) 2011

OMB No. 1545-0047 2011

| 20 | |
|---------|--------|
| Open to | Public |
| Inspec | tion |

| Schedule C (Form 990 or 990-EZ) 201 | 1 The Art Insti | tute of Chicago | C | 36-216 | 57725 Page 2 |
|--|--|---|--|-------------------------------------|-----------------------------|
| Part II-A Complete if section 501(| the organization is (h)). | s exempt under se | ction 501(c)(3) and | filed Form 5768 (e | election under |
| A Check ► if the filir | ng organization belong | s to an affiliated group | (and list in Part IV each | n affiliated group memb | per's name, |
| address, | EIN, expenses, and sh | nare of excess lobbying | expenditures). | | |
| B Check ► if the filir | ng organization checke | d box A and 'limited co | ntrol' provisions apply. | | |
| (The term | Limits on Lobbying 'expenditures' means | Expenditures amounts paid or incurr | red.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expendition | ures to influence public | opinion (grass roots lo | bbying) | | |
| b Total lobbying expendition | ures to influence a legi | slative body (direct lob | oying) | | |
| c Total lobbying expendit | ures (add lines 1a and | 1b) | | | |
| d Other exempt purpose e | expenditures | | | | |
| e Total exempt purpose e | expenditures (add lines | 1c and 1d) | | | |
| f Lobbying nontaxable an both columns. | nount. Enter the amour | nt from the following tal | ole in | | |
| If the amount on line 1e, col | umn (a) or (b) is: The | lobbying nontaxable a | mount is: | | |
| Not over \$500,000 | 20% | 6 of the amount on line 1e. | | | |
| Over \$500,000 but not over \$1 | ,000,000 \$10 | 0,000 plus 15% of the excess | over \$500,000. | | |
| Over \$1,000,000 but not over \$ | \$1,500,000 \$17 | 5,000 plus 10% of the excess | over \$1,000,000. | | |
| Over \$1,500,000 but not over \$ | \$17,000,000 \$22 | 5,000 plus 5% of the excess of | over \$1,500,000. | | |
| Over \$17,000,000 | \$1,0 | 000,000. | | | |
| g Grassroots nontaxable a | amount (enter 25% of I | ine 1f) | | | |
| h Subtract line 1g from lir | ne 1a. If zero or less, e | nter -0 | | | |
| i Subtract line 1f from lin | e 1c. If zero or less, er | nter -0 | | | |
| j If there is an amount ot section 4911 tax for this | her than zero on either s year? | line 1h or line 1i, did t | he organization file For | m 4720 reporting | Yes No |
| (Som | 4-Y e organizations that m columns b | ear Averaging Period L ade a section 501(h) el elow. See the instructio | Inder Section 501(h) ection do not have to c ons for lines 2a throug | complete all of the five h 2f.) | |
| | Lobbyin | g Expenditures During | 4-Year Averaging Peri | od | |
| Calendar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) Total |

| DAA | | Cabadula C (Far | m 000 or 000 EZ) 2011 |
|--|--|-----------------|-----------------------|
| f Grassroots lobbying expenditures | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | |
| d Grassroots nontaxable amount | | | |
| c Total lobbying expenditures | | | |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | | | |
| 2a Lobbying non-taxable amount | | | |
| year beginning inj | | | |

Schedule **C** (Form 990 or 990-EZ) 2011

| Schedule C (Form 990 or 990-EZ) 2011 The Art Institute of Chicago | Schedule C | (Form 990 or 990-F7) | 2011 The | Art | Institute | of | Chicago |
|---|------------|----------------------|----------|-----|-----------|----|---------|
|---|------------|----------------------|----------|-----|-----------|----|---------|

36-2167725

Page 3

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 | a) | (b) |
|---|--------|--------|-------------------|
| For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. | Yes | No | Amount |
| See Part IV 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? | | Х | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | Х | |
| c Media advertisements? | | Х | |
| d Mailings to members, legislators, or the public? | Х | | |
| e Publications, or published or broadcast statements? | | Х | |
| f Grants to other organizations for lobbying purposes? | | Х | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | Х | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | Х | |
| i Other activities? | | | 15,375. |
| j Total. Add lines 1c through 1i. | | | 15,375. |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | |
| 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 | | 57 | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | Х | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6). | (C)(5) | , or | |
| | | | Yes No |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 | (c)(5) | , or s | ection |
| 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.' | R (b) | Part | III-A, line 3, is |
| 1 Dues, assessments and similar amounts from members | | 1 | |
| 2 Section 162(e) nondeductible 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 exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli expenditure next year? | tical | 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; P Also, complete this part for any additional information. | | | |
| | | | |
| Part II-B - Description of Lobbying Activity | | | |
| The amount_represents the Art_Institute_of_Chicago's portion of f | unds | uti | lized_by |
| Museums_in_the_Park_for_lobbying_activities | | | |
| | | | |
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| Schedule C (| Form 990 or 990-EZ) 2011 The Art Institute of Chicago | 36-2167725 | Page 4 |
|--------------|--|------------|--------|
| Part IV | Form 990 or 990-EZ) 2011 The Art Institute of Chicago Supplemental Information (continued) | | |
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| SCI | HEDULE D | | | | _ | OMB No. | 1545-0047 | | |
|-----------------|---|--|--|--|---------------|---------------------------|-------------------------|--|--|
| | rm 990) | Sup | plemental Financial St | atements | | 20 | 11 | | |
| | | ► Comple | te if the organization answered ' | (es,' to Form 990, | | | Dublia | | |
| Depar Intern | tment of the Treasury al Revenue Service | Part IV, lines ► Atta | 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 1 ch to Form 990. ► See separate | instructions. | | Open to Inspect | ion | | |
| Name | of the organization | | · | | Employer id | entification nu | mber | | |
| | | | | | | | | | |
| | | ute of Chicago | | | 36-216 | | | | |
| Pa | tl Organizati | ions Maintaining Dono | • Advised Funds or Other S o Form 990, Part IV, line 6. | Similar Funds or Acco | ounts. Co | omplete i | f | | |
| . <u> </u> | the organi | | (a) Donor advised fund | | undo ond o | other accou | nto | | |
| 1 | Total number at e | end of year | · · | | | Iner accou | 1115 | | |
| 2 | | outions to (during year) | | | | | | | |
| 3 | 00 0 | from (during year) | | | | | | | |
| 4 | Aggregate value | at end of year | | | | | | | |
| 5 | Did the organizat funds are the org | ion inform all donors and dor anization's property, subject | or advisors in writing that the ass to the organization's exclusive leg | sets held in donor advised gal control? | | Yes | No | | |
| 6 | Did the organizat | ion inform all grantees, dono | rs, and donor advisors in writing t | hat grant funds can be | | - | | | |
| | used only for cha purpose conferrin | ritable purposes and not for ig impermissible private bene | rs, and donor advisors in writing t the benefit of the donor or donor a fit? | advisor, or for any other | | Yes | No | | |
| Pa | | | ete if the organization answ | | | IV, line 7 | | | |
| | | | the organization (check all that a | | | / - | | | |
| | Preservation | of land for public use (e.g., r | ecreation or education) | Preservation of an historica | ally importa | ant land are | ea | | |
| | Protection of | natural habitat | ٦ [] | Preservation of a certified | historic stri | ucture | | | |
| | | of open space | | | | | | | |
| 2 | Complete lines 2a last day of the tax | a through 2d if the organizati x vear | on held a qualified conservation c | ontribution in the form of a | a conserva | tion easem | ent on the | | |
| | | | | F F | leld at the | End of the | Tax Year | | |
| ć | Total number of a | conservation easements | | 2a | | | | | |
| | - | • | ments | | | | | | |
| | | | ied historic structure included in (| | | | | | |
| 0 | Number of consense structure listed in | rvation easements included i the National Register. | n (c) acquired after 8/17/06, and r | not on a historic | | | | | |
| 3 | tax year ► | | transferred, released, extinguishe | - | ganization | during the | | | |
| 4 | | 1 1 5 5 | nservation easement is located < | | | | | | |
| 5 | | | garding the periodic monitoring, in the interval of the interval of the second se | | | Yes | No | | |
| 6 | Staff and volunte | er hours devoted to monitori | ng, inspecting, and enforcing cons | servation easements during | g the year | | | | |
| 7 | Amount of expent | ses incurred in monitoring, ir | specting, and enforcing conserva | tion easements during the | year | | | | |
| 8 | | | n line 2(d) above satisfy the requi | | | Yes | No | | |
| 9 | include, if applica conservation ease | able, the text of the footnote ements. | conservation easements in its reve the organization's financial stat | ements that describes the | organizatio | on's accour | | | |
| Pa | t III Organizat | tions Maintaining Colle | ctions of Art, Historical Tre | easures, or Other Sin | nilar Ass | ets. | | | |
| | • | 5 | wered 'Yes' to Form 990, Pa | | | | | | |
| 1: | art, historical trea | sures, or other similar asset | SFAS 116 (ASC 958), not to rep s held for public exhibition, educa icial statements that describes the | tion, or research in further | ance of pu | nce sheet blic service | works of e, provide, | | |
| ł | historical treasure following amounts | es, or other similar assets he s relating to these items: | SFAS 116 (ASC 958), to report i d for public exhibition, education, | or research in furtherance | e of public | service, pr | ovide the | | |
| | | | line 1 | | | \$ | | | |
| • | • • | | | | | | | | |
| | amounts required | I to be reported under SFAS | rt, historical treasures, or other si 116 (ASC 958) relating to these it | ems: | | e the follow | wing | | |
| | | , , , | 1 | | · | | | | |
| | included li | | | | · Y | | | | |

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEEA3301L 05/25/11

| Schedule D (Form 990) 2011 The D Part III Organizations Mainta | | | I Treasures, or C | Other S | 36-216 [°] Similar Ass | | ontinu | Page 2 ed) | | | | | |
|--|-------------------------|------------------------|-----------------------------|-----------|------------------------------------|-----------------|-----------|----------------------|--|--|--|--|--|
| 3 Using the organization's acquisit items (check all that apply): | | | | | | | | | | | | | |
| a X Public exhibition | | d X Loan or exc | change programs | | | | | | | | | | |
| b X Scholarly research | | | change programs | | | | | | | | | | |
| c X Preservation for future gener | rations | e Other | | | | | | | | | | | |
| 4 Provide a description of the orga Part XIV. See Part XIV | | and explain how the | y further the organiza | ation's (| exempt purpos | se in | | | | | | | |
| 5 During the year, did the organiza assets to be sold to raise funds r | tion solicit or receive | donations of art. his | torical treasures. or o | other si | milar . | | Σ | No | | | | | |
| Part IV Escrow and Custodia line 9, or reported an | I Arrangements. | Complete if the c | organization answ | | | | | | | | | | |
| 1 a Is the organization an agent, trus included on Form 990, Part X? | stee, custodian, or otl | her intermediary for c | ontributions or other | assets | not | Yes | Г | No | | | | | |
| b If 'Yes,' explain the arrangement | in Part XIV and com | plete the following ta | ble: | | - | | | _ | | | | | |
| Amount | | | | | | | | | | | | | |
| c Beginning balance | | | | . 1c | | | | | | | | | |
| d Additions during the year | | | | . 1d | | | | | | | | | |
| e Distributions during the year | | | | . 1e | | | | | | | | | |
| f Ending balance | | | | - | - | | | _ | | | | | |
| 2a Did the organization include an a | amount on Form 990, | Part X, line 21? | | | | Yes | | No | | | | | |
| b If 'Yes,' explain the arrangement | | | | | | | | | | | | | |
| Part V Endowment Funds. Co | _ · ¥ | | | | | | | | | | | | |
| | (a) Current year | (b) Prior year | (c) Two years back | | Three years back | | Four year | s back | | | | | |
| 1 a Beginning of year balance | · · · | 663,913,585. | 616,716,313. | | ,448,838. | | | | | | | | |
| b Contributions | 13,042,836. | 67,894,964. | 25,467,861. | . 10 | ,847,284. | | | | | | | | |
| c Net investment earnings, gains, | | 1 = 1 | | | | | | | | | | | |
| and losses | | 151,400,848. | 64,519,514. | | 89934854. | | | | | | | | |
| d Grants or scholarships | 2,977,788. | 3,082,178. | 3,199,183. | . 2 | ,778,756. | | | | | | | | |
| e Other expenditures for facilities and programs | 38,205,259. | 35,698,555. | 37,713,043. | 38 | ,338,254. | | | | | | | | |
| f Administrative expenses | | | 1,877,877. | | ,527,945. | | | | | | | | |
| g End of year balance | | | 663,913,585. | | ,716,313. | | | | | | | | |
| 2 Provide the estimated percentag | | | | | | | | | | | | | |
| a Board designated or quasi-endov | vment ► 37 | 1.00 % | | | | | | | | | | | |
| b Permanent endowment | | | | | | | | | | | | | |
| c Temporarily restricted endowmer | nt ► 23.0 | 0 % | | | | | | | | | | | |
| The percentages in lines 2a, 2b, | and 2c should equal | 100%. | | | | | | | | | | | |
| 3a Are there endowment funds not i organization by: | in the possession of t | he organization that | are held and adminis | stered f | or the | Γ | Yes | No | | | | | |
| (i) unrelated organizations | | | | | | 3a(i) | X | | | | | | |
| (ii) related organizations | | | | | | 3a(ii) | | Х | | | | | |
| b If 'Yes' to 3a(ii), are the related of | | | | | | 3b | | | | | | | |
| 4 Describe in Part XIV the intended | - | | | | | | | | | | | | |
| Part VI Land, Buildings, and | | | | | | | | | | | | | |
| Description of property | (a) Cos | t or other basis (b | Cost or other basis (other) | | cumulated eciation | (d) | Book va | lue | | | | | |
| 1a Land. 11, 324, 688. 11, 324, 688. | | | | | | | | | | | | | |
| b Buildings | | | | | | | | | | | | | |
| c Leasehold improvements | | | 48,978,897. | | 110,908. | | ,867, | | | | | | |
| d Equipment . | | | 18,009,072. | 12, | 380,849. | | ,628, | | | | | | |
| e Other | | | 1,228,124. | 1, | 174,822. | | 53, | ,302. | | | | | |
| Total. Add lines 1a through 1e. (Colum | nn (d) must equal For | rm 990, Part X, colum | nn (B), line 10(c).). | | | 472 | ,712, | 941. | | | | | |
| ВАА | | | | | Sched | ule D (F | orm 99 | 0) 2011 | | | | | |

Schedule **D** (Form 990) 2011

| Schedule D (Form 990) 2011 The Art Institute | of Chicago | | 36-2167 | 725 Page 3 |
|--|-------------------|---------------|---|-------------------|
| Part VII Investments – Other Securities. See | | line 12. | | . 20 |
| (a) Description of security or category (including name of security) | (b) Book value | (c) | Method of valuatio end-of-year marke | |
| (1) Financial derivatives | | | 3 | |
| (2) Closely-held equity interests | | | | |
| (3) Other Hedge Funds | 180,500,602. | End of Year M | arket Value | |
| (A) Real Assets | 95,199,228. | | | |
| (B) Venture Capital/Private Equity | 95,607,046. | End of Year M | arket Value | |
| <u>(C)</u> | | | | |
| <u>(D)</u> | | | | |
| <u>(E)</u> | | | | |
| <u>(F)</u> | | | | |
| (<u>G</u>) (H) | | | | |
| (l) | | | | |
| Total. (Column (b) must equal Form 990 Part X, column (B) line 12.). | 371,306,876. | | | |
| Part VIII Investments - Program Related. See | Form 990, Part X, | line 13. N/A | | |
| (a) Description of investment type | (b) Book value | | Method of valuatio | |
| (1) | | Cost or | end-of-year marke | t value |
| (1) (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). ► Part IX Other Assets. See Form 990, Part X, | | | | |
| | escription | | | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) (10) | | | | |
| Total. (Column (b) must equal Form 990, Part X, column (| (R) line 15) | | • | |
| Part X Other Liabilities. See Form 990, Part | | | | |
| (a) Description of liability | (b) Book value | | | |
| (1) Federal income taxes | | | | |
| (2) Pension Liability | 64,544,5 | | | |
| (3) Refundable Advances | 3,400,55 | 50. | | |
| (4) | | | | |
| (5) | | _ | | |
| <u>(6)</u> | | | | |
| (7) | | | | |
| <u>(8)</u> (9) | | | | |
| (10) | | | | |
| (11) | | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) | .► 67,945,12 | 20. | | |

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Sche | edule D (Form 990) 2011 The Art Institute of Chicago | 36-21 | 67725 Page 4 |
|------|--|-----------------------|---------------------|
| | t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta | tements | 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 | | |
| Pa | t XII Reconciliation of Revenue per Audited Financial Statements Wit | h Revenue per Retur | n N/A |
| 1 | Total revenue, gains, and other support per audited financial statements | | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| á | Net unrealized gains on investments | | |
| ł | Donated services and use of facilities | | |
| (| Recoveries of prior year grants | | |
| C | I Other (Describe in Part XIV.) | | |
| e | Add lines 2a through 2d. | | e |
| 3 | Subtract line 2e from line 1 | | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| ä | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| ł | Other (Describe in Part XIV.) | | |
| C | Add lines 4a and 4b | | |
| | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | |
| Pa | t XIII Reconciliation of Expenses per Audited Financial Statements W | /ith Expenses per Ret | urn N/A |
| 1 | Total expenses and losses per audited financial statements | | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| | Donated services and use of facilities 2a | | |
| ł | Prior year adjustments | | |
| C | : Other losses | | |
| C | Other (Describe in Part XIV.) | | |
| e | Add lines 2a through 2d | | • |
| 3 | Subtract line 2e from line 1. | | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| | Other (Describe in Part XIV.) | | |
| | Add lines 4a and 4b Total expenses. Add lines 3 and 4c. <i>(This must equal Form 990, Part I, line 18.)</i> | | |
| | t XIV Supplemental Information | J | <u> </u> |
| r al | | | |

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.______

____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 ____

Schedule **D** (Form 990) 2011 The Art Institute of Chicago 36-2167725 Page 5 **Part XIV** Supplemental Information (continued) Part III, Line 1a - F/S Footnote For Art, Treasures, Etc. (continued) which only the income earned on principal balances may be used for acquisitions; 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 ___ <u>used for acquisitions.</u> 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 4 - Intended <u>Uses Of Endowment Fund</u> 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 __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

Schedule **D** (Form 990) 2011 The Art Institute of Chicago 36-2167725 Page 5 **Part XIV** Supplemental Information (continued) Part V, Line 4 - Intended Uses Of Endowment Fund (continued) ___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.______ Accounting Standards Codification ("ASC") 740, Income Taxes, prescribes a comprehensive model for how an institution should recognize, measure, present, and disclose in its financial statements uncertain tax positions that the institution has taken or expects to take on a tax return. For federal purposes, the Institute has reported federal net operating losses (NOLs) of approximately \$6.5 million for tax periods through June 30, 2011. The Institute does not have the ability to estimate the NOL through June 30, 2012, as the NOL calculation is reliant upon _____third-party_information, which is not yet available. These NOLs will expire, if not _____ utilized, between the years 2025 and 2031. The Institute has not recorded a tax benefit for these NOLs for the years ended June 30, 2012 and 2011, respectively; because it is not more likely than not that the Institute will be able to realize the benefit." The financial statements did not report uncertain tax positions. ______ _____

Schools

OMB No. 1545-0047 2011

| 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-E2 | - |

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE E (Form 990 or 990-EZ)

The Art Institute of Chicago

Employer identification number 36-2167725

| Pa | rt I | | | |
|-----|--|-------|--------|----------|
| | | | YES | NO |
| 1 | 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? | 1 | Х | |
| 2 | 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? | 2 | Х | |
| 3 | 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 of the general community it serves? | _ | | |
| | need more space, use Part II | 3 | Х | |
| | The nondiscriminatory policy is publicized in a variety of materials, | | | |
| | including the student bulletin, the course schedule issued each semester, initial marketing material, and the student handbook. | | | |
| | | | | |
| 4 | Does the organization maintain the following? | | | |
| ä | a Records indicating the racial composition of the student body, faculty, and administrative staff? | 4a | Х | <u> </u> |
| I | a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | 4b | Х | |
| | c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 4c | Х | |
| (| d Copies of all material used by the organization or on its behalf to solicit contributions? | 4d | Х | <u> </u> |
| | If you answered 'No' to any of the above, please explain. If you need more space, use Part II. | | | |
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| 5 | Does the organization discriminate by race in any way with respect to: | | | |
| ä | a Students' rights or privileges? | 5a | | Х |
| | | | | |
| I | a Admissions policies? | 5b | | Х |
| | | _ | | 37 |
| 0 | c Employment of faculty or administrative staff? | 5c | | Х |
| (| d Scholarships or other financial assistance? | 5d | | Х |
| | e Educational policies? | 5e | | Х |
| | | 56 | | <u></u> |
| t | f Use of facilities? | 5f | | Х |
| | | | | |
| 9 | g Athletic programs? | 5g | | X |
| | n Other extracurricular activities? | 5h | | Х |
| | If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II. | 511 | | |
| | If you answered thes to any of the above, please explain. If you need more space, use Fart II. | | | |
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| ~ | | 6 | V | |
| | a Does the organization receive any financial aid or assistance from a governmental agency? | 6a | Х | V |
| | b Has the organization's right to such aid ever been revoked or suspended? | 6b | | Х |
| 7 | If you answered 'Yes' to either line 6a or line 6b, explain on Part II. See Part II | | | |
| 7 | 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If | | | |
| | 'No,' explain on Part II | 7 | Х | |
| BAA | V For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule E (Form 990 | or 99 | 90-EZ) | 2011 |

Schedule E (Form 990 or 990-EZ) 2011

| **PUBLIC DISCLOSURE COPY** |
|---|
| Schedule E (Form 990 or 990-EZ) 2011 The Art Institute of Chicago 36-2167725 Page 2 |
| Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions). |
| Schedule_E, Line_6 - Explanation of Aid or Assistance_from_Governmental Agency |
| Part I, Line 6a - The Institute receives federal financial aid funding from the |
| Department_of_Education_under_the_following_programs: |
| |
| <u>Federal Pell Grant Program</u> |
| Federal_Supplemental_Educational_Opportunity_Grants_Program |
| Federal Work Study Program |
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| Sch | edule F | Statement | - | OMB No. 1545-0047 | | | | | | | | | |
|------|---|---|--|---|--------------------------|-------------------------------|--|--|--|--|--|--|--|
| (For | m 990) | ► Complete if the org | | 20 11 | | | | | | | | | |
| | tment of the Treasury al Revenue Service | | ► Attach to Form 990. ► See separate instructions. | | | | | | | | | | |
| Name | of the organization | Employer identi | fication number | | | | | | | | | | |
| The | e Art Institut | e of Chicago | | | | 36-21677 | 25 | | | | | | |
| Par | 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. Do the grantees' eligibili | es the organization ma ty for the grants or assi | intain records to s stance, and the s | substantiate the amount of its generation criteria used to award | grants and the grants | other assista or assistanc | ance, e? Yes No | | | | | | |
| 2 | For grantmakers. De United States. | scribe in Part V the org | anization's proce | dures for monitoring the use of | f its grants | and other as | ssistance outside the | | | | | | |
| 3 | Activities per Region | . (The following Part I, I | ine 3 table can b | e duplicated if additional space | is needed | .) | | | | | | | |
| | (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and | (d) Activities conducted in region (by type) (e.g., fundraising program | (d) is a | vity listed in program | (f) Total expenditures for and investments | | | | | | |

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, 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 | (1) Total expenditures for and investments in region |
|---|---|---|--|--|---|
| (1) NORTH AMERICA | | | MARKETING | N/A | 200. |
| EAST ASIA AND | | | | | |
| (2) THE PACIFIC | | | MARKETING | N/A | 26,415. |
| (3) EUROPE | | | MARKETING | N/A | 34,811. |
| (4) SOUTH ASIA | | | PROGRAM SERVICES | EDUCATIONAL | 4,000. |
| EAST ASIA AND (5) THE PACIFIC | | | PROGRAM SERVICES | EXHIBITIONS | 2,400. |
| (6) EUROPE | | | PROGRAM SERVICES | EXHIBITIONS | 441,301. |
| (7) NORTH AMERICA | | | PROGRAM SERVICES | EXHIBITIONS | 2,941. |
| CENTRAL AMER & (8) CARIBBEAN | | | PROGRAM SERVICES | MEMBER TRAVEL | 1,014. |
| EAST ASIA AND (9) THE PACIFIC | | | PROGRAM SERVICES | MEMBER TRAVEL | 260. |
| (10) EUROPE | | | PROGRAM SERVICES | MEMBER TRAVEL | 5,201. |
| (11) NORTH AMERICA | | | PROGRAM SERVICES | MEMBER TRAVEL | 427. |
| (12) SOUTH ASIA | | | PROGRAM SERVICES | MEMBER TRAVEL | 787. |
| EAST AISA AND (13) THE PACIFIC | | | PROGRAM SERVICES | OTHER | 1,836. |
| (14) EUROPE | | | PROGRAM SERVICES | OTHER | 54,432. |
| EAST ASIA AND (15) THE PACIFIC | | | PROGRAM SERVICES | RECRUITING | 5,416. |
| (16) EUROPE | | | PROGRAM SERVICES | RECRUITING | 1,170. |
| (17) EUROPE | | | PROGRAM SERVICES | RESEARCH | 1,556. |
| 3a Sub-total | | | | | 584,167. |
| b Total from continuation sheets to Part I | | 1 | | | 232,155,633. |
| c Totals (add lines 3a and 3b) | 0 | 1 | | | 232,739,800. |

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

Schedule F (Form 990) 2011

No

Schedule F (Form 990) 2011 The Art Institute of Chicago

36-2167725

Page 2

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 Part II can be duplicated if additional space is needed.

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------------|--|--|------------|-------------------------|---------------------------------|---------------------------------------|--|--|--|
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
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| (13) | | | | | | | | | |
| (14) | | | | | | | | | |
| (15) | | | | | | | | | |
| (16) | | | | | | | | | |
| | Enter total number of recipient organiz the grantee or counsel has provided a | | | | | | | | 0 |
| 3 E BAA | Enter total number of other organizati | ons or entities | | | | | | | 0 (Form 990) 2011 |

Schedule F (Form 990) 2011 The Art Institute of Chicago

36-2167725

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other |
|---------------------------------|------------|-----------------------------|------------------------------------|--|-----------------------------------|--|---|
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
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| (15) | | | | | | | |
| (16) | | | | | | | |
| (17) | | | | | | | |
| (18) BAA | | | | | | Sabadula | F (Form 990) 201 |

| | edule F (Form 990) 2011 The Art Institute of Chicago | 36-2167725 | Page 4 |
|-----|---|------------|--------|
| Par | t IV Foreign Forms | | |
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). | | No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization metaured to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Coreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A). | Certain | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' to organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To C Foreign Corporations. (see Instructions for Form 5471) | Certain | No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qua electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Informa Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621). | ntion | No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' to organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Forei Partnerships. (see Instructions for Form 8865). | gn | No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructi for Form 5713)</i> . | ons Yes | X No |

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Schedule F (Form 990) 2011

| Schedule F | (Form 990) 2011 | The Ar | t Inst | itute o | f Chicag | 0 | 36-2167725 | Page 5 |
|------------|-----------------|------------|------------|-----------|---------------|---|-----------------------------|-----------|
| Part V | Supplementa | Informat | ion | | | red by Part I, line 2 (mo stments vs expenditures and Part III, column (c) o provide any additiona | | <u> </u> |
| | Complete this | part to p | rovide th | ne inform | ation requi | red by Part I, line 2 (mo | nitoring of funds); Part | I, line |
| | 3, column (f) | (accountir | ng metho | od; amou | nts of inve | stments vs expenditures | s per region); Part II, lir | ne 1 |
| | (accounting m | iethod); P | art III (a | ccounting | g method); | and Part III, column (c) |) (estimated number of | uctions) |
| | recipients), as | applicab | ie. Also | complete | e this part t | o provide any additiona | | ictions). |
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Continuation Sheet for Schedule F (Form 990)

 Attach to Form 990 to list additional information for Schedule F (Form 990)Part I, line 3; Part II, line 1; or Part III.
 See instructions for Schedule F (Form 990). 2011

Continuation Page 1 of 2

Name of the organization

The Art Institute of Chicago

36-2167725

Employer identification number

| Part I Continuation of | Activities per R | Region. (Scheo | lule F (Form 990), Part I, | line 3) | |
|---------------------------------|-------------------------------------|--|---|--|--|
| (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 |
| | | | DDOCDAM CEDUICEC | DECENDOU | 0 077 |
| SOUTH ASIA EAST ASIA AND THE | | | PROGRAM SERVICES | RESEARCH SCHOLARLY | 8,977. |
| PACIFIC | | | PROGRAM SERVICES | PUBL | 66,927. |
| 1/101110 | | | | SCHOLARLY | 00, 527. |
| EUROPE | | | PROGRAM SERVICES | PUBL | 123,144. |
| | | | | SCHOLARLY | 100/111 |
| NORTH AMERICA | | | PROGRAM SERVICES | PUBL | 5,475. |
| | | | | SCHOLARLY | |
| SOUTH ASIA | | | PROGRAM SERVICES | PUBL | 5,000. |
| EAST ASIA AND THE | | | | | |
| PACIFIC | | | PROGRAM SERVICES | STUDY TOURS | 4,621. |
| | | | | | |
| EUROPE | | 1 | PROGRAM SERVICES | STUDY TOURS | 351,313. |
| | | | | | |
| NORTH AMERICA | | | PROGRAM SERVICES | STUDY TOURS | 1,004. |
| DUCCT | | | | | 2 250 |
| RUSSIA | | | PROGRAM SERVICES | STUDY TOURS | 3,359. |
| COUNTL AMEDICA | | | DDOCDAM CEDUTCEC | | F2 040 |
| SOUTH AMERICA | | | PROGRAM SERVICES | STUDY TOURS | 53,042. |
| SOUTH ASIA | | | PROGRAM SERVICES | STUDY TOURS | 34,690. |
| EAST ASIA AND THE | | | FROGRAM SERVICES | TRAVEL/EDUCAT | 54,090. |
| PACIFIC | | | PROGRAM SERVICES | IONAL | 4,450. |
| 1/101110 | | | | TRAVEL/EDUCAT | 4,450. |
| EUROPE | | | PROGRAM SERVICES | IONAL | 50,041. |
| | | | | TRAVEL/EDUCAT | 0070111 |
| NORTH AMERICA | | | PROGRAM SERVICES | IONAL | 15,376. |
| | | | | TRAVEL/EDUCAT | , |
| RUSSIA | | | PROGRAM SERVICES | IONAL | 1,898. |
| | | | | TRAVEL/EDUCAT | |
| SOUTH ASIA | | | PROGRAM SERVICES | IONAL | 2,429. |
| EAST ASIA AND THE | | | | TRAVEL/EXHIBI | |
| PACIFIC | | | PROGRAM SERVICES | TIONS | 3,783. |
| | | | | TRAVEL/EXHIBI | |
| EUROPE | | | PROGRAM SERVICES | TIONS | 91,911. |
| MIDDLE EAST & N | | | DDOGDAN GEDUIGEG | TRAVEL/EXHIBI | 0 115 |
| AFRICA | | | PROGRAM SERVICES | TIONS TRAVEL/EXHIBI | 2,115. |
| NODULI AMEDICA | | | DDOCDAM CEDVICES | | C 0E1 |
| NORTH AMERICA | | | PROGRAM SERVICES | TIONS TRAVEL/EXHIBI | 6,051. |
| SOUTH ASIA | | | PROGRAM SERVICES | TIONS | 169,946. |
| CENTRAL AMER & | | | | TRAVEL/RECRUI | 107, 740. |
| CARIBBEAN | | | PROGRAM SERVICES | TING | 229. |
| EAST ASIA AND THE | | | | TRAVEL/RECRUI | |
| PACIFIC | | | PROGRAM SERVICES | TING | 58,288. |
| | | | | | |
| Totals | • 0 | 1 | | | 1,064,069. |

Schedule F Cont (Form 990) 2011

Continuation Sheet for Schedule F (Form 990)

 Attach to Form 990 to list additional information for Schedule F (Form 990)Part I, line 3; Part II, line 1; or Part III.
 See instructions for Schedule F (Form 990). 2011

Continuation Page 2 of 2

Name of the organization Employer identification number The Art Institute of Chicago 36-2167725 Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I line 3) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (f) Total offices in the employees or region (by type (i.e., (d) is a program expenditures fundraising, program services, grants to recipients region agents in service, describe in region region specific type of located in the region) service(s) in region TRAVEL/RECRUI 6,605. NORTH AMERICA PROGRAM SERVICES TING TRAVEL/RECRUI SOUTH ASIA PROGRAM SERVICES TING 1,542. TRAVEL/RESEAR EUROPE PROGRAM SERVICES CH 26,177. TRAVEL/RESEAR NORTH AMERICA PROGRAM SERVICES CH 2,720. CENTRAL AMER & PASSIVE INVESTMENTS CARIBBEAN N/A 204,867,724. PASSIVE INVESTMENTS EUROPE N/A 1,148,974. PASSIVE NORTH AMERICA INVESTMENTS N/A 25,037,822.

231,091,564.

Schedule F Cont (Form 990) 2011

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Totals.....

| | | • • | | | | | | OMB No. 1545-0047 |
|--|--|--|----------------------------|--|--|-----------------------|---|---|
| SCHEDULE G (Form 990 or 990-EZ) | | Supplei Fundi | nental raising | Inform or Ga | nation Regardin ming Activities | g | | 2011 |
| Department of the Treasury Internal Revenue Service | or 19, or | if the organiza | tion enter | red more t | es' to Form 990, Part IV han \$15,000 on Form 9 Z. ► See separate inst | 90-EZ, li | ne 6a. | Open to Public Inspection |
| Name of the organization | | | | | | | Employer identifica | |
| The Art Instit | | | | | | | 36-216772 | 5 |
| Part I Fundraising Form 990-E2 | Activities. Comp I filers are not rec | lete if the orgar quired to compl | nization ar ete this pa | nswered 'Y art. | es' to Form 990, Part l | V, line 1 | 7. | |
| 1 Indicate whether | the organization i | raised funds thr | ough any | of the foll | owing activities. Check | all that a | apply. | |
| a X Mail solicitati | | | | е | X Solicitation of non- | - | - | |
| | email solicitations | 5 | | f | X Solicitation of gove | | grants | |
| c X Phone solicit | | | | g | X Special fundraising | events | | |
| d X In-person sol 2a Did the organizat employees listed | ion have a writter | n or oral agreen t VII) or entity i | nent with n connect | any indivio tion with p | dual (including officers, rofessional fundraising | director: services | s, trustees or k ? | ey XYes No |
| b If 'Yes,' list the te compensated at I | | | | draisers) p | ursuant to agreements | under w | hich the fundra | iser is to be |
| (i) Name and addres or entity (fun | | (ii) Activity | have custor | fundraiser dy or control ibutions? | (iv) Gross receipts from activity | (or r fundra | nount paid to etained by) aiser listed in plumn (i) | (vi) Amount paid to (or retained by) organization |
| | | | Yes | No | | | | |
| 1 SD&A Teleserv | с | Telemarket ing | | Х | 305,785. | | 152,059. | 153,726. |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
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| 9 | | | | | | | | |
| 10 | | | | | | | | |
| Total | | | | ► | 305,785. | | 152,059. | 153,726. |

| 3 | List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. |
|---|--|
| | IL AL AK AZ CA CO DC FL KS KY MD MA MI MS MO NH NJ NY ND OH OK OR SC UT VA WA WI |
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| Sche | edule | G (Form 990 or 990-EZ) 2011 The Art | : Institute of | Chicago | 36-216 | 57725 Page 2 |
|------------------|---|--|--|--|--|--|
| Pai | rt II | Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gree | event contribution | nswered 'Yes' to Fo s and gross income | rm 990, Part IV, lir on Form 990-EZ, | ne 18, or reported lines 1 and 6b. |
| RE | | | (a) Event #1 Lichtenstein (event type) | (b) Event #2 SNAP Gala (event type) | (c) Other events 10 (total number) | (d) Total events (add column (a) through column (c)) |
| R E V E N U E | 1 | Gross receipts | 1,456,644. | 498,900. | 1,526,916. | 3,482,460. |
| Ĕ | 2 | Less: Charitable contributions | 1,296,364. | 352,930. | 1,032,034. | 2,681,328. |
| | 3 | Gross income (line 1 minus line 2) | 160,280. | 145,970. | 494,882. | 801,132. |
| | 4 | Cash prizes | | | | |
| Б | 5 | Noncash prizes | | | | |
| D R E C T | 6 | Rent/facility costs | | | | |
| | 7 | Food and beverages | | | | |
| E X P F | 8 | Entertainment | | | | |
| EXPENSES | 9 | Other direct expenses | 411,773. | 247,739. | 1,005,267. | 1,664,779. |
| S | 10 11 | Direct expense summary. Add lines 4 thr Net income summary. Combine line 3, co | • • • • • • | | | <u>1,664,779.</u> -863,647. |
| Pa | rt III | Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a. | tion answered 'Ye | | | |
| REV | | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive | (c) Other gaming | (d) Total gaming (add column (a) |
| E | | | | bingo | | through column (c)) |
| REVENUE | 1 | Gross revenue | | binĝo | 19,260. | |
| | | Gross revenue | | binĝo | 19,260. | through column` (c)) |
| | 2 3 | | | binĝo | 19,260. 25,973. | through column (c)) |
| | 2 3 | Cash prizes | | binĝo | | through column (c)) |
| | 2 3 | Cash prizes | | binĝo | 25,973. | through column (c)) |
| | 2 3 4 5 | Cash prizes Non-cash prizes Rent/facility costs | Yes% ∑ No | Yes <u>0</u> % | | through column (c)) |
| | 2 3 4 5 6 | Cash prizes Non-cash prizes Rent/facility costs Other direct expenses | X No | ∑ Yes% X No | 25,973. X Yes <u>100</u> % No | through column` (ć)) 19,260. 25,973. |
| | 2 3 4 5 6 | Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thr | No | Yes% | 25,973. X Yes% No | through column`(ć)) 19,260. 25,973. |
| D I RENSECT S | 2 3 4 5 6 7 8 Ente | Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 thr | X No ough 5 in column (d) | Yes 0 % X No 0 line 7 0 s: IL lese states? 0 | 25,973. X Yes% No► | through column (c)) 19,260. 25,973. 25,973. -6,713. X Yes No |

Schedule **G** (Form 990 or 990-EZ) 2011

| Schedule G (Form 990 or 990 EZ) 2011 The Art Institute of Chicago | 36-216 | 7725 | Page 3 |
|--|----------------------------------|---------------------------|--------------|
| 11 Does the organization operate gaming activities with nonmembers? | | X Yes | No |
| 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other administer charitable gaming? | entity formed to | Yes | XNo |
| 13 Indicate the percentage of gaming activity operated in: | | | |
| a The organization's facility | 13a | | 33.0% |
| b An outside facility. | 13b | | 67.0% |
| 14 Enter the name and address of the person who prepares the organization's gaming/special events b | ooks and records | s: | |
| Name ► <u>Patricia C. Rowlands</u> | | | |
| Address ► <u>111</u> South Michigan Avenue, Chicago, 60603 | | | |
| 15 a Does the organization have a contact with a third party from whom the organization receives gaming b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ | | | XNo |
| Name ► | | | · |
| Address ► | | | ļ |
| 16 Gaming manager information: | | | |
| Name ► <u>N/A</u> | | | |
| 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 procees state gaming license? | eds to retain the | . Yes | XNo |
| b Enter the amount of distributions required under state law to be distributed to other exempt organization | ations or spent in | the | |
| organization's own exempt activities during the tax year > \$ | | | |
| Part IV Supplemental Information. Complete this part to provide the explanations r columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as this part to provide any additional information (see instructions). | equired by Pa s applicable. A | rt I, line 2 Also comp | 2b, plete |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| SCHEDULE I (Form 990) | Gi Gov | rants and Ot vernments, a | her Assistance nd Individuals in | to Organization n the United Sta | ls, ates | Ļ | OMB No. 1545-0047 |
|---|---|---|--|--|---|--|--|
| Department of the Treasury Internal Revenue Service | | | on answered 'Yes' to Fo ► Attatch to Form 99 | orm 990, Part IV, lines 2 | | - | Open to Public Inspection |
| Name of the organization The Art Institute of Chica Part I General Information on G | ago | | | | | Employer identifie 36-216772 | |
| Does the organization maintain record the selection criteria used to award Describe in Part IV the organization Part II Grants and Other Assistan Form 990, Part IV, line 21 | ords to substantiate th the grants or assistan 's procedures for mon ance to Governme I for any recipient | e amount of the gra ce? itoring the use of g ents and Organ that received n | rant funds in the United izations in the Unit nore than \$5,000. C | States. <u>See Pa</u> ed States. Comple Check this box if no | rt IV te if the organiza one recipient re | tion answered 'Y ceived more than | es' to \$5,000. |
| Part II can be duplicated 1 (a) Name and address of organization or government | if additional space (b) EIN | c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | ► (h) Purpose of grant or assistance |
| (1) Northwestern University 633 Clark Street Evanston, IL 60208 (2) | 36-2167817 | 501 (c)(3) | 62,458. | 0. | N/A | N/A | Conservation Research |
| | - | | | | | | |
| | - - - | | | | | | |
| | - | | | | | | |
| | - | | | | | | |
| | - | | | | | | |
| | - - - | | | | | | |
| 2 Enter total number of section 501(c) 3 Enter total number of other organiza | ations listed in the line | e 1 table | | | | • | |

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

Page 2

 Schedule I (Form 990) (2011)
 The Art Institute of Chicago
 36-2167725
 F

 Part III
 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

 Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|--------------------------|--------------------------|-----------------------------------|--|--|
| Student Scholarships and 1 Stipends | 3,083 | 31,429,033. | | N/A | N/A |
| 2 Faculty Enrichment Grants | 53 | 80,317. | | N/A | N/A |
| 3 | | | | | |
| 4 | | | | | |
| _ 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| Part IV Supplemental Information. Comp | lete this part to p | rovide the informat | tion required in Pa | rt I, line 2, and any ot | her additional information. |
| Part I, Line 2 - Procedures for Monitor | ing Use of Grants | Funds in U.S. | | | |
| Scholarships and stipends are | available to u | indergraduate s | tudents and gr | aduate | |
| students through the admission | <u>s process. On</u> | ce awarded depe | ending on the t | ype of aid, | |
| payment is credited to either | the student ac | count or direc | tly to the stu | Ident. All | |
| payments are monitored and app | roved by the l | Financial Servi | .ces_department | before | |
| payment is applied or paid to | the student. | All students r | eceiving schol | arships and | |
| stipends have been selected on | a non-discri | ninatory basis. | | | |
| Faculty enrichment grant oppor | tunities are a | available to fu | ll-time and pa | art-time | |
| faculty teaching in a degree p | rogram. Seled | ctions are base | d on the merit | of the | |
| proposal and reviewed by membe | <u>rs of a select</u> | tion_committee. | Payments are | monitored by | |
| the Dean's office and all paym | ents are appro | oved by the Vic | e Provost and | School | |
| BAA | | | | | Schedule (Form 990) (2011) |

Schedule I, Part IV - Supplemental Information

The Art Institute of Chicago

Page 3

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Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

Finance department before payment is made.

Part IV - Additional Supplemental Information

For organizational payments for research grants, a departmental program

representative for the grant reviews and approves all payment requests before

payment is issued.

2011

| SCHEDULE J | Compensation Information | 0 | MB No. | 1545-00 |)47 |
|---|---|--------------------|-----------------|--------------|-----|
| (Form 990) | For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees | | 20 | 11 | |
| Department of the Treasury Internal Revenue Service | Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. Attach to Form 990. See separate instructions. | 0 | pen te Inspe | o Publection | lic |
| Name of the organization | Employer iden | | mber | | |
| | ute of Chicago 36-2167 | 725 | | | |
| Part I Questions | s Regarding Compensation | | | Vee | Na |
| 1 a Check the appropr VII, Section A, lir | riate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part ne 1a. Complete Part III to provide any relevant information regarding these items. | t t III | | Yes | No |
| X First-class or | charter travel X Housing allowance or residence for personal u | - | | | |
| X Travel for cor | | | | | |
| | ication and gross-up payments X Health or social club dues or initiation fees | | | | |
| | spending account Personal services (e.g., maid, chauffeur, chef) | | | | |
| | | | | | |
| b If any of the base | es on line 1a are checked, did the organization follow a written policy regarding payment or | | | | |
| reimbursement of | r provision of all of the expenses described above? If 'No,' complete Part III to explain | | 1b | Х | |
| 2 Did the organizat | ion require substantiation prior to reimbursing or allowing expenses incurred by all officers, dir. | octors | | | |
| trustees, and the | tion require substantiation prior to reimbursing or allowing expenses incurred by all officers, dire CEO/Executive Director, regarding the items checked in line 1a? | | 2 | Х | |
| 3 Indicate which, if CEO/Executive D establish compen | any, of the following the filing organization used to establish the compensation of the organiza birector. Check all that apply. Do not check any boxes for methods used by a related organization station of the CEO/Executive Director. Explain in Part III. | ation's on to | | | |
| · · · | | | | | |
| X Compensatio | | | | | |
| | | | | | |
| A Form 990 OF | other organizations X Approval by the board or compensation comm | niee | | | |
| 4 During the year, of or a related organ | did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organiza nization: | ation | | | |
| - | ance payment or change-of-control payment? | | 4a | Х | |
| b Participate in, or | receive payment from, a supplemental nonqualified retirement plan? | | 4b | Х | |
| c Participate in, or | receive payment from, an equity-based compensation arrangement? | | 4c | | Х |
| If 'Yes' to any of | lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Par | t III | | | |
| Only section 501 | (c)(3) and 501(c)(4) organizations must complete lines 5-9. | | | | |
| 5 For persons lister contingent on the | d in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic e revenues of: | on | | | |
| a The organization | ? | | 5a | | Х |
| b Any related organ | nization? | | 5b | | Х |
| If 'Yes' to line 5a | or 5b, describe in Part III. | | | | |
| contingent on the | | | | | |
| • | ? | | 6a | | Х |
| b Any related organ | nization? | | 6b | | Х |
| If 'Yes' to line 6a | or 6b, describe in Part III. | | | | |
| 7 For persons listed described in lines | d in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payment s 5 and 6? If 'Yes,' describe in Part III | s not | 7 | | Х |
| 8 Were any amoun contract exceptio | ts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the n described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part IIIPar | e initial .tIII | 8 | Х | |

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

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

9 Schedule J (Form 990) 2011

Х

The Art Institute of Chicago Schedule J (Form 990) 2011

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Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

| | | (B) Breakdown o | of W-2 and/or 1099-MIS | C compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|-------------------|------|-----------------------|---------------------------------------|---|-----------------------------|----------------|----------------------|---|
| (A) Name | | (i) Base compensation | (ii) Bonus and incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(D) | reported as deferred in prior Form 990 |
| Walter E. Massey | (i) | <u>487,670.</u> | 0. | 17,955. | 0. | 0. | 505,625. | 0. |
| 1 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Douglas Druick | (i) | 302,660. | 0. | 22,552. | <u>78,000.</u> | 12,085. | <u>415,297.</u> | 0. |
| 2 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Julia E. Getzels | (i) | 300,694. | <u>0</u> . | 13,123. | 41,000. | 23,061. | <u> </u> | 12,413. |
| 3 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Eric Anyah | (i) | <u> </u> | <u>0</u> . | 16,743. | <u> </u> | <u> </u> | <u> </u> | 0. |
| 4 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| David Thurm | (i) | <u> </u> | <u>0</u> . | <u>22,887.</u> | 22 <u>,050.</u> | <u> </u> | <u> </u> | 2,482. |
| 5 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Edward McNulty | (i) | <u> </u> | <u>0</u> . | 11,040. | <u> </u> | <u> </u> | <u>329,787.</u> | <u> </u> |
| 6 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Elissa Tenny | (i) | <u> </u> | <u>0</u> . | <u>40,488.</u> | <u>22,050.</u> | 655. | <u>328,922.</u> | 0. |
| 7 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Elizabeth Hurley | (i) | 239,594. | <u>0</u> . | <u>307.</u> | 15,606. | <u> </u> | <u> </u> | 0. |
| 8 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Elizabeth Grainer | (i) | 179,651. | 0. | <u>685.</u> | <u> </u> | 8,165. | <u> </u> | 0. |
| 9 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Lisa Wainwright | (i) | <u>196,583</u> . | 0. | <u>415.</u> | <u>18,150.</u> | <u> </u> | <u>230,266.</u> | 0. |
| 10 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Rose Milkowski | (i) | 170,109. | 0. | 218. | <u> </u> | 2,473. | <u> </u> | 0. |
| 11 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Andrea Reynders | (i) | <u> </u> | 0. | 185,649. | <u> </u> | <u>4,478.</u> | <u> </u> | 0. |
| 12 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Eugene Adams | (i) | 175,044. | 0. | <u> </u> | 33,000. | <u> </u> | <u> </u> | 0. |
| 13 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Brian Esker | (i) | 168,075. | 0. | 16,747. | 24,000. | <u>9,327.</u> | <u> </u> | 0. |
| 14 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Samuel Quigley | (i) | 178,452. | 0. | <u>685.</u> | 16,410. | <u> </u> | <u> </u> | 0. |
| 15 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Carrie Heinonen | (i) | 80,086. | 0. | <u> </u> | 3,000. | 7,265. | <u> </u> | 0. |
| 16 | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| BAA | | | | TEEA4102L 01/ | 24/12 | | Sche | dule J (Form 990) 2011 |

| Schedule J (Form 990) 2011 The Art Institute of Chicago | 36-2167725 | Page 3 |
|--|-----------------------------------|-------------------|
| Part III Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4 | 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, ar | nd 8, for |
| Part II. Also complete this part for any additional information. | | |
| Part 1, Line 1a - Relevant Information Regarding Compensation Benefits | | |
| First class travel is allowed under limited circumstances as set forth in the trav | vel | |
| policy. The Presidents of the Museum and the School are allowed to have their | | |
| partners accompany them on business trips if their presence is necessary for a | | |
| specific purpose of the Institute | | |
| | | |
| The Provost/Senior_Vice_President for_Academic_Affairs_received_a_housing_stipend | · | |
| The housing stipend was grossed-up for applicable taxes. The stipend and gross-up | p | |
| were both addressed in the individual employment contract. | | |
| | | |
| The President of the School's employment contract allows for reimbursement for up | | |
| \$5,000 annually for fees and membership dues for athletic, social, or other clubs | | |
| used for personal, non-business purposes. The annual amounts reimbursed are | | |
| reported as taxable compensation. | | |
| Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation | | |
| The following individuals received severance payments: | | |
| Andrea Reynders amount paid in calendar year 2011 of \$185,438 | | |
| Carrie Heinonen amount paid in calendar year 2011 of \$83,952 | | |
| Wellington Reiter amount paid in calendar year 2011 of \$140,125 BAA | Schedule | J (Form 990) 2011 |

| Schedule J (Form 990) 2011 The Art Institute of Chicago Part III Supplemental Information | 36-2167725 | Page 3 |
|--|---|---------------|
| Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1l Part II. Also complete this part for any additional information. | b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, ar | nd 8, for |
| Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation (co | ontinued) | |
| | | |
| The following individuals participated in a supplemental non gualified retired | ment | |
| plan: | | |
| Julia E. Getzels amount paid in calendar year 2011 of \$12,413 | | |
| David Thurm amount paid in calendar year 2011 of \$2,482 | | |
| Edward McNulty amount paid in calendar year 2011 of \$8,919 | | |
| James Cuno amount paid in calendar year 2011 of \$231,501 | | |
| Anthony E. Jones amount paid in calendar year 2011 of \$39,175 | | |
| Part I, Line 8 - Amounts Reported Pursuant to a Contract Subject to Initial Contract | | |
| The payments reported in Form 990, Part VII for the Former President of the So | chool | |
| of the Art Institute, were paid pursuant to a contract that was subject to the | e | |
| initial contract exception described in Regs. Section 53.4958-4(a)(3). The in | nitial | |
| <u>contract exception applies because the payments were made pursuant to a writte</u> | en | |
| <u>contract and, as a new hire with no previous connection to the organization, l</u> | <u>Mr</u> | |
| <u>Reiter was not a disqualified person immediately prior to entering the contra</u> | <u>ct</u> | |
| The payments were fixed payments as defined under Reqs. Section 53.4958-4(a) (| <u>3)(ii).</u> | |
| | | |

| Schedule J (Form 990) 2011 The Art Institute of Chicago | 36-2167725 | Page 3 |
|---|-----------------------------------|-----------|
| Part III Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4 Part II. Also complete this part for any additional information. | 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, an | ıd 8, for |
| Part I, Line 8 - Amounts Reported Pursuant to a Contract Subject to Initial Contract (continued) | | |
| Although the initial contract exception applies to these payments, the Executive | | |
| <u>Committee of the Board of Trustees reviewed compensation survey data prepared by </u> | 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 | | |
| <u>negotiations to assure that the compensation under discussion was competitively</u> | | |
| 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 | d | |
| of Trustees. The total remuneration contained in the final compensation package wa | as | |
| <u></u> | | |
| <u>Trustees received a description of the terms of the compensation package before</u> | | |
| voting to hire Mr. Reiter. | | |
| | | |
| | | |
| | | · |

Continuation Sheet for Schedule J (Form 990)

2011

Continuation Page 1 of 1

| Name of the organization | | | | | | | Employer identi | ication number |
|--------------------------|-------------|----------|--|-------------------|--|----------------------------|------------------------------------|---|
| The Art Institu | te of | Chicago | | | | | 36-21677 | 25 |
| Part II Continuation | | | , Trustees, Key En | ployees, and High | nest Compensated | Employees (Sche | dule J, Part II) | |
| (A) Name | | | f W-2 and/or 1099-MIS (ii) Bonus & incentive 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 |
| James Cuno | (i) | 311,252. | 0. | 296,621. | 23,000. | 6,260. | 637,133. | 231,501. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | |
| Anthony Jones | (i) | 112,373. | 0. | 39,175. | 17,000. | 0. | 168,548. | 39,175. |
| - | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| Wellington Reiter | (i) | 0. | 0. | 140,125. | 0. | 0. | 140,125. | 0. |
| - | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | L | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) _ | | | | | | | |
| | (ii) | | | | | | | |
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| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) (ii) | | | | | | | |
| | | | | | | | | |
| | (i) (ii) | | | | | | ┝ | |
| | (II) | | | | | | | |

TEEA4201L 08/25/11

Schedule J Cont (Form 990) 2011

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 Part VI.
 Attach to Form 990.
 See separate instructions.



2011 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 36-2167725

The Art Institute of Chicago

| Part I Bond Issues | | | | | | | | | | | | | | |
|--|---------------------------------------|--------------------|------------------------|--------------------------|--------------------------------|-----------------|---------------------|------------------------------|--------|--------------------|---------------------------------|------|--------------|------|
| (a) Issuer Name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue pr | rice | (f) Desc | ription of pu | irpose (g) Defease | | g) eased | ed (h) On behalf c issuer | | of financing | |
| | | | | | | | | | Yes | No | Yes | No | Yes | No |
| A IL Educ Facil Authority | 52-1297563 | 4520015W6 | 7/09/2003 | 18,73 | 7,797. | Refund 6/16 | und 6/16/1993 Bonds | | Х | | | Х | | |
| B IL Finance Authority | 86-1091967 | 45200FVM8 | 3/26/2009 | | 158,000. Constr./Renov. Museum | | n Facil. | | Х | | Х | | | |
| C IL Finance Authority | 86-1091967 | 45200F3N7 | 6/09/2010 | 113,537,854. See Part VI | | | | | Х | | Х | | | |
| D IL Finance Authority | 86-1091967 | 45200F3B3 | 5/20/2010 | 55,943 | 1,880. | Refund 3/26 | /2009 2009 | 9B Bonds | | Х | | Х | | |
| Part II Proceeds | | | | | | | | | | | | | | |
| | | | | | | | В | C | | | | D | | |
| 1 Amount of bonds retired | | | | | 60,000 | | 00,000. | 2,40 | 05,0 | 00. | 2 | 6,58 | 30,0 |)00. |
| 2 Amount of bonds legally defea | sed | | | | 45,000 | | | | | | | | | |
| 3 Total proceeds of issue | | | | . 18,7 | 37,990 | 6. 139,1 | 58,000. | 113,53 | 37,8 | 54. | | 5,94 | | |
| 4 Gross proceeds in reserve fund | ds | | | . 1 | 52,633 | 3. | | | | | | 4,30 |)8,4 | 151. |
| 5 Capitalized interest from proce | eds | | | | | | | | | | | | | |
| 6 Proceeds in refunding escrows | | | | | | | | 10,03 | 18,4 | 75. | | | | |
| 7 Issuance costs from proceeds | | | | | 19,540 | 6. | | | | | | | | |
| 8 Credit enhancement from proc | | | | | | | | | | | | | | |
| 9 Working capital expenditures f | | | | | 30,148 | 8. | | | 5,9 | 86. | | | 1,880. | |
| 10 Capital expenditures from proc | | | | | | 139,1 | 58,000. | | | | | | | |
| 11 Other spent proceeds | | | | | 88,302 | | | 103,8 | 50,2 | 50. | 5 | 5,94 | 10,0 | 00. |
| 12 Other unspent proceeds | | | | | | | | , | , | | | , | , | |
| 13 Year of substantial completion | | | | | 198 | 88 | 2009 | | 2 | 002 | | | 2 | 2002 |
| | | | | Yes | No | Yes | No | Yes | N | | Ye | s | | 0 |
| 14 Were the bonds issued as part | of a current refunding | issue? | | | | | X | X | | - | X | - | | |
| 15 Were the bonds issued as part | · · · · · · · · · · · · · · · · · · · | | | | Х | | X | X | | | | | Σ | (|
| 16 Has the final allocation of proc | | 0 | | | | Х | | X | | | Х | | - | - |
| · | | | | | | | | | | | | | | |
| 17 Does the organization maintair of proceeds? | n adequate books and r | ecords to support | t the final allocation | . Х | | Х | | Х | | | Х | | | |
| Part III Private Business U | | | | . 11 | | | | 21 | | | | | | |
| | 50 | | | ŀ | 7 | | В | c | | | | D | | |
| | | | | Yes | No | Yes | No | Yes | , N | 0 | Ye | | | 0 |
| 1 Was the organization a partner property financed by tax-exem | r in a partnership, or a pt bonds? | member of an LL | C, which owned | | | | Х | | | | | | Σ | ζ |
| 2 Are there any lease arrangement bond-financed property? | ents that may result in r | private business u | use of | | | | Х | | | | | | Σ | ζ |

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

| | | A | | В | | С | | D |
|--|--------------|------------|----------------|--------------|---------------|--------------|------------|------------|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | Х | | | | X |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | Х | | | | Х |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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▶ | | | 010 | 0.000 | 010 | 9 | 010 | 0.000 |
| 5 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 | | | olo | 0.000 | 00 | 2 | 00 | 0.000 |
| 6 Total of lines 4 and 5 | | | 0/0 | 0.000 | 0/0 | 9 | 00 | 0.000 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | | Х | | | | Х | |
| art IV Arbitrage | | | | | | | | 1 |
| | | Α | | В | | С | | D |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | | Х | | Х | | Х | | Х |
| 2 Is the bond issue a variable rate issue? | | Х | Х | | | Х | | Х |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | Х | | Х | | Х | | Х |
| b Name of provider | N/A | | N/A | | N/A | | N/A | |
| c Term of hedge | | | | • | | | | |
| d Was the hedge superintegrated? | | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |
| a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | Х | | Х | | Х | | Х |
| b Name of provider | N/A | | N/A | | N/A | | N/A | |
| c Term of GIC | | | | | | | | - |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 5 Were any gross proceeds invested beyond an available temporary period? | | Х | | Х | | Х | Х | |
| 5 Did the bond issue qualify for an exception to rebate? | Х | | Х | | | Х | Х | |
| art V Procedures To Undertake Corrective Action | | | | | | | | |
| s the organization established written procedures to ensure that violations of federal tax requirer | nents are ti | mely ident | ified and cori | rected throu | igh the volur | ntary closin | g agreemen | it progran |
| | | | | | | V Voc | No | |
| elf-remediation is not available under applicable regulations? | <u></u> | <u></u> | <u></u> | <u></u> | <u></u> | . A res | INU | |

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|--|--------------|---------------|-------------|--------------|--------------|------------------------|------------------|---------------|
| Part III Private Business Use (Continued) | | | | | | | | |
| | | Α | - | B | | C | - | D |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | | | | | |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | | | | | |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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▶ | | 00 | | 00 | | 010 | | 010 |
| 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 | | 00 | | 00 | | 0/0 | | 00 |
| 6 Total of lines 4 and 5 | | 00 | | 0 | | 00 | | 00 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | - | | | | _ | | |
| Part IV Arbitrage | | | | | | | | |
| | | Α | | В | (| C | [| D |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | | | | | | | | |
| 2 Is the bond issue a variable rate issue? | | | | | | | | |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of hedge. | | | | | | | | |
| d Was the hedge superintegrated? | | | | | | | | 1 |
| e Was the hedge terminated? | | | | | | | | 1 |
| 4a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of GIC | | | | | | | | - |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | L |
| 5 Were any gross proceeds invested beyond an available temporary period? | | | | | | | | L |
| 6 Did the bond issue qualify for an exception to rebate? | | | | | | | | L |
| Part V Procedures To Undertake Corrective Action | | | | | | | | |
| Has the organization established written procedures to ensure that violations of federal tax requirem | ients are ti | mely identifi | ed and corr | ected throug | gh the volun | itar <u>y c</u> losing | agreement | program |
| if self-remediation is not available under applicable regulations? | | | | | | . Yes | No | |
| Part VI Supplemental Information. Complete this part to provide additional in | formatio | n for resp | onses to | question | s on Sch | edule K (s | <u>ee instru</u> | ctions). |
| Additional Information (continued) | | | | | | | | |
| | Part I | . Colum | n(e)is i | investme | ent earn | inas I | <u>art I</u> | |
| Line 4-The amount in Column A consists of a cash-funded def | | • | | | | - | | |

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|--|----------|-------------|----------|----------|-----------|------------|------------|---------------|
| Part III Private Business Use (Continued) | | | | | | | | <u> </u> |
| | | Α | - | 3 | |) | - |) |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | | | | | |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | | | | | |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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► | | 0/0 | | 00 | | 00 | | 00 |
| 5 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 | | 0/0 | | 010 | | 0/0 | | olo |
| 6 Total of lines 4 and 5 | | 0/0 | | 0\0 | | 010 | | 00 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | | | | | | | |
| Part IV Arbitrage | | | | • | | | | |
| | | <u>A</u> | - | 3 | | | - |) |
| 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | Yes | No | Yes | No | Yes | No | Yes | No |
| 2 Is the bond issue a variable rate issue? | | | | | | | | |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | | | | | |
| b Name of provider | | • | | • | | | | |
| c Term of hedge | | | | | | | | |
| d Was the hedge superintegrated? | | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |
| 4a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of GIC | | | | | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 5 Were any gross proceeds invested beyond an available temporary period? | | | | | | | | |
| 6 Did the bond issue qualify for an exception to rebate? | | | | | | | | |
| Part V Procedures To Undertake Corrective Action | | | | | | | | |
| Has the organization established written procedures to ensure that violations of federal tax requirem | | | | | | | agreement | program |
| if self-remediation is not available under applicable regulations? | | | | | | | No | |
| Part VI Supplemental Information. Complete this part to provide additional in | formatio | on for resp | onses to | question | s on Sche | edule K (s | see instru | ctions). |
| Additional Information (continued) | | | | | | | | |
| bonds, and the amount in Column D consists of a yield-restr | icted f | und hold | ding res | stricted | lgifts | to the | first ca | <u>all</u> |
| date of the bonds; the amount on hand in such fund at the e | | | | | | | | |

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|--|----------|------------|----------|-----------|-----------|------------|-----------|---------------|
| Part III Private Business Use (Continued) | | | | | | | | |
| | | A | | 3 | (|) | - |) |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | | | | | |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | | | | | |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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► | | 00 | | 00 | | 010 | | 010 |
| 5 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 | | olo | | olo | | olo | | 010 |
| 6 Total of lines 4 and 5 | | 0/0 | | 0/0 | | 0/0 | | 010 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | | | | | | | |
| Part IV Arbitrage | | | | | | | | |
| | | A | | 3 | |) | |) |
| 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | Yes | No | Yes | No | Yes | No | Yes | No |
| 2 Is the bond issue a variable rate issue? | | | | | | | | |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of hedge | | | | | | | | |
| d Was the hedge superintegrated? | | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |
| 4a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of GIC | | | | | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 5 Were any gross proceeds invested beyond an available temporary period? | | | | | | | | |
| 6 Did the bond issue qualify for an exception to rebate? | | | | | | | | |
| Part V Procedures To Undertake Corrective Action | | | | | | | | |
| Has the organization established written procedures to ensure that violations of federal tax requirem if self-remediation is not available under applicable regulations? | | - | | • | | , , | agreement | program |
| Part VI Supplemental Information. Complete this part to provide additional in | formatio | n for resp | onses to | questions | s on Sche | edule K (s | ee instru | ctions). |
| Additional Information (continued) | | | | | | 、 - | | |
| and was used to redeem \$17.7 million of bonds on 07/01/2011 | Part | TT Lir | nes 9 ar | nd 11 C | olumne | C and D | -These | |
| amounts differ slightly from what was shown on the respecti | | | | | | | | TT. |

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|--|-----------------|-------------|----------|----------|-----------|------------|------------|---------------|
| Part III Private Business Use (Continued) | | | | | | | | |
| | | Α | - | 3 | | 2 | - |) |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | | | | | |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | | | | | |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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► | 1 | 0/0 | | 0/0 | | 00 | | 00 |
| 5 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 | | 00 | | 0/0 | | 0/0 | | 010 |
| 6 Total of lines 4 and 5 | | 0\0 | 5 | 0/0 | | 010 | | 010 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | | | | | | | |
| Part IV Arbitrage | | | | • | | | | |
| | | <u>A</u> | - | 3 | | 2 | - |) |
| 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | Yes | No | Yes | No | Yes | No | Yes | No |
| 2 Is the bond issue a variable rate issue? | | | | | | | | |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | | | | | |
| b Name of provider | | 1 | | | | | | |
| c Term of hedge | | | | | | | | |
| d Was the hedge superintegrated? | · | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |
| 4a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of GIC. | | | | | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 5 Were any gross proceeds invested beyond an available temporary period? | | | | | | | | |
| 6 Did the bond issue qualify for an exception to rebate? | | | | | | | | |
| Part V Procedures To Undertake Corrective Action | | | | | | | | |
| Has the organization established written procedures to ensure that violations of federal tax requirem | | | | | | | agreement | program |
| if self-remediation is not available under applicable regulations? | | | | | | | No | |
| Part VI Supplemental Information. Complete this part to provide additional in | <u>formatio</u> | on for resp | onses to | question | s on Sche | edule K (s | see instru | ctions). |
| Additional Information (continued) | | | | | | | | |
| Line 16, Column D-The Borrower reserves the right to modify | final | allocat | ion. Pa | art IV, | Line 5, | Column | C-This | |
| question is being answered without regard to a yield-restri | | | | | | | | ls of |

| Schedule K (Form 990) 2011 The Art Institute of Chicago | | | | | 3 | 86-21677 | 25 | Page 2 |
|--|---------------|----------------|-------------|--------------|-------------|--------------|-----------|---------------|
| Part III Private Business Use (Continued) | | | | | | | | |
| | | A | - | 3 | | C |] | |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | | | | | | | |
| b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of bond-financed property? | | | | | | | | |
| d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 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 | | 00 | | 00 | | 00 | | 010 |
| 5 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 | | 00 | | 0 0 | | 0/0 | | 00 |
| 6 Total of lines 4 and 5 | | 00 | | 00 | | 00 | | 00 |
| 7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | | | | | | | |
| Part IV Arbitrage | | | | | | | | |
| | | Α | | 3 | | C | | - |
| | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | | | | | | | | |
| 2 Is the bond issue a variable rate issue? | | | | | | | | |
| 3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of hedge. | | | | | | | | |
| d Was the hedge superintegrated? | | | | | | | | |
| e Was the hedge terminated? | | | | | | | | |
| 4a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | | | | | |
| b Name of provider | | | | | | | | |
| c Term of GIC | | | | | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | |
| 5 Were any gross proceeds invested beyond an available temporary period? | | | | | | | | |
| 6 Did the bond issue qualify for an exception to rebate? | | | | | | | | |
| Part V Procedures To Undertake Corrective Action | | | | • | | • | | |
| Has the organization established written procedures to ensure that violations of federal tax requirem | ients are tii | mely identifie | d and corre | ected throug | h the volun | tary closing | agreement | program |
| if self-remediation is not available under applicable regulations? | | - | | - | | <u> </u> | No | |
| Part VI Supplemental Information. Complete this part to provide additional in | formatio | n for resp | onses to | questions | on Sch | edule K (s | ee instru | ctions). |
| Additional Information (continued) | | | | • | | • | | · · · · · |

the bonds. Part IV, Line 5, Column D-Such amounts were appropriately yield restricted.

SCHEDULE L (Form 990 or 990-EZ) OMB No. 1545-0047 2011

| 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.

Open to Public Inspection

Name of the organization

Part

The Art Institute of Chicago

Employer identification number 36-2167725

| 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 | | | |
|-----|---------------------------------|--------------------------------|-----|----|--|
| I | (a) Name of disqualmed person | | Yes | No | |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |

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 >\$

Loans to and/or From Interested Persons. Part II

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 the orga | to or from inization? | (c) Original principal amount | (d) Balance due | (e) In c | lefault? | (f) App by bo comm | oroved ard or hittee? | (g) W agree | ritten ment? |
|---|----------------------|--------------------------|----------------------------------|-----------------|-----------------|----------|--------------------------|-----------------------------|----------------|-----------------|
| | То | From | | | Yes | No | Yes | No | Yes | No |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) | | | | | | | | | | |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| Total | | | ▶\$ | | | | | | | |

Part III Grants or Assistance Benefiting 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 | | | | |
|-------------------------------|---|-----------------------------------|--|--|--|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (7) | | | | | | |
| (8) | | | | | | |
| (9) | | | | | | |
| (10) | | | | | | |

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

Schedule L (Form 990 or 990-EZ) 2011

Schedule L (Form 990 or 990-EZ) 2011 The Art Institute of Chicago 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 | | aring of zation's nues? |
|---------------------------------|---|---------------------------|--------------------------------|-----|-------------------------------|
| | | | | Yes | No |
| (1) A Jones Spouse P Carroll | Former Officer | 14,612. | Employee Compensation | | Х |
| (2) J Rowe Exelon CEO/Dir | Trustee | 1,022,474. | ComEd Electrical Serv. | | Х |
| (3) J Rowe Nthrn Trst Brd Memb | Trustee | 322,345. | Inv.Custody/Perf Serv. | | Х |
| (4) F Waddell Nthrn Trst CEO | Trustee | 322,345. | Inv.Custody/Perf Serv. | | Х |
| (5) A Pramaggiore ComEd CEO | Trustee | 1,022,474. | ComEd Electrical Serv. | | Х |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| (10) | | | | | |
| Part V Supplemental Information | | | | | |

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

| | | |
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| | | |

36-2167725

Page 2

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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

► Attach to Form 990.

Open To Public Inspection

Employer identification number

36-2167725

Department of the Treasury Internal Revenue Service

Name of the organization

The Art Institute of Chicago

| Par | t I Types of Property | | | | | | | |
|------|--|---------------------|-------------------------------|--|--------|-------------|-----------|-----------|
| | | (a) | (b) | (c) | | | (d) | |
| | | Check if applicable | Number of contributions or | Noncash contribution amounts reported on | M | ethod of | determir | ning |
| | | applicable | items contributed | Form 990, | TIONCO | | ibution a | iniounits |
| | | | | Part VIII, line 1g | | | | |
| 1 | Art – Works of art | Х | 1,185 | 1. | See | Part | II | |
| 2 | Art – Historical treasures | | | | | | | |
| 3 | Art – Fractional interests. | Х | 26 | | | Part | II | |
| 4 | Books and publications | Х | | 27,385. | FMV | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities – Publicly traded | Х | 134 | 5,625,152. | 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 ► (Airfare) | Х | 125 | 141,229. | FMV | | | |
| 26 | Other ► (Couture Fashion) | Х | 16 | 102,995. | FMV | | | |
| 27 | Other ► (Dept'l Supplies) | Х | 13 | 17,884. | FMV | | | |
| 28 | Other ► (Special Events) | Х | 303 | 380,891. | FMV | | | |
| 29 | Number of Forms 8283 received by the organizati | on during the | a tax year for contribut | ions for which the | | | | |
| 25 | organization completed Form 8283, Part IV, Done | e Acknowled | Igement | | 29 | | | 27 |
| | | | | | | | Yes | No |
| | | | | | | | | |
| 30 a | During the year, did the organization receive by c hold for at least three years from the date of the i | ontribution a | ny property reported in | Part I, lines 1-28 that | it mus | t | | |
| | purposes for the entire holding period? | | | | | 30 a | a | Х |
| b | If 'Yes,' describe the arrangement in Part II. | | | | | | | |
| 31 | Does the organization have a gift acceptance poli | cy that requi | res the review of any r | non-standard contribution | ons? | 31 | Х | |
| 32a | Does the organization hire or use third parties or noncash contributions? | | | | | 32a | a X | |
| b | If 'Yes,' describe in Part II. | | See Part I | | | | | |
| 33 | If the organization did not report an amount in co | | | | | | | |
| | describe in Part II. | | See Part II | • • • | | | | |
| BAA | For Paperwork Reduction Act Notice, see the Ins | tructions fo | | | Sche | edule M | (Form 99 | 0) 2011 |

| Schedule M (Form 990) 2011 The Art Institute of Chicago Part II Supplemental Information. Complete this part to provide the information required and 33, and whether the organization is reporting in Part I, column (b), the number number of items received, or a combination of both. Also complete this part for an | by Part I, lines 30b, er of contributions, th | ie |
|--|--|----|
| Part I, Line 32 - Hire and Use of Third Parties | | |
| The Institute utilizes its investment custodian Northern Trust to | receive and sell | |
| | | |
| Part II, Line 33 - Revenue Not Reported in Column C | | |
| The Institute does not capitalize its collection items nor report | <u>contributions of</u> | |
| collection_items_as_revenue_as_permitted_under_generally_accepted_ | accounting | |
| principles | | |
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OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.)

| (a) Name, address, and EIN of disregarded entity | | (b) Primary activity | | (c) Legal domicile (state or foreign country) | | (d) Total income | | (e) End-of-year assets | | (f) Direct control entity | | lling |
|--|--------------|--------------------------------|------------|--|---------------------------------|----------------------------|---|----------------------------------|--------------------------------|--|----------------------------|------------------------------------|
| (1) AICCB LLC 111 South Michigan Avenue Chicago, IL 60603 | | | | | | | | | | | | |
| 20-5052348 | | Investm | ents | Ľ |)E | 1 | L,697,632. | 5 | 5,000,000. | | N/A | |
| (2) AICGS LLC | | | | | | | | | | | | |
| 111 South Michigan Avenue | | | | | | | | | | | | |
| Chicago, IL 60603 | | | | | | | | | | | | |
| 36-2167725 | | Investm | ents | |)E | | 369,626. | 5 | 5,316,000. | | N/A | |
| (3) AICHP LLC 111 South Michigan Avenue | | | | | | | | | | | | |
| <u>Chicago,_IL_60603</u> | | Turrent | | | \ T | | 0 576 | ~ | | | NT / 7 | |
| Part II Identification of Related Tax-Exempt O | aonizatio | Investm | | |)E | d 'Voc | 8,576. | | 2,144,569. | | N/A | 4 |
| one or more related tax-exempt organize | ations du | ring the tax ve | en the org | yanization | lanswere | u res | 10 FOITT 990 | J, Fall | IV, III e 54 L | lecaus | enna | J |
| (a) Name, address, and EIN of related organization | | (b) ary activity | Legal dom | icile (state n country) | (d) Exempt section | Code | (e) Public charity (if section 501 | status (c)(3)) | (f) Direct contro entity | olling | (c Sec 512 controlle | j) (b)(13) d entity? |
| | | | | | | | - | | - | | Yes | No |
| (1) Ox-Bow 3435 Rupprecht Way Saugatuck, MI 49453 38-1081760 (2) | | cational citution | N | 41 | 501(c) |) (3) | 2 | | N/A | | X | |
| _(3) | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| <u>(4)</u> | | | | | | | | | | | | |
| BAA For Paperwork Reduction Act Notice see the Instruc | tions for Ec | 000 | <u> </u> | | TEE450011 0 | 0/08/11 | | | Scher | | Form 99 | 0) 2011 |

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

Schedule R (Form 990) 2011 The Art Institute of Chicago

36-2167725 Page **2**

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 | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under | (f) Share of total income | (g) Share of end-of-year assets | Disp tio | h) ropor- nate ations? | (i) Code V-UBI amount in box 20 of Schedule K-1 | Gene mana part | ral or aging | (k) Percentage ownership |
|--|---------------------------------------|-------------------------|-------------------------------------|---|-----------------------------------|--|------------------|--|---|----------------------------------|-----------------|---------------------------------------|
| | | country) | | sections 512-514) | | | Yes | No | (Form 1065) | Yes | No | |
| <u>(1)</u> | | | | | | | | | | | | |
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| <u>(3)</u> | | | | | | | | | | | | |
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| | - | | | | | | | | | | | |
| Part IV Identification of line 34 because | of Related Organ e it had one or r | nizations more relat | Taxable as a (ed organizatio | Corporation or ns treated as a | Trust (Complete corporation or | e if the organiza trust during the | ation a tax y | answe ear.) | red 'Yes' to Fo | orm 99 | 90, Pa | art IV, |
| Name, address, and E | | | (b) Primary activi | (c) | (d) | (e) Type of entity | | (f) | income Share o | (g) f end-or issets | f-year | (h) Percentage ownership |
| <u>(1)</u> | | | | | | , | | | | | | |
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| <u>(3)</u> | | | 1 | | | | | | | | | |
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| BAA | | | | TEFACOON | 05/04/11 | | | | S-4 | | D (Earr | n 990) 2011 |
| DAA | | | | TEEA5002L | 05/24/11 | | | | 50 | ieuuie I | π (Γυ[[| 11 770) 2011 |

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| Schedule R (Form 990) 2011 The Art Institute of Chicago | | 36-2167 | 725 | F | 'age 3 | | | |
|--|---------------------------|----------------------|------|-----|--------|--|--|--|
| Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to | Form 990, Part IV, | line 34, 35, 35a, or | 36.) | | | | | |
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | Yes | No | | | |
| 1 During the tax year did the organization engage in any of the following transactions with one or more related organiz | ations listed in Parts II | -IV? | | | | | | |
| a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | | | 1a | | Х | | | |
| b Gift, grant, or capital contribution to related organization(s) | | | 1 b | Х | | | | |
| c Gift, grant, or capital contribution from related organization(s) | | | 1c | | Х | | | |
| d Loans or loan guarantees to or for related organization(s). | | | 1d | | Х | | | |
| e Loans or loan guarantees by related organization(s) | | | 1e | | Х | | | |
| | | | | | | | | |
| f Sale of assets to related organization(s) | | | 1f | | Х | | | |
| g Purchase of assets from related organization(s) | | | 1g | | Х | | | |
| h Exchange of assets with related organization(s) | | | | | | | | |
| i Lease of facilities, equipment, or other assets to related organization(s) | | | | | | | | |
| | | | | | | | | |
| j Lease of facilities, equipment, or other assets from related organization(s) | | | | | | | | |
| k Performance of services or membership or fundraising solicitations for related organization(s). | | | | | | | | |
| I Performance of services or membership or fundraising solicitations by related organization(s) | | | 11 | | Х | | | |
| m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | 1m | | Х | | | |
| n Sharing of paid employees with related organization(s) | | | 1n | | Х | | | |
| | | | | | | | | |
| o Reimbursement paid to related organization(s) for expenses | | | 10 | | Х | | | |
| p Reimbursement paid by related organization(s) for expenses. | | | 1p | | Х | | | |
| | | | | | | | | |
| q Other transfer of cash or property to related organization(s) | | | 1q | Х | | | | |
| r Other transfer of cash or property from related organization(s) | | | 1r | | Х | | | |
| 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, include | | | | | | | | |
| (a)(b)(c)Name of other organizationTransactionAmount involvedtype (a-r)Amount involvedamount | | | | | | | | |
| (1) Ox-Bow | b | 60,000.B | MV | | | | | |
| (2) Ox-Bow | q | 420,000.H | MV | | | | | |

Schedule R (Form 990) 2011 The Art Institute of Chicago

36-2167725 Page **4**

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unre- lated, excluded from tax under | section 501(c)(3) d organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | (f) Share of total income | (g) Share of end-of-year assets | tior | h) ropor- nate itions? | (i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065) | Gene mana part | adind | (k) Percentage ownership |
|---|--------------------------------|---|--|--|----|--|--|--|----|--|-----|--|----------|--|--|--|---|------|---------------------------------|--|----------------------|-------|---------------------------------------|
| | | | section 512-514) | Yes | No | | | Yes | No | . , | Yes | No | | | | | | | | | | | |
| <u>(1)</u> | _ | | | | | | | | | | | | | | | | | | | | | | |
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| <u>(4)</u> | - | | | | | | | | | | | | | | | | | | | | | | |
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| <u>(5)</u> | | | | | | | | | | | | | | | | | | | | | | | |
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Schedule R (Form 990) 2011

Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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Continuation Sheet for Schedule R

2011 Continuation Page 1 of 1

Name of filing organization

The Art Institute of Chicago

Employer identification number

36-2167725

Part I Continuation of Identification of Disregarded Entities

| (A) Name, address, and EIN of disregarded entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | (D) Total income | (E) End-of-year assets | (F) Direct controlling entity |
|---|--------------------------------|---|----------------------------|----------------------------------|--|
| AIC AA_LLC | | | | | |
| 111 South Michigan Avenue | | | | | |
| Chicago, IL 60603 | | | | | |
| 36-2167725 | Investments | DE | 97,117. | 3,537,711. | N/A |
| AIC AX LLC | | | | | |
| 111 South Michigan Avenue | | | | | |
| Chicago, IL 60603 | | | | | |
| 36-2167725 | Investments | DE | 0. | 2,173,484. | N/A |
| AIC BLK LLC | | | | | |
| 111 South Michigan Avenue | | | | | |
| Chicago, IL 60603 | | | | | |
| 36-2167725 | Investments | DE | 256,200. | 11,697,699. | N/A |
| AIC MS SS LLC | | | | | |
| 111 South Michigan Avenue | | | | | |
| Chicago, IL 60603 | | | | | |
| 36-2167725 | Investments | DE | 0. | 3,381,803. | N/A |
| AIC GS MEZZ LLC | | | | | |
| 111 South Michigan Avenue | | | | | |
| Chicago, IL 60603 | | | | | |
| 36-2167725 | Investments | DE | 399,520. | 3,454,000. | N/A |
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| | TEEA5101L | 00/08/11 | | Schedule F | Cont (Form 990) 20 |

| | FUBLIC DISCLUSURE CUP | |
|--|--|--------------------------------------|
| SCHEDULE O (Form 990 or 990-EZ) | Supplemental Information to Form 990 or 990-EZ | OMB No. 1545-0047 |
| Department of the Traceury | Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. | Open to Public |
| Department of the Treasury Internal Revenue Service Name of the organization | ► Attach to Form 990 or 990-EZ. | Inspection ridentification number |
| The Art Institute | e of Chicago 36-21 | 167725 |
| <u>Form 990, Part V,</u> | Line 7g | |
| The Institute | is not required to file Form 8899. The Institute recei | lves |
| contributions | of intellectual property from time to time, however, t | <u>the type of</u> |
| property_contr | ributed does not meet the definition of "gualified inte | ellectual |
| property"_for | Form 8899 filing purposes. | |
| Form 990, Part V, | Line 7h | |
| Form 1098-C_is | s not applicable to the Institute. | |
| Form 990, Part VI | I, Line 1a, Column B | |
| The amount of | hours per week devoted to position has been noted as 1 | hour for all |
| TrusteesThe | e_amount_of_hours_per_week_devoted_by_Trustees_varies_c | lepending on the |
| position held | and the committees the Trustee devotes time to. | |
| Schedule B, Spec | ial Rules, Box 1 | |
| The Art Instit | cute of Chicago is exempt under two categories listed i | In Schedule A |
| Part I, box 2 | which describes a school, section 170(b)(1)(A)(ii) and | l box 7 which |
| describes an c | organization that normally receives a substantial part | of its support |
| from a governm | mental unit or from the general public, Section 170(b) | (1) (A) (vi) |
| The Art Instit | cute of Chicago has selected box 2, because per instruc | ctions only one |
| applicable_box | should be checked. Because the Institute is also exe | empt under |
| Schedule A Par | t I box 7, Schedule B Parts I and II have been complet | ed under the |
| Special Rules | Box 1 as the Institute has met the 33 1/3% support tes | st of the |
| regulations un | nder sections 509(a)(1)/170(b)(1)(A)(vi). | |
| Form 990, Part III, | , Line 1 - Organization Mission | |
| The Art Instit | ute of Chicago's primary exempt purpose is to found, h | ouild, maintain |
| and operate mu | iseums, schools, and libraries of art and theatres; to | provide support |
| facilities in | connection therewith; to conduct appropriate activitie | es conducive to |
| the artistic d | levelopment of the region; and to conduct and participa | ate in activities |

| Schedule 0 (Form 990 or 990-EZ) 2011 | Page 2 |
|---|--|
| Name of the organization The Art Institute of Chicago | Employer identification number 36-2167725 |
| Form 990, Part III, Line 1 - Organization Mission | |
| of national and international significance. | |
| Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director | s, Etc. |
| A family relationship exists between Trustees Robert H. Bergman | n and Andrew M. |
| Rosenfield. A businees relationship exists between Officer Walt | cer E. Massey and |
| Trustee Cary D. McMillan. Business relationships exist between | the following |
| Trustees: Thomas J. Pritzker and Byron Trott; Thomas J. Pritz | ker and Samuel M. |
| Mencoff; Kenneth C. Griffin and James A. Gordon; John W. Rowe a | and Frederick H. |
| Waddell; John W. Rowe and Anne Pramaggiore; John W. Rowe and A. | . Steven Crown; A. |
| Steven Crown and Anne Pramaggiore; Sarah Nava Garvey and Eric | C. McKissack; Dana D. |
| Rice and Michael Sacks. | |
| Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder | |
| Members of the Institute consist of 5 classes: Governing, Hono | orary Governing, Life, |
| Honorary Life and Annual. All Governing, Honorary Governing an | nd Honorary Life |
| Members shall be elected by the Board of Trustees from among the | nose persons who meet |
| the qualifications as set forth below, except that all persons | who are elected |
| Benefactors shall become Honorary Governing Members and shall h | nave the privileges of |
| Governing Members. | |
| | |
| Governing Members, not to exceed 1,500, are elected from Member | rs that have |
| demonstrated a significant interest in the programs of the Inst | citute and made a |
| contribution to the unrestricted endowment fund in such sum as | determined from time |
| to time by the Board of Trustees. Not more than 50 Governing N | Member may be elected |
| by the Trustees from among individual Members who actively part | cicipate in the |
| Institute, without the requirement of a contribution to the unit | restricted endowment |
| fund. A donor at the Sustaining Fellow level automatically become | omes a Governing |
| Member after a third consecutive annual Fellows gift and serves | s as long as Fellow |
| | |

Schedule O (Form 990 or 990-EZ) 2011

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 Sh | areholder (continued) |
| | inues_as_a_Fellow_will_be |
| reinstated as a Governing Member upon qualifying as a | Sustaining Fellow. A business |
| participating in the Sustaining Fellows shall not be a | a Governing Member. |
| Honorary Governing Members shall include Benefactors a | and other persons elected by |
| the Trustees from among Governing Members who have ren | ndered eminent services to the |
| Institute of a period of years and shall be exempt from | om the payment of dues. |
| Honorary Life Members shall be chosen from among perso | ons who have rendered |
| continuing financial support or performed continuing | voluntary services for the |
| Institute or have attained distinction as artists, pat | trons of art, or educators. |
| Any person at least 18 years of age may become a Life | Mombor upon the naumont of |
| Any person at least 18 years of age may become a Life | |
| such sum as may be fixed from time to time by the Boar | |
| be credited to an unrestricted endowment fund. Each I | |
| to all the rights and privileges of Annual Members wit | chout payment of dues. |
| Any person may become an Annual Member upon such terms | s as may be fixed from time to |
| time by the Board of Trustees. All Members shall be en | ntitled to free admission to |
| all public exhibitions of the Institute, except as oth | herwise provided by the Board |
| of Trustees. | |
| | |
| The sole right of Governing Members and Honorary Gover | rning Members is to elect |
| Trustees at the annual Governing Members meeting | |
| Form 990, Part VI, Line 7a - How Members or Shareholders Elect Go | verning Body |
| The property of the Corporation shall be held and cont | trolled, and the Corporation's |
| affairs shall be managed by a Board of Trustees compos | sed of 47 voting Trustees per |

Schedule O (Form 990 or 990-EZ) 2011

The Art Institute of Chicago

Employer identification number 36-2167725

| Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body (continued) |
|---|
| the Institute's bylaws. The Governing Members of the Institute meet annually to |
| elect 42 of the voting Trustees. The remaining 5 voting Trustees consist of the |
| following persons who hold the following offices during the time they hold such |
| offices, unless they are elected by the Governing Members: Chairman of the Board of |
| Governors of the School of the Art Institute of Chicago, the President of the |
| Institute's Woman's Board, the President of the Auxiliary Board, the President of |
| the Sustaining Fellows and the President of the Leadership Advisory Committee. 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 |
| of the School serve as ex-officio Trustees without voting rights. |
| |
| The term of office of any elected Trustee shall automatically expire at the Annual |
| Meeting of the Governing Members following his 70th birthday. No person 70 or older |
| is_eligible_for_election_or_re-election_as_a_Trustee |
| Form 990, Part VI, Line 11b - Form 990 Review Process |
| A full version of the Form 990 is reviewed in detail by the Institute's Audit |
| Committee before filing with the Internal Revenue Service, including Schedule |
| B-Schedule of Contributors. The Board of Trustees are provided a copy of the public |
| disclosure version of the Form 990 before it is filed with the Internal Revenue |
| Service. Schedule B is made available to the Board of Trustees upon request, |
| however, a copy is not widely distributed. |
| Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts |
| All voting Trustees, Life Trustees, members of the Board of Governors, members of |
| Standing and Advisory Committees, Officers, and Vice Presidents of the Institute |
| (collectively known as "Related Parties") must act in the best interests of the |

Schedule **O** (Form 990 or 990-EZ) 2011 Name of the organization

The Art Institute of Chicago

Employer identification number 36-2167725

| Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued) |
|--|
| 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_quorumFinancial |
| 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. The policy is distributed annually to all Related Parties. All voting |
| Trustees, Life Trustees, members of the Board of Governors, members of Standing and |
| Advisory Committees, Officers, and Vice Presidents are required to attest annually |
| totheir_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. |

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 and 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

Schedule O (Form 990 or 990-EZ) 2011

The Art Institute of Chicago

Name of the organization

Employer identification number 36-2167725

| Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees (continued) |
|---|
| 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 and |
| Director of the Museum, the President, Provost, and Dean of Faculty 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 |
| Compensation Committee, their compensation is generally based on independent salary |
| surveys_typically_conducted_at_the_time_of_hire_and_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 DC KS KY MD MA MI MS MO NH NJ NY ND OH OK OR SC UT VA WA WI |
| |
| |

| Schedule O (Form 990 or 990-EZ) 2011 | Page 2 |
|--|--|
| - | Employer identification number 36-2167725 |
| | |
| Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available | |
| The Institute's governing documents are available to the public | via written request |
| to the Institute and in addition, in part through applicable go | vernmental agencies. |
| The Institute's financial statements are available to the publi | c via the Institute's |
| own website, via the Illinois Attorney General's website and up | on written request. |
| The conflict of interest policy is available to the public upon | written request to |
| the Institute | |
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Schedule O - Supplemental Information

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The Art Institute of Chicago

36-2167725

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

2011

| Endowment transfer to third party not-for-profit entity Net Unrealized Gains or Losses on Investments | |
|--|-----------------|
| Pension Related Changes other than Net Periodic Pension Cost | -27,194,985. |
| Unrealized Depreciation on Funds Held in Trust | |
| Iotal | \$ -49,300,272. |