Form	990-T	E	Exempt Organization Bu	sine	ess Inc	ome T	ax Returi	n þ	OMB No	. 1545-0687
		For ca	(and proxy tax unlendar year 2014 or other tax year beginning JUL 1				N 30. 201	5.	21	14/
_			► Information about Form 990-T and its instr				J 14			
	tment of the Treasury al Revenue Service	▶	Do not enter SSN numbers on this form as it m	y be m	ade public if y	our organiz	ation is a 501(c)(3)			plic inspection for ganizations Only
A	Check box if address changed		Name of organization ( Check box if name	change	d and see insti	ructions.)	unio di	(Empl	oyer identifi loyees' trus ictions.)	t, see
	xempt under section	Print	THE ART INSTITUTE OF					and the same of		67725
X	501(c)(3)	or Type	Number, street, and room or suite no. If a P.O. b					E Unrel (See i	ated busine nstructions,	ss activity codes )
$\vdash$	408(e) 220(e)		111 SOUTH MICHIGAN AV					-		
$\vdash$	」408A		City or town, state or province, country, and ZIP CHICAGO, IL 60603	or torei	jn postai code	<b>;</b>		453	220	713990
C Bo	ok value of all assets	F Grou	exemption number (See instructions.)	<b>&gt;</b>				1200		. 10000
1	,504,588,725.	<b>G</b> Chec	corganization type X 501(c) corporati		501(c) tr		401(a) trust			trust
			ary unrelated business activity. <b>MUSEUM</b>				ER RENTAL	JS/I		
			poration a subsidiary in an affiliated group or a par	ent-sub:	sidiary control	led group?	········	Ye	s <u>X</u>	No
			tifying number of the parent corporation. DEBORAH JOHNSTON, CONT	DOT.T	FD	Talaah	one number 🕨 3	212_	100_	1063
			de or Business Income	KOLL	(A) Inc		(B) Expense			C) Net
_	Gross receipts or sal		5,670,938.	T						
	Less returns and allo	wances	0 . c Balance		5,670					
2			A, line 7)		2,570					
3	Gross profit, Subtrac					,444.				00,444.
4 a	Capital gain net incor	ne (attac	h Schedule D) 'art II, line 17) (attach Form 4797)	4a 4b	409	,007. <67.		-	4	69,007. <67.>
C C	Capital loss deduction	n for true	sts	40 4c		207.		-		(07.2
5	Income (loss) from p	artnersh	ips and S corporations (attach statement)	5	275	,889.			2	75,889.
6	Rent income (Schedu	ule C)		6						
7			ne (Schedule E)							
8		-	and rents from controlled organizations (Sch. F)							
9 10			on 501(c)(7), (9), or (17) organization (Schedule (							
11			me (Schedule I)							
12	Other income (See in	struction	ns; attach schedule) STATEMENT 1	12	100	,461.			1	00,461.
13	Total. Combine lines	s 3 throu	gh 12	13		,734.			3,9	45,734.
Pa			ot Taken Elsewhere (See instructions				- !			
44			utions, deductions must be directly connect					T 44		
14 15	Salaries and wages		rectors, and trustees (Schedule K)					15	1.2	61,559.
16		********	) · (((() · () () () () () () () () () () () () ()		**************			16	-,2	01,555.
17								17		
18								18		
19	Taxes and licenses						TIMETINE O	19	1;	17,472.
20 21			e instructions for limitation rules) STATEM				287,562.	20		0.
22	Less depreciation of	laimed o	562) n Schedule A and elsewhere on return		****/##731*****	22a	201,302	22b	2	87,562.
23								23		.,,
24			mpensation plans					24		
25	Employee benefit pr	ograms						25		
26			chedule I)					26		
27	Excess readership of	osts (Sc	hedule J)	*********	ರಾರ	. Cmym	EMENIU 2	27	1 7	57,731.
28 29			nedule) es 14 through 28					28		24,324.
30			ncome before net operating loss deduction. Subtr					30		21,410.
31			(limited to the amount on line 30)					31		21,410.
32	Unrelated business	taxable i	ncome before specific deduction. Subtract line 31	from lin	e 30			32		0.
33			y \$1,000, but see line 33 instructions for exceptio					33		1,000.
34			income. Subtract line 33 from line 32. If line 33 i	-	-			34		0.
	11115 06				************	************		1 34		0.

а	the your share of the \$30,000, \$25,000, and \$3,325,000 taxable income brackets (in that order).			
	(1) \$ (2) \$ (3) \$ Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$			
ū				
_	(2) Additional 3% tax (not more than \$100,000)	250		0
C	Income tax on the amount on line 34  Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from;	35c		U
36				
	Tax rate schedule or Schedule D (Form 1041)	36		
	Proxy tax. See instructions	37		
	Alternative minimum tax	38		_
	Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39		0
	Tax and Payments			-
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a			
b	Other credits (see instructions) 40b			
C	General business credit. Attach Form 3800 40c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
	Total credits. Add lines 40a through 40d	40e		
41	Subtract line 40e from line 39 Other taxes, Check if from; Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	41		0
	<b>,</b>	42		_
	Total tax. Add lines 41 and 42	43		0
44 a	Payments: A 2013 overpayment credited to 2014			
b	2014 estimated tax payments 44b			
C	Tax deposited with Form 8868 44c			
	Foreign organizations; Tax paid or withheld at source (see instructions)  44d			
е	Backup withholding (see instructions)			
	Credit for small employer health insurance premiums (Attach Form 8941)			
g	Other credits and payments: Form 2439  Form 4136 Other Total 44g			
	Form 4136 Other Total <b>\Delta 44g</b>			
45	Total payments. Add lines 44a through 44g	45		
46	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖	46		
47	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47		0
48	Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48		0
49	Enter the amount of line 48 you want; Credited to 2015 estimated tax	49		
Part V	Statements Regarding Certain Activities and Other Information (see instructions)			
1 At a	y time during the 2014 calendar year, did the organization have an interest in or a signature or other authority over a financial acco	ount (bar	nk, Ye	es No
secu	rities, or other) in a foreign country? If YES, the organization may have to file Form FinCEN Form 114, Report of Foreign Bank and	Financia		
Acco	unts. If YES, enter the name of the foreign country here  the tax year, did the organization receive a distribution from, or was it the granter of, or transferor to, a foreign trust?  see instructions for other forms the organization may have to file.			X
2 Durir If YE	g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? , see instructions for other forms the organization may have to file.			X
3 Ente	the amount of tax-exempt interest received or accrued during the tax year 🏲 💲			
	ule A - Cost of Goods Sold. Enter method of inventory valuation ► N/A			
1 Inve		6	1,048,	065
2 Puro	hases 2 3,141,963. 7 Cost of goods sold. Subtract line 6			
3 Cost	of labor from line 5. Enter here and in Part I, line 2	7	2,570,	494
4a Addit	onal section 263A costs (att. schedule) 4a 8 Do the rules of section 263A (with respect to		Ye	es No
<b>b</b> Othe	r costs (attach schedule) 4b property produced or acquired for resale) apply to			
5 Tota	I. Add lines 1 through 4b			X
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	ledge and	belief, it is true	÷,
Sign			discuss this retu	
Here			shown below (se	
	Signature of officer Date Title inst	tructions)?	X Yes	No
,	Print/Type preparer's name Preparer's signature Date Check if	PTIN		
Paid	self- employed			
	TATIPA T CTITECRTE   5/12/16			
Prepa	er - DELOTIME MAY LID	86	-10657	772
Use O	111 SOUTH WACKER DRIVE			1000
	Firm's address CHICAGO, IL 60606-4301 Phone no. (	312)	486-1	1000
	Thomas in the state of the stat		QQA	100

Schedule C - Rent Inco	me (From Real	Proper	ty and	Personal	Proper	ty Lease	ed with Real F	rope	erty)(see instructions)
1. Description of property									
(1)									
(2)									
(3)									
(4)									
		ed or accrued	t				0(-)	and the same of th	Characterists
rent for personal property is more than of rent f			rent for p	nd personal proper ersonal property ex t is based on profit	ceeds 50%	centage or if	3(a) Deductions dir columns 2	ectly cor a) and 2	nected with the income in (b) (attach schedule)
(1)									
(2)									
(3)									
(4)									
Total	0.	Total				0.			
(c) Total income. Add totals of colu							(b) Total deduction		
here and on page 1, Part I, line 6, c	column (A)					0 .	Enter here and on page Part I, line 6, column (B	· <b>&gt;</b>	0.
Schedule E - Unrelated	Debt-Finance	Incom	e (see i	instructions)					
				2			3. Deductions directly to debt-fi		
1. Description of	debt-financed property			2. Gross ind or allocable financed	e to debt-	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
715						-		-	
<u>(1)</u>						_		_	
(2)						-		_	
(3)			_			-		-	
(4)						-		$\rightarrow$	
<ol> <li>Amount of average acquisition debt on or allocable to debt-finance property (attach schedule)</li> </ol>	of or debt-fina	e adjusted bas allocable to anced property h schedule)		6. Column by colu			7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)					0,	6			
(2)					9,	/ <sub>0</sub>			
(3)					9	/6			
(4)					9	6			
						Er	nter here and on page 1,		Enter here and on page 1,
						P	art I, line 7, column (A).		Part I, line 7, column (B).
Totals					*********			0.	0 .
Total dividends-received deducti	ions included in columi	n 8						.▶	0.
Schedule F - Interest, A	Annuities, Roya	lties, an	d Rer	its From C	ontrolle	ed Orga	nizations (see i	nstruc	tions)
			Exemp	t Controlled O	rganizatio	ons			
Name of controlled organization	on 2 Employer id num	entification	Net un (loss) (s	3. prelated income see instructions)	Total рауп	4. of specified nents made	5. Part of column included in the cor organization's gross	ntrolling	connected with income
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organiz	ations								
7. Taxable Income	8. Net unrelated incon (see instructions		<b>9.</b> To	tal of specified pay made	ments	in the con	column 9 that is included trolling organization's rross income		Deductions directly connected with income in column 10
(1)									
(2)									
(3)					7			1	
(4)								T	
						Enter here	olumns 5 and 10, and on page 1, Part I, 8, column (A),	Ent	Add columns 6 and 11. ser here and on page 1, Part I, line 8, column (B).
Totals							0.		0.
I VIMIU	***************************************				******				

Form 990-T (2014) THE AF						36-216772	5 Page
Schedule G - Investme		Section 5	i01(c)(7	ʹ), (9), or (17) Orc	ganization		
	cription of income			2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)					(attach scheddie)		(coi. 3 pius coi. 4)
(2)							1
(3)							
(4)			-	1			
				Enter here and on page 1, Part I, line 9, column (A)			Enter here and on page Part I, line 9, column (B)
Totals			•	0.			0
Schedule I - Exploited (see instr		Income,	Other		ng Income		
(000 111021	1 1			4. Net income (loss)			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expendirectly con- with produ- of unrelabusiness in	nected action ated	from unrelated trade or business (column 2 minus column 3). If a gain, compute cols, 5 through 7,	<ol><li>Gross income from activity that is not unrelated business income</li></ol>	<b>6.</b> Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)							
(2)							
(3)							
(4)							
	Enter here and on page 1, Part I, line 10, col. (A)	Enter here a page 1, P. line 10, co	art I,				Enter here and on page 1, Part II, line 26.
Totala	. 0 .		0.				0
Schedule J - Advertis		netructione)					
Part I Income From	Periodicals Rep	orted on	a Cons	solidated Basis			
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols, 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)							
(2)							
(2)							
(4)							
,						1	
Totals (carry to Part II, line (5))		0 .	0				0
Part II Income From	Periodicals Rep	orted on	a Sepa	rate Basis (For ea	ach periodical list	ed in Part II, fill in	
columns 2 through	h 7 on a line-by-line ba	ısis.)	37/10		·		
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)	-						
(2)							
(2)							
(4)							
Totals from Part I		0.	0.			·	0
TOTAL	Enter here and o	n Enter he	ere and on	-			Enter here and
	page 1, Part I, line 11, col. (A)		1, Part I, I, col. (B).				on page 1. Part II, line 27.
Totals, Part II (lines 1-5)		0.	0.				0
Schedule K - Comper					nstructions)		
		or of the second			3. Pero		pensation attributable
1.	Name		1	2. Title	time dev busir	oted to loun	related business

(1) % (2) (3)
(4)
Total. Enter here and on page 1, Part II, line 14 ..... %

FORM 990-T	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
RENTAL INCOME OTHER INCOME LIQUOR SALES		80,920. 17,924. 1,617.
TOTAL TO FORM 990-T, PAGE 1, I	LINE 12	100,461.
FORM 990-T	CONTRIBUTIONS	STATEMENT 2
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CONTRIBUTION CARRYOVER FROM 2010 CONTRIBUTION CARRYOVER FROM	N/A N/A	137.
2011 CONTRIBUTION CARRYOVER FROM	N/A	40.
2012 CONTRIBUTION CARRYOVER FROM	N/A	158.
2013 CONTRIBUTION CARRYOVER FROM	N/A	82.
PRIOR YEARS	N/ A	242.
TOTAL TO FORM 990-T, PAGE 1, I	LINE 20	659.
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION		AMOUNT
RENT CATALOG PRODUCTION/PROCESSING MISCELLANEOUS EMPLOYEE BENEFITS ADMINISTRATION ALLOCATION ACCOUNTING FEE		31,012. 623,784. 469,724. 252,404. 358,392. 22,415.
TOTAL TO FORM 990-T, PAGE 1, I	LINE 28	1,757,731.

FORM 990-T	CONTRIBUTIONS SUMMARY	STATEMENT	4
QUALIFIED (	CONTRIBUTIONS SUBJECT TO 100% LIMIT	110	
FOR TAX FOR TAX FOR TAX FOR TAX FOR TAX FOR TAX	YEAR 2010 YEAR 2011 YEAR 2012		
TOTAL CARRY	YOVER ENT YEAR 10% CONTRIBUTIONS 659		
	RIBUTIONS AVAILABLE 659 COME LIMITATION AS ADJUSTED 0		
EXCESS 100	CONTRIBUTIONS 659 CONTRIBUTIONS 0 SS CONTRIBUTIONS 659		
ALLOWABLE (	CONTRIBUTIONS DEDUCTION		0
TOTAL CONT	RIBUTION DEDUCTION		0

FORM 990-T	NET	OPERATING	LOSS	DEDUCTI	ON	STATEMENT	5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPL	JSLY		OSS AINING	AVAILABLE THIS YEAR	
06/30/05 06/30/07 06/30/08 06/30/09 06/30/10 06/30/11 06/30/12 06/30/13	195,884. 3,486,368. 516,762. 508,185. 1,695,940. 413,822. 1,059,661. 593,900.		0. 0. 0. 0. 0. 0.	1	0. ,895,275. 516,762. 508,185. ,695,940. 413,822. ,059,661. 593,900.	2,895,279 516,762 508,189 1,695,940 413,822 1,059,663 593,900	2. 5. 0. 2.
NOL CARRYOV	ER AVAILABLE THIS	YEAR		7	,683,545.	7,683,54	
FORM 990-T	INCO	ME (LOSS)	FROM 1	PARTNERS	HIPS	STATEMENT	6
PARTNERSHIP	NAME		GROSS	INCOME	DEDUCTIONS	NET INCOM	
AXIOM ASIA	PRIVATE CAPITAL F	JND I,		44.	128.	<	 34.>
BLACKSTONE EUROPE IV N	REAL ESTATE PARTN Q L.P.	ERS	<.	L4,332.>	0 •	<14,33	
TE 2-NQ L.P			:	L7,3 <b>47.</b>	0.	17,34	17.
TE 2 L.P.	REAL ESTATE PARTNI REAL ESTATE PARNTI			822.	0.	82	22.
TE 2-NQ-ESH				<29.>	0.	<2	29.>
II, L.P. CHS PRIVATE	EQUITY V L.P.		18	5,914. 30,814.	3,296. 5,515.	2,61 175,29	
L.P. ENCAP ENERG FLAG INTERN FLAG VENTUR FR X ONSHOR GREENFIELD GS CAPITAL	LAND PARTNERS I, I PARTNERS VI, L.P.	, L.P. L.P. C.P.	<10	<pre>&lt;3,691.&gt; 51,227.&gt; 1,435. 12,728. 24,347. 39,739.&gt; 7,102.</pre>	0. 1,845. 469. 5,179.	<3,69 <161,22 <42 12,29 19,16 <39,73 <3,20	27.> L0.> 59. 58. 39.>
CAPITAL PAT KKR ASIAN F NATURAL GAS NATURAL GAS NAUTIC PART	. BUYOUT EXPANSION NERSHIP FUND III, UND II L.P. PARTNERS IX, L.P PARTNERS XI, L.P NERS VI, L.P. TAL VI, L.P.	L.P.	16 2!	<644.> <1,649.> 52,912. <1,732.> 53,840. <9,990.>	0. 152,502. 3,540. 0.	<65 <1,64 10,41 <5,2 253,84 <9,99	LO. 72.> 40.

	THE AR	T INSTITUTE	OF	CHTCAGO
--	--------	-------------	----	---------

2		- 21			) E
	<b>n</b> -	- /	n /	•	<i>,</i> ~

PROVIDENCE EQUITY PARTNERS VI, L.P.	24,424.	13.	24,411.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	458,696.	182,807.	275,889.

### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

OMB No. 1545-0123

Name

Employer identification number

THE ART	INSTITUTE	OF	CHICAGO
---------	-----------	----	---------

36-2167725

Part I Short-Term Capital Ga	ins and Losses - As	sets Held One Year	r or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gail or loss from Form(s) 894	n	(h) Gain or (loss). Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 894 Part I, line 2, column (g	9, )	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b		_			
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7	*************	4	
5 Short-term capital gain or (loss) from like-kind				5	,
6 Unused capital loss carryover (attach comput	ation)			6	()
7 Net short-term capital gain or (loss). Combin	e lines 1a through 6 in columr	ı h		7	
Part II Long-Term Capital Gai	ins and Losses - Ass	sets Held More Tha	an One Year		
See instructions for how to figure the amounts to enter on the lines below.	(d)	(e)	(0) Adjustments to gai	n	(h) Gain or (loss). Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceéds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gai or loss from Form(s) 894 Part II, line 2, column (g	9, J)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on			Ĭ		
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					469,007.
				11	
12 Long-term capital gain from installment sales				12	
13 Long-term capital gain or (loss) from like-kin				13	
14 Capital gain distributions	***************************************	***************************		14	
15 Net long-term capital gain or (loss). Combine		ın h		15	469,007.
Part III Summary of Parts I an					
16 Enter excess of net short-term capital gain (lin				16	
17 Net capital gain. Enter excess of net long-term				17	469,007.
18 Add lines 16 and 17. Enter here and on Form	1120, page 1, line 8, or the pr	roper line on other returns		18	469,007.

Note. If losses exceed gains, see Capital losses in the instructions.

JWA

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification no.

#### THE ART INSTITUTE OF CHICAGO

36-2167725

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later). Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate al codes are required. Enter the							
You must check Box D, E, or F below.	I fit on this page for or	ne or more of the boxe	s, complete as many fo	rms with the same box c	hecked as you	u need.	r each applicable box
(D) Long-term transactions rep						ve)	
(E) Long-term transactions rep				eported to the IRS			
X (F) Long-term transactions no	t reported to you	on Form 1099-E	3	4. —	v		
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If vo	nt, if any, to gain or bu enter an amount (g), enter a code in b. See instructions.	(h) Gain or (loss). Subtract column (e) from column (d) &
		(Mo., day, yr.)		Note below and see Column (e) in the instructions	(f) Code(s)	( <b>g)</b> Amount of adjustment	combine the result with column (g)
CENTERBRIDGE						· · · · · · · · · · · · · · · · · · ·	
CAPITAL PARTNERS							
AIV II							1,019.
GS CAPITAL							
PARTNERS VI, L.P.							<1,007.
NATURAL GAS							
PARTNERS IX, L.P.							457,472.
POMONA CAPITAL VI,							
L.P.							11,523.
11-11-11-11-11-11-11-11-11-11-11-11-11-							
V							
		77					
							<del></del>
2 Totals. Add the amounts in colu	ımns (d), (e), (g) a	and (h) (subtract					
negative amounts). Enter each t	otal here and inc	lude on your					
Schedule D, line 8b (if Box D ab	ove is checked)	, line 9 (if Box E					
above is checked), or line 10 (if	Box F above is	checked)	ľ				469,007.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

above is checked), or line 10 (if Box F above is checked)

Department of the Treasury Internal Revenue Service (99)

# **Depreciation and Amortization**

(Including Information on Listed Property) 990-T

Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562 Business or activity to which this form re

Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return THE ART INSTITUTE OF CHICAGO FORM 990-T PAGE 1 36-2167725 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter ·0· 5 Dollar limitation for tax year, Subtract line 4 from line 1, If zero or less, enter -0-, If married filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2014 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (d) Recovery period (a) Classification of property (business/investment use only - see instructions) (e) Convention (g) Depreciation deduction 3-year property 19a b 5-year property 7-year property C 10-year property d 15-year property е 20-year property f 25-year property 25 yrs. S/I g 27.5 yrs. MM S/L Residential rental property h 27.5 yrs. MM S/L ММ S/L 39 yrs. Nonresidential real property S/L Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. S/L 12-year b 40 yrs. MM S/L 40-year Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 287,562. 22 Enter here and on the appropriate lines of your return. Partnerships and S corporations see instr-23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

# THE ART INSTITUTE OF CHICAGO

36-2167725 Page 2

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

		11 A T O CO A SALES AND A SALES OF THE PARTY	on and Other			iution: 3	ee the i	HSUUC	LIONS IOI II	iiils ioi p	asserig	er auton	iodiles.		
24a	Do you have evidence to	support the bu	siness/investme	nt use cla	imed?	Y	es L	No	24b If "Y	es," is th	e evide	nce writt	en?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	Ott	(d) Cost or her basis	fhus	(e) is for depre siness/inve use only	stment	(f) Recovery period	Met	g) hod/ ention	Depre	h) ciation iction	Elec sectio cc	n 179
 25	Special depreciation all	owance for q	ualified listed	property	placed	in servic	e durin	g the t	ax year ar	nd					
	used more than 50% in					00000000000	(****) ******				25				
26	Property used more that	n 50% in a c	ualified busine	ess use:											
		i i	9	6											
		B B	9												
		8 8	9						l						
27	Property used 50% or le	ess in a quali	ified business	use:											
		3 1	9	_						S/L -					
		3 1	9			_				S/L-		_			
		3 1		6					ļ	S/L-	7				
	Add amounts in column										_28		1 00		
29	Add amounts in column	i (i), line 26. E								********			29		
	nplete this section for ve					mation									
to y	our employees, first ans	wer the ques	stions in Section		see if yo a)		o)	otion to	complet (c)	ing this s			vehicles	s. (f	)
30	Total business/investment	miles driven d	urina the	Vehicle		1	Vehicle		Vehicle		icle	1 .	ricle	Vehicle	
	year (do not include com														
	Total commuting miles														
	Total other personal (no														
	driven														
	Total miles driven durin														
	Add lines 30 through 32	2	**************												
	Was the vehicle availab			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?	(*****************													
35	Was the vehicle used p														
	than 5% owner or relate	ed person?	************												
36	Is another vehicle availa	able for perso	onal												
	use?						L	J							
			- Questions 1												
	swer these questions to	determine if	you meet an e	xceptior	n to com	pleting S	Section	B for v	ehicles us	sed by er	nployee	es who <b>a</b> i	re not m	ore than	5%
	ners or related persons.													T	T
37	Do you maintain a writte	en policy sta	tement that pr	ohibits a	all perso	nal use o	of vehicl	les, inc	luding co	mmuting,	, by you	ır		Yes	No
	employees?											***********		_	-
38	Do you maintain a writte														
	employees? See the ins														-
	Do you treat all use of v												*****		<del>                                     </del>
	Do you provide more th														
	the use of the vehicles, Do you meet the require														1
41	Note: If your answer to											***********		· -	-
D	art VI Amortization	37, 30, 33, 4	0,014115 16	5, 00 110	or comp	iete Sec	HOITER	JI LITE C	sovered vi	arricles.					
-	(a)			(b)		(c)			(d)		(e)			(f)	
	Description of	of costs		amortization		Amortizat amount			Code section		Amortiza	ation	Aı fc	nortization or this year	
42	Amortization of costs th	nat begins du		begins 4 tax ve:	ar:						period or per	00HIEQU			
74	, and azadon or costs if	segmo di		1 1											
				1 1				1							
43	Amortization of costs th	nat began he	fore your 2014	tax vea	ar		autoco vo					43			
	Total Add amounts in		D4 34	a:								44			

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

OMB No. 1545-0184

An An

Attachment Sequence No. 27

Department of the Treasury Internal Revenue Service Name(s) shown on return

▶ Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

	E ART INSTITUTE OF							36-2167725
	nter the gross proceeds from sales or							
	r substitute statement) that you are in	ncluding on line 2	2, 10, or 20	ada au Buaisa	an and laval	-1 0	1	and France
Pa	Other Than Casualty	or Property	used in a Tr	ade or Busine Held More Th	ess and involu	instructions)	ers	ons From
	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales	(e) Depreciation allowed or allowable since	(f) Cost or ot basis, plus improvements		(g) Gain or (loss) Subtract (f) from the
2		(	(,, ,,	, , , , ,	acquisition	expense of sa		sum of (d) and (e)
f.								
_							_	<del></del>
_				-				
					<b>-</b>			
_	Cain if any from Form 4684 line 20			,		<u> </u>	3	
3	Gain, if any, from Form 4684, line 39 Section 1231 gain from installment	also from Form	COEO lino OC or		******************		-	
4	Section 1231 gain from installment	sales from Form	from Form 800	ن. ا		-	4	
5	Section 1231 gain or (loss) from like	-kina exchanges	from Form 8822				5	
6	Gain, if any, from line 32, from other	tnan casualty or	tnert			-	6	:
7	Combine lines 2 through 6. Enter the						7	
	Partnerships (except electing larginstructions for Form 1065, Schedul below.	le K, line 10, or F	orm 1120S, Sch	edule K, line 9. Sk	kip lines 8, 9, 11, ar	nd 12		
	Individuals, partners, S corporation from line 7 on line 11 below and skip 1231 losses, or they were recapture the Schedule D filed with your return	o lines 8 and 9. If d in an earlier ye	line 7 is a gain a ar, enter the gai	and you did not han from line 7 as a	ave any prior year s	section		
8	CHE CHARRING 7							
9	Subtract line 8 from line 7. If zero or						8	
•	line 9 is more than zero, enter the ar			_				
	capital gain on the Schedule D filed	long tom	9					
				7				
Ра	rt II Ordinary Gains and	LOSSES (see in	structions)					
10	Ordinary gains and losses not include	ded on lines 11 th	nrough 16 (inclu	de property held 1	vear or less):			
CH	PRIVATE EQUITY V		, , , , , , , , , , , , , , , , , , ,		T T			
L.								<67.
	-	-						
11	Loss if any from line 7						11	7
12	Loss, if any, from line 7  Gain, if any, from line 7 or amount fr	om line R if appl	iooble				12	J
							-	
13	Gain, if any, from line 31	04 1 00 -					13	
14	Net gain or (loss) from Form 4684, li	nes 3   and 38a			*******************		14	
15	Ordinary gain from installment sales						15 16	
16								C
17	Combine lines 10 through 16						17	<67.
18	For all except individual returns, ent a and b below. For individual returns			e appropriate line	of your return and	skip lines		
а	If the loss on line 11 includes a loss the part of the loss from income-pro from property used as an employee	ducing property	on Schedule A (	Form 1040), line 2	8, and the part of	the loss		
				=			18a	
b	Redetermine the gain or (loss) on lin					-		
_		_	-				18b	
THZ								Form 4707 (2014)

Page 2

9 (a) Description of section 1245, 1250, 1252, 1		(b) Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)			
		(IIIO., day, yi	.)	(IIIO., uay, yi.)			
A							
C						-	
D							
These columns relate to the properties on							
lines 19A through 19D.	<b>•</b>	Property A	Property	В	Property	С	Property D
Gross sales price (Note: See line 1 before completion	ng.) <b>20</b>						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	le 22						
Adjusted basis. Subtract line 22 from line 21	200000						
Total gain. Subtract line 23 from line 20	24						
5 If section 1245 property:							
a Depreciation allowed or allowable from line 22	14,000		-				
b Enter the smaller of line 24 or 25a							
6 If section 1250 property: If straight line deprecia was used, enter -0- on line 26g, except for a corpora subject to section 291.							
a Additional depreciation after 1975 (see instructions)							
<b>b</b> Applicable percentage multiplied by the <b>small</b> of line 24 or line 26a (see instructions)	ler 26b						
c Subtract line 26a from line 24. If residential reproperty or line 24 is not more than line 26a, s lines 26d and 26e	skip						
d Additional depreciation after 1969 and before 1976							
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f							
7 If section 1252 property: Skip this section if you did dispose of farmland or if this form is being complete a partnership (other than an electing large partnersh	d not ed for						
a Soil, water, and land clearing expenses							
<b>b</b> Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
B If section 1254 property: a Intangible drilling and development costs, expenditu for development of mines and other natural deposits mining exploration costs, and depletion (see instruc	s,						
b Enter the smaller of line 24 or 28a							
<ul> <li>If section 1255 property:</li> <li>a Applicable percentage of payments excluded from income under section 126 (see instruction)</li> </ul>	ons) 29a						
b Enter the smaller of line 24 or 29a (see instruction	ns) 29b						
Summary of Part III Gains. Complete prop		A thurston D thurston	h line OOh hefere	asina	to line 20		
difficially of Fart III Gains. Complete prop	erty columns	A through D throug	II line 290 belore	gong	, to line 30.		
O Total gains for all properties. Add property col	lumns A throu	ıgh D, line 24				30	
1 Add property columns A through D, lines 25b						31	
2 Subtract line 31 from line 30. Enter the portion		-				_	
Form other than casualty or theft on Form 479  Part IV Recapture Amounts Under S	7, line 6	0 and 200E/b//	Mhon Busin	2000	Hea Drope	32	orloss
Part IV Recapture Amounts Under Some (see instructions)	ections 17	9 and 200F(D)(2	, when bush	1622	Ose Drops	10 30%	OI Less
					(a) Sectio 179	n	(b) Section 280F(b)(2)
3 Section 179 expense deduction or depreciation	on allowable i	n prior years		33			, ,
				34			
Recomputed depreciation (see instructions)  Recompute amount. Subtract line 34 from line.				35			

10 (5) in

FORM 4797 NONRECA	STATEMENT 7		
TAX YEAR	SECTION 1231 LOSSES	SECTION 1231 LOSSES RECAPTURED	NONRECAPTURED SECTION 1231 LOSSES
2009	0.	0.	0.
2010	13,044.	5,847.	7,197.
2011	0.	0.	0.
2012	0:•	0.	0.
2013	0.	0.	0.
TOTAL TO FORM 4797, LINE 8	13,044.	5,847.	7,197.

## Section 1.263(a)-3(n) Capitalization Election

The Art Institute of Chicago hereby elects to capitalize repair and maintenance costs under Treas. Reg. § 1.263(a)-3(n). The costs were incurred during the taxable year in the electing taxpayer's trade or business and the electing taxpayer treats such costs as capital expenditures on its books and records.

Taxpayer Name	EIN	Address
The Art Institute of Chicago	36-2167725	111 South Michigan Avenue
		Chicago, IL 60603

# Section 1.263(a)-1(f) De Minimis Safe Harbor Election

The Art Institute of Chicago Center is making the de minimis safe harbor election under Treas. Reg. § 1.263(a)-1(f) for all eligible amounts paid or incurred during the taxable year.

Taxpayer Name	EIN	Address
The Art Institute of Chicago	36-2167725	111 South Michigan Avenue
		Chicago, IL 60603