efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493126018120 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form **990** 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

				nay be made									
Freasur	Department of the Freasury Internal Revenue Service To do to www.irs.qov/Form990 for instructions and the latest information.												
A Fo	or the 2019	calendar year, or tax year be	ginning 07-01-2018 , and ending 06-3	30-2019									
3 Ched	ck if applicable dress change me change	C Name of organization The Art Institute of Chicago			D Employer 1		ation number						
	aal return	Doing business as											
□ Am	al return/terminato ended return plication pendir	Number and street (or P O box i	f mail is not delivered to street address) Room/s	uite	·	E Telephone number (312) 443-3600							
<u> —</u> л.р.	meation penali		country, and ZIP or foreign postal code		(312) 443	-3000							
		Chicago, IL 60603			G Gross receip	ots \$ 408	3,370,650						
		F Name and address of princ	ipal officer	H(a) Is	this a group retur	n for							
		Alexandra Holt 111 South Michigan Avenue		su	bordinates?		□ _{Yes} ☑ _{No}						
		Chicago, IL 60603			e all subordinates cluded?		☐ Yes ☐No						
[Тах	-exempt statu	5 501(c)(3) 501(c)()	◀ (insert no)		"No," attach a list	(see II	nstructions)						
J W	ebsite: ► w	ww artic edu and www saic edu		H(c) G	oup exemption nu	ımber 🕨	•						
				1									
K Form	_	n 🗹 Corporation 🗌 Trust 🗌 A	ssociation Other	L Year of f	ormation 1879 M	State o	f legal domicile IL						
Pa		nmary											
)ce	The Art	escribe the organization's mission Institute of Chicago, a not-for-pro tion and education in visual fine	ofit corporation, is both a museum and an	ınstıtutıon o	f higher education	that ex	xists to provide						
Activities & Governance													
ě													
3		Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net asse Number of voting members of the governing body (Part VI, line 1a)											
∞		of independent voting members	4										
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ımber of ındıvıduals employed ın	5	4,128									
<u>}</u>		ımber of volunteers (estimate if i	, , , , , , , , , , , , , , , , , , , ,			6	814						
₹		·	Part VIII, column (C), line 12			7a	1,913,678						
	b Net unr	elated business taxable income f	rom Form 990-T, line 34			7b	0						
					_	1 -							
					Prior Year	•	Current Year						
ą,	8 Contrib	utions and grants (Part VIII, line 1	lh)		Prior Year 71,017,212	_	97,739,224						
ënuë			lh)			2							
Rəvenue	9 Progran	n service revenue (Part VIII, line 2	·		71,017,212	2	97,739,224						
Ravenua	9 Program	n service revenue (Part VIII, line 2	2g)		71,017,212 212,383,078 56,585,746 7,418,659	2 3 5	97,739,224 225,444,444 45,649,286 7,610,030						
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May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

☑ Yes ☐ No

Cat No 11282Y

Form **990** (2018)

Form	990 (2	018)					Page 2
Pa	rt III	Statement of	Program Servi	ce Accomplis	hments		
		Check if Schedule	O contains a resp	onse or note to	any line in this Part III		🗆
1	Briefly	describe the orga	nızatıon's mıssıon				
See S	Schedule	e O					
	D. J. H.					h h	
2		-	iertake any signific 90-EZ?		vices during the year w	nich were not listed on	☐ Yes ☑ No
	'	⊔ Yes ⊻ No					
3		•	new services on Sc		changes in how it condi	usts any program	
3		-		nake significant	changes in how it condi	ucts, any program	□ Yes ☑ No
		es?	 changes on Schedu				∟ Yes ⊻ No
4	Descri Sectio	be the organization n 501(c)(3) and 50	n's program servic	e accomplishmei ons are required	to report the amount o	largest program services, as mea of grants and allocations to others	
4a	(Code) (Expenses \$	180,574,970	including grants of \$	48,762,843) (Revenue \$	189,871,435)
	See Ad	dıtıonal Data					
4b	(Code) (Expenses \$	105,901,850	including grants of \$	20,000) (Revenue \$	38,961,393)
		ditional Data	, (
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services	(Describe in Sched	ule O)			
	(Expe	nses \$	ınc	luding grants of	\$) (Revenue \$)
4e	Total	program service	expenses >	286,476,8	20		

Form 990 (2018) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Vac 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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? 4 Yes 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? 5 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? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? Yes R Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Nο 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🔧 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported No 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? 12h Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Yes

14a

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 14b Yes Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Yes 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Yes Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19

Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

Nο

21

22

Yes

Form 990 (2018)

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

Form	990 (2018)			Page 4
Pa	Checklist of Required Schedules (continued)			
			Yes	No
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
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? If "Yes," complete Schedule L, Part III	27	Yes	
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	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>	28 c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance

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

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Part V

Yes

Yes

Yes Form **990** (2018)

V

No

38

1c

4,619

1a

1b

7a

7b

7с

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

Form **990** (2018)

7d |

10a

10b

11a

11b

12b

13b

13c

Yes

Yes

Yes

No

No

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

Organizations that may receive deductible contributions under section 170(c).

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

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

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," did the organization notify the donor of the value of the goods or services provided?

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

Part '

Form **990** (2018)

90 ((2018) Pa	age 6
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line	:5
	92 9h or 10h holow doceriha the circumstances, processes, or changes in Schodula O. See instructions	

	Check if Schedule O contains a response or note to any line in this Part VI			✓				
Se	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 75							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b 74							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Did the organization have members or stockholders?	6		No				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes	'				

-	bla the organization make any significant changes to its governing accuments since the prior form 550 was med.			i
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	TO DECEMBER 1997 AND ADDRESS OF THE PARTY OF	$\overline{}$		
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a		10b 11a		No
	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			No
b	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes	No
b 12a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	Yes Yes	No

b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No					
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)						
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		No					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No					
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
Ь	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			·					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Section C. Disclosure									
17	List the States with which a copy of this Form 990 is required to be filed ► CA . AL . IL . KS . KY . AK . MD . MA . MI .	MS , N	H . NJ .	NY .					

1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
7	List the States with which a copy of this Form 990 is required to be filed CA , AL , IL , KS , KY , AK , MD , MA , MI , ND , OK , OR , SC , UT , VA , WI	MS,N	H , NJ ,	NY,
8	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

	Schedule O how this was done	12c	Yes									
13	Did the organization have a written whistleblower policy?	13	Yes									
14	Did the organization have a written document retention and destruction policy?	14	Yes									
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official	15a	Yes									
ь	Other officers or key employees of the organization	15b	Yes									
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?											
Se	ction C. Disclosure											
17	List the States with which a copy of this Form 990 is required to be filed CA , AL , IL , KS , KY , AK , MD , MA , MI , ND , OK , OR , SC , UT , VA , WI	MS,N	Н , NJ ,	NY,								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply											
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)											
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year											
20	State the name, address, and telephone number of the person who possesses the organization's books and records Malexandra Holt 111 South Michigan Avenue Chicago, IL 60603 (312) 499-4265											

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

Bon Appetit

111 S Michigan Avenue Chicago, IL 60603

compensation from the organization ▶ 65

Part VII Section A. Officers, Direct	tors, Trustees	s, Key	Empl	loye	es,	and I	High	hest Con	npensa	ted Emplo	yees (conti	nued)	Page 8			
(A) Name and Title	(B) Average hours per week (list any hours	Average hours per week (list any hours for related								Repo compe from i	(E) Reportable compensation from related organizations (W- 2/1099-MISC)			(F) Estimated amount of other compensation from the organization and			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1093	9-MISC)	2/1093			relai organiz	ed			
See Additional Data Table																	
												\top					
							\vdash					+					
												+					
												+					
												+					
1b Sub-Total						<u> </u>											
c Total from continuation sheets to P	art VII , Section	Α				•											
d Total (add lines 1b and 1c)						>		· · · · · · · · · · · · · · · · · · ·	32,112		0			1,215,253			
Total number of individuals (including of reportable compensation from the			e list	ed al	bove	e) who	rec	eived mor	e than \$	100,000							
													Yes	No			
3 Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>							or hi	-	pensate	ed employee	on	3	Yes				
4 For any individual listed on line 1a, is organization and related organization individual	s greater than s	150,00	0 <i>If</i>	"Yes	," c	omplet	te Sc	chedule J f	or such			_	,,				
5 Did any person listed on line 1a recei											·	4	Yes				
services rendered to the organization											.	5		No			
Section B. Independent Contract	tors																
1 Complete this table for your five high from the organization Report compe												pens	sation				
	(A) and business addre		,		9					(B)			(Compo				
Securitas Security Services USA Inc	and pusiness addre	=55						9	Security S	scription of se Services	ivices			nsation 5,222,767			
4330 Park Terrace Drive																	
Westlake Village, CA 91361 Able Engineering Services Inc								E	ngıneerır	ng Services			3	3,936,223			
868 Folsom Street																	
San Francisco, CA 94107 ABM Onsite Services- Midwest]	anıtorıal	Service				2,406,236			
180 N LaSalle St 1700																	
Chicago, IL 60601 Food For Thought								(Catering S	Services		\dashv		2,347,208			
7001 Ridgeway Ave																	
Lincolnwood, IL 60712 Bon Annetit									atering 9	Services		-	1	628 245			

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

1,628,245

Catering Services

orm 9													Page 9
Part	VIII	Statement of					na Davi VIII						. 🗸
		Check If Schedul	e O contains a	respo	onse or note to any	(/	A) evenue	Rela ex fur	(B) ated or empt action venue	b	(C) nrelated susiness evenue	tax ı	(D) Revenue cluded from inder sections 512 - 514
(6	1a	Federated campaig	ns	1a				10	venue				312 314
nts ints	ь	Membership dues	[1 b	15,493,484								
9 10 10	c	: Fundraising events		1c	3,216,693								
Ę į	d	l Related organizatio	ns	1d									
<u> </u>	e	Government grants (co	ontributions)	1e	6,590,271								
tions, er Sirr	f	All other contributions and similar amounts nabove		1f	72,438,776								
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution in lines 1a - 1f \$	ons included	12	,858,59 <u>2</u>								
Ē Ā	ŀ	1 Total. Add lines 1a	-1f		•	g	97,739,224						
_					Business	Code	· · · · · · · · · · · · · · · · · · ·						
FE	2a	Tuition and Fees				611600	187,2	281,340	187,28	1,340			
34	b	Museum Admissions				900099	18,3	392,189	18,39	2,189			
Program Service Revenue	c	Proceeds from Sale of A	rt			900099	13,2	277,350	13,27	7,350			
	d	Member Program Reven	iues			900099	-	726,207	72	6,207			
န	е	Other Restricted Prog Re	ev			900099	2,:	180,393	2,18	0,393			
gra	f	All other program se	rvice revenue				3,5	586,965	3,58	6,965		0	0
Ĕ		Fotal. Add lines 2a-2			225,4	44,444		_					
		nvestment income (ii imilar amounts)	ncluding divide		nterest, and other	ļ	10,369,440						10,369,440
		income from investme			ond proceeds >								
	5 F	Royalties					143,762	2					143,762
			(ı) Real		(II) Personal								
	6a	Gross rents	3.79	2,339									
	b	Less rental expenses		8,508		1							
	С	Rental income or (loss)	2,40	3,831	0	†							
	d	Net rental income o	r (loss)			1	2,403,83	1			40,129		2,363,702
			(ı) Securiti		(II) Other								
		Gross amount from sales of assets other than inventory	59,56	9,261									
	b	Less cost or other basis and	24,29	2,415									
	c	sales expenses Gain or (loss)	35,27	6,846	0	1							
		Net gain or (loss)			>	1	35,279,846	5					35,279,846
Other Revenue		Gross income from from from including \$	3,216,693 o ed on line 1 c)		193,525								
3ev		Less direct expense		b	1,374,458	1							
J le		Net income or (loss)			ents 🕨	J	-1,180,93	3					-1,180,933
Oth		Gross income from g See Part IV, line 19		s									
		,		а	13,360								
	b	Less direct expense	s	b	3,460								
		Net income or (loss)		ctivit	ies >		9,900)					9,900
		Gross sales of invent returns and allowand											
				а	10,121,753								
	b	Less cost of goods s	sold	b	4,868,825								
-	С	Net income or (loss)		nvent			5,252,928	3	3,388,384		1,864,544		
-	11:	Miscellaneous Other revenue	Revenue		Business Code 900099	1	980,54				9,005		971,537
	-1.	Other revenue			300033		200,34				5,005		371,337
	Ь												
	c							-					
	~												
	d	All other revenue .					(D	0		0		0
	е	Total. Add lines 11a	-11d		•		980,542	2					
	12	Total revenue. See	Instructions				376,442,98	1	228,832,828		1,913,678		47,957,254
												For	m 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comm	lete column (A)	
Check if Schedule O contains a response or note to any	_	·		🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		·		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	48,782,843	48,782,843		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,747,673	3,955,906	1,232,582	559,185
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	270,985	270,985		
7 Other salaries and wages	102,243,388	86,080,652	10,371,542	5,791,194
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,286,692	1,624,208	414,249	248,235
9 Other employee benefits	20,412,040	16,769,638	2,314,568	1,327,834
10 Payroll taxes	7,384,359	6,152,163	790,683	441,513
11 Fees for services (non-employees)				
a Management				
b Legal	961,966		961,966	
c Accounting	467,021		467,021	
d Lobbying	14,320	14,320		
e Professional fundraising services See Part IV, line 17	485,410			485,410
f Investment management fees	2,604,925		2,604,925	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	15,709,577	13,600,695	1,093,264	1,015,618
12 Advertising and promotion	2,517,056	2,468,479	17,258	31,319
13 Office expenses	9,854,590	8,790,487	527,983	536,120
14 Information technology	3,608,655	2,394,242	1,167,560	46,853
15 Royalties	88,949	88,949		
16 Occupancy	26,840,419	26,105,078	575,512	159,829
17 Travel	4,105,115	3,866,527	78,865	159,723
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	592,573	336,110	166,572	89,891
20 Interest	7,339,439	4,627,833	2,711,606	
21 Payments to affiliates	17,015	17,015		

26,890,418

1,217,318

22,773,268

4,650,410

3,271,191

968,000

2,413,544

324,519,159

25,972,997

1,217,318

22,773,268

4,259,353

3,271,191

967,860

2,068,703

286,476,820

917,421

374,562

90,109

26,878,248

16,495

140

254,732

11,164,091

Form **990** (2018)

22 Depreciation, depletion, and amortization .

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

25 Total functional expenses. Add lines 1 through 24e 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)

23 Insurance . . .

c Exhibition Related

d Other Program Costs

e All other expenses

expenses on Schedule \dot{O})

a Accessions/Books/Other Art

b Other FF&E and related maintenance

Page **11**

15.568.650

120,971,094

44.000.000

37.853.898

259.393.022

491.925.190

434,002,794

467.464.029

1,393,392,013

1,652,785,035

Form **990** (2018)

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Form 990 (2018)

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Retained earnings, endowment, accumulated income, or other funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

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Liabilities 22

Assets or Fund Balances

Net

		Check if Schedule O contains a response or not	te to an	y line in this Part IX			<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments .		[20,935,997	2	31,374,048
	3	Pledges and grants receivable, net		. [62,657,735	3	83,736,423
	4	Accounts receivable, net		[6,318,786	4	5,432,988
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L	ated em	ployees Complete	0	5	0
ts	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	n 4958 ations o (see ins	(c)(3)(B), and f section 501(c)(9) structions) Complete	1005.000	6	0
ssets	7	Notes and loans receivable, net		-	4,065,689	7	3,517,385
Š	8	Inventories for sale or use			3,433,409	8	3,856,773
	9	Prepaid expenses and deferred charges			2,192,944	9	2,579,893
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	763,646,099			
	b	Less accumulated depreciation	10b	342,422,382	439,570,944	10c	421,223,717
	11	Investments—publicly traded securities .			655,236,355	11	696,187,399
	12	Investments—other securities See Part IV, line	11 .	[424,754,044	12	403,898,793
	13	Investments—program-related See Part IV, line	e 11 .		0	13	
	14	Intangible assets			0	14	
	15	Other assets See Part IV, line 11		[4,048,678	15	977,616
	16	Total assets.Add lines 1 through 15 (must equ	ıal lıne 3	34)	1,623,214,581	16	1,652,785,035
T	17	Accounts payable and accrued expenses			37,288,804	17	40,999,380
	18	Grants payable			0	18	

17,222,470

142,694,857

54,000,000

25.145.334

276.351.465

236.925.720

647,218,890

462.718.506

1,346,863,116

1,623,214,581

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3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007697

Software Version: 2018v3.1 **EIN:** 36-2167725

Name: The Art Institute of Chicago

Form 990 (2018)

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Form 990, Part III, Line 4a:

The School of the Art Institute of Chicago (SAIC) is an accredited college of art and design offering undergraduate, graduate, and post-baccalaureate degree programs for studio artists, art educators, art therapists, designers, writers, and art historians SAIC's fine arts graduate program consistently ranks among the top programs in the nation by U.S. News and World Report, and the School offers world-class resources including the Art Institute of Chicago museum, on-campus galleries, and state-of-the-art facilities. In fiscal year 2019, average academic year full-time-equivalent enrollment of degree-seeking students was 3,683 including international students from 78 countries.

The Museum's mission is to collect, preserve, and interpret works of art of the highest quality from across the globe for the inspiration and education of its visitors. It achieves this through building and stewarding its renowned permanent collection, producing educational programming around the collection with daily performances, gallery tours, lectures, readings, and other special events, and presenting world class exhibitions highlighting both its collection and objects loaned from other institutions. The Art

Form 990, Part III, Line 4b:

Institute's encyclopedic collection consists of approximately 300,000 works of art in 11 curatorial departments. The museum has the third largest collection of art in the United States. Exhibitions featured within FY19 include Manet and Modern Beauty, Dawoud Bey. Night Come Tenderly Black, Harry Who? 1966-69, and Tomma Abts

United States Exhibitions featured within FY19 include Manet and Modern Beauty, Dawoud Bey Night Come Tenderly Black, Harry Who? 1966-69, and Tomma Abts Attendance for FY19 has exceeded 1.53 million visits

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation rom the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours		direct			ee)		organization (W-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trust¥ë		key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Robert M Levy	1 0	×		x				0	0	0	
Chair											
Denise B Gardner	1 0	x		x				0	0	0	

and Independent Contractors

Vice Chair

Vice Chair

Vice Chair

Treasurer

Trustee

Trustee

Trustee

Trustee

Arjun Aggarwal

James N Bay

Anne Searle Bent

Anıta Blanchard

David J Vitale

Frederick H Waddell

Jay Frederick Krehbiel

Robert M Levy	1 0	,	×		0	0	
Chair		^	^			0	
Denise B Gardner	1 0		Х			0	
Vice Chair		^	^		0	0	

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Vice Chair		_ ^	^		٥	٥	
Samuel M Mencoff	1 0	v	~		0	0	

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Scott Canel

John S Chapman

Lester N Coney

A Steven Crown

Shawn M Donnelley

Janet Duchossois

Fred Eychaner

Trustee

Trustee

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Trustee

Trustee

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Neil G Bluhm	1 0	х						0	0	C	
Trustee-Ended 11/2018		_ ^							0	V	
Barbara Bluhm-Kaul	1 0	х						0	0		
Trustee		_ ^							U	0	
Robert Buford	1 0	1							0		
Trustee		X							U	0	

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Jay Franke

Sarah Nava Garvey

Matthew R Gibson

James A Gordon

Karen Gray-Krehbiel

Kenneth C Griffin

Trustee

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	ally flours	١ ،	an ecc	.01/11	ust	ee)		Organization (W-	Organizations	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Lorı Gray Faversham	1 0	x						0	0	0	
Trustee								-	_		
Aaron Fleischman	1 0	x						0	0	0	
Trustee								_	_	_	
Rebecca Ford	1 0	×						0	0	0	
Trustee-Ended 12/2018		_ ^						ĺ			
Karen Frank	1 0	x						0	0	0	
Trustee		_ ^									
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Joseph Gromackı
Trustee
Ann E Grube
Trustee

Darrel Hackett

Adnaan Hamid

Caryn Harris

Betty B Harris

Steven Hunter

Pamela Joyner

Linda Johnson Rice

Stephanie Field Harris

Trustee-Ended 5/2019

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a compensation week (list from the from related director/trustee) any hours organization (Worganizations from the

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Rita Knox
Trustee
Anstiss Hammond Krueck
Trustee
Josef Lakonishok

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Paul Lambert

Eric Lefkofsky

Lawrence F Levy

Barbara Levy Kipper

Barry L MacLean

John F Manley

Joe Mansueto

Trustee-Ended 11/2018

and Independent Contractors

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Howard M McCue III	1 0	x						0	0	0	
Trustee		^						0	0	0	
John E McGovern III	1 0	x						0	0	0	
Trustee-Ended 7/2018		_ ^						ľ	٥	0	
Eric T McKissack	1 0	x						0	0	0	
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Trustee

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Trustee

Trustee

Trustee

Trustee

Usha Mittal

Sylvia M Neil

Alexandra C Nichols

Matthew Pettinelli

Harvey Plotnick

Trustee-Ended 7/2018

Cary D McMillan

Harriet Horwitz Meyer

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a week (list compensation from the from related director/trustee) any hours organization (Worganizations from the

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Mıchael Polsky
Trustee
Anne Pramaggiore
Trustee
Thomas J Pritzker
Trustee

Bob Rennie

Anne Reyes

Andrew M Rosenfield

Betsy Bergman Rosenfield

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Michael Sacks

Ellen Sandor

Scott Santı

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person compensation amount of other hours per compensation is both an officer and a from related week (list from the compensation

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Prabhakant Sinha

Stephanie Skestos Gabriele

Linda Smith Buonanno

Trustee-Ended 11/2018

Trustee

Trustee

Trustee

Trustee

Trustee

Louis B Susman

Marilynn Thoma

Anıta Sınha

	any hours	1	direct			ee)		organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
Gordon Segal	1 0	×						0	0	
Trustee		^							Ĭ	
Brenda M Shapıro	1 0									
Trustee		X							0	
Sophia Shaw	1 0	×							0	
Trustee		_ ^							0	
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Brenda M Shapiro	1 0	X			١	0	ĺ
Trustee		_ ^				0	
Sophia Shaw	1 0	V			0	0	
Trustee		X			0	0	
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904,631

669,361

499,704

290,382

253,600

244,114

240,503

organization and related organizations

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76,057

42,236

124,840

28,825

40,972

90,961

25,326

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	any hours director/trustee) director/trustee)					organization (W-	organizations		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	
Reeve B Waud	10	×						0	0	
Trustee		,,						,	,	
Shirley Welsh Ryan	10							0	0	
Trustee		×						0	0	
Roger L Weston	1 0							0	0	
Trustee		X						0	0	

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......

and Independent Contractors

James Rondeau

Elissa Tenny

Julia Getzels

Alexandra Holt

Lisa Wainwright

Brian Esker

Rose Milkowski

EVP, Finance & Admin

Dean of Faculty/VP Acad Admin

VP of Finance & Admin, School

VP for Enrollment Management

President, Museum

President, School

EVP & General Counsel-Ended 6/2019

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from related from the compensation director/trustee) any hours organization (Worganizations from the

2/1099-MISC)

217,412

568,770

238,038

303,446

253,834

391,507

255,904

205,649

304,619

212,736

Former

Highest compensated

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organization and

related organizations

79,621

42,678

80,022

48,619

91,416

19,700

34,073

20,496

35,157

31,730

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	famous lateral	,	in ccc	017 (1	<u>_</u>
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	The second of the second
Thomas Buechele	40 0				
VP for Campus Operations, School					
Evelyn Jeffers	40 0				
VP for Museum Development					
			_	-	_

and Independent Contractors

Michael Nicolai

Andrew Simnick

Sarah Guernsey

Craig Barton

Kırstıe Lytwynec

Russell Collett

VP of Operations
Ann Goldstein

Contemporary Art Tao Wang

Provost-Ended 7/2018

Chief Human Resources Officer

Sr VP for Finance, Strategy, & Ops

Deputy Director, Curatorial Affairs

VP and General Manager, Retail

Deputy Director, Chair & Curator Modern &

Chair of Asian Art/Executive Director Initiatives in

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	f		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee
Maria Simon	40 0		
Associate General Counsel			

and Independent Contractors

Paul Coffey

Vice Provost

Eugene Adams

Deborah Johnston

Former Controller

Walter Massey

Chief Information Officer

Chancellor, Former President, SAIC

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208,388

228,331

226,065

121,579

393,539

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MISC)

organization and

related organizations

61,037

95,516

114,083

21,273

10,615

SCHEDU Form 990 990EZ)		Com	Public plete if the o		2018			
Department of th			► Go to	www.irs.qov/Forms	<u>990</u> for the late	est information		Open to Public Inspection
lame of the he Art Institute	organizat	ion					Employer identific	cation number
Part I	Peacon f	or Bublic (harity Stat	us (All organization	e must comple	to this part \ 9	36-2167725	
				e it is (For lines 1 thro			bee mstructions.	
1	A church, co	nvention of	churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2 🗹 A	A school de	scribed in se	ction 170(b)((1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
3 🗆 🗸	A hospital o	r a cooperati	ve hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).	
	A medical rename, city,		nization operat	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	Enter the hospital's
		tion operated iv). (Comple		it of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	ibed in section 170
	, , , , , , ,		,	r governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
	section 17	D(b)(1)(A)(vi). (Complete			-	ınıt or from the gener	al public described in
8 🗆 🗡	A communit	y trust descr	ıbed ın sectio ı	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
				escribed in 170(b)(1) See instructions Enter				lege or university or a
f I	rom activit nvestment	es related to income and i	its exempt fur inrelated busir	(1) more than 331/3% nctions—subject to cer ness taxable income (le omplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
	•			d exclusively to test fo	r public safety S	See section 509	(a)(4).	
r	nore public	ly supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(
a 🗆 1	Г уре I. A s organizatior	upporting org	janization opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
□ r	nanagemer	nt of the supp		pervised or controlled i ation vested in the sar and C.				
		•	-	supporting organizations) You must com	•	·	, -	ated with, its
d 🗆 1	Type III no unctionally	on-function integrated	ally integrate he organizatio	d. A supporting organi in generally must satis rt IV, Sections A and	ization operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗆 (Check this b	oox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type II	II functionally
	-		on-functionally organizations	ıntegrated supportıng	organization			
9 Provide	the follow	ng informati	on about the s	upported organization(s)			
organization organization in your governing document? monetary					(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No		
otal								
	rk Reduct	ion Act Not	ice, see the I	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 201

(b)(1)(A)(ix)

▶□

Schedule A (Form 990 or 990-EZ) 2018

Page 2

	III. If the organization f	ails to qualify un	ider the tests lis	ited below, plea:	se complete Par	t III.)	
	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
L	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	64,644,760	106,285,789	55,429,565	65,578,847	92,396,397	384,335,358
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	5,689,620	5,732,824	5,644,223	5,438,365	5,342,827	27,847,859
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
ļ	Total. Add lines 1 through 3	70,334,380	112,018,613	61,073,788	71,017,212	97,739,224	412,183,217
5	The portion of total contributions by each person (other than a governmental unit or publicly						

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	70,334,380	112,018,613	61,073,788	71,017,212	97,739,224	412,183,217
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)						27,401,123
6	Public support. Subtract line 5 from line 4						384,782,094

4	Total. Add lines 1 through 3	70,334,380	112,018,613	61,073,788	/1,01/,212	97,739,224	412,183,217
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)						27,401,123
6	Public support. Subtract line 5 from line 4						384,782,094
_;	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e)2018	(f) Total
7		70,334,380	112,018,613	61,073,788	71,017,212	97,739,224	412,183,217
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,794,570	10,339,909	11,138,842	11,993,785	14,170,463	57,437,569
9	Net income from unrelated						

	line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						384,782,094
- 5	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e)2018	(f) Total
7	Amounts from line 4	70,334,380	112,018,613	61,073,788	71,017,212	97,739,224	412,183,217
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,794,570	10,339,909	11,138,842	11,993,785	14,170,463	57,437,569
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	693,874	762,813	506,695	662,212	206,885	2,832,479
11	Total support. Add lines 7 through						472.453.265

section B. Total Support										
Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
Amounts from line 4	70,334,380	112,018,613	61,073,788	71,017,212	97,739,224	412,183,217				
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,794,570	10,339,909	11,138,842	11,993,785	14,170,463	57,437,569				
Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0				
Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	693,874	762,813	506,695	662,212	206,885	2,832,479				
Total support. Add lines 7 through 10						472,453,265				
Gross receipts from related activities,	etc (see instructio	ns)			12	1,052,340,072				
First five years. If the Form 990 is fo	or the organization'	s first, second, thi	rd, fourth, or fifth	ı tax year as a sect	ion 501(c)(3) org	anızatıon,				
check this box and stop here					▶ []				
Section C. Computation of Public										
=	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 81 44 %									

	10							· · ·
12	Gross receipts from related activities,	etc (see instructi	ons)			12		1,052,340,072
13	First five years. If the Form 990 is f	or the organization	n's first, second, th	nird, fourth, or fifth	n tax year as a sec	tion 501	(c)(3) org	janization,
	check this box and stop here						▶[<u>] </u>
	Section C. Computation of Publi	C Support Per	rentage					

15

81 73 %

15 Public support percentage for 2017 Schedule A, Part II, line 14

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

h 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

box and stop here. The organization qualifies as a publicly supported organization

organization

instructions

supported organization

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(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							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi	<u>_</u>				1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ) 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below 10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	Page 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		Į Į
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
				Ì
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	110
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	mstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2.		
3		2b		
	Parent of Supported Organizations Answer (a) and (b) below. 2. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E					
	Section A - Adjusted Net Income		(A) Prior Year (B) Current Year (optional)			
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)					
4	Add lines 1 through 3					
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1				
a	Average monthly value of securities					
b	Average monthly cash balances	1 b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors (explain in detail in Part VI)					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
				1		

4

Schedule A (Form 990 or 990-F7) 2018

Enter greater of line 2 or line 3

Schedule A (Form 990 or 990-EZ) (2018)

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Schedule A (Form 990 or	990-EZ) 2	2018 Page 8				
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)						
Facts And Circumstances Test						
990 Schedule A, Sup	pplemen	tal Information				
Return Referenc	:e	Explanation				
Schedule A, Part I, Line Reason for Public Charit		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 describes an organization that normally receives a substantial part of its support from a governmental unit or from the general public, Section 170 (b) (1) (A) (vi) The Art Institute of Chicago has select ed box 2, because per instructions only one applicable box should be checked				

990 Schedule A, Supplemental Information						
Return Reference	Explanation					
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - FUNDRAISING EVENTS & GAMING ACTIVITIES NOT INCLUDED ELSEWHERE, COLUMN A - 69 3874 0, COLUMN B - 762813 0, COLUMN C - 506695 0, COLUMN D - 662212 0, COLUMN E - 206885 0					

SCHEDULE C

Political Campaign and Lobbying Activities

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

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

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

OMB No 1545-0047

DLN: 93493126018120

Schedule C (Form 990 or 990-EZ) 2018

Cat No 50084S

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** The Art Institute of Chicago 36-2167725 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2 5 For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

ь	Total lobbying expenditures to influence a legislative		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and		
f	Lobbying nontaxable amount Enter the amount fron columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
	Not over \$500,000	20% of the amount on line 1e	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
			 •
g	Grassroots nontaxable amount (enter 25% of line 1f		
h	Subtract line 1g from line 1a If zero or less, enter -(

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

or o		on under section 501(h)). ough 1: below, provide in Part IV a detailed description of the lobbying	(a	<u>,)</u>	\perp	(b)	,
ectiv	•	ough It below, provide in rail IV a detailed description of the lobbying	Yes	No		Amou	ınt
1		anization attempt to influence foreign, national, state or local legislation, e public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			No			
b	Paid staff or management (includ	e compensation in expenses reported on lines 1c through 1i)?		No	_		
С	Media advertisements?			No			
d	Mailings to members, legislators,	or the public?		No			
е	Publications, or published or broa	dcast statements?		No			
f	Grants to other organizations for	lobbying purposes?		No			
g	Direct contact with legislators, the	eır staffs, government officials, or a legislative body?	Yes				44
h	Rallies, demonstrations, seminars	s, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		Yes				14,320
j	Total Add lines 1c through 1i						14,364
2a	Did the activities in line 1 cause t	he organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any	tax incurred under section 4912			7		
С	If "Yes," enter the amount of any	tax incurred by organization managers under section 4912		1			
d	If the filing organization incurred	a section 4912 tax, did it file Form 4720 for this year?		1			
Pai	t III-A Complete if the or 501(c)(6).	ganization is exempt under section $501(c)(4)$, section $501(c)$)(5), o	r secti	ion		
						Yes	No
1	Were substantially all (90% or mo	ore) dues received nondeductible by members?			1		
2	Did the organization make only in	n-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to cari	ry over lobbying and political expenditures from the prior year?			3		
Pai		ganization is exempt under section $501(c)(4)$, section $501(c)(4)$, section $501(c)(4)$) Part OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part				5 01 (c	.)(6)
1	Dues, assessments and similar ar	mounts from members	1				
2	Section 162(e) nondeductible lob expenses for which the section	bying and political expenditures (do not include amounts of political n 527(f) tax was paid).					
a	Current year		2a	<u> </u>			
b	Carryover from last year		2b	<u> </u>			
C	Total		2c	<u> </u>			
3		ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	<u> </u>			
4		unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political					
5	•	political expenditures (see instructions)	5				
	art IV Supplemental Info	·					
Pro	vide the descriptions required for P	art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),	Part II-	-A, lines	1 an	d 2 (se	
ins	Return Reference	o, complete this part for any additional information Explanation					\neg
I		·		al lass Ma			
DES	idule C, Part II-B, Line 1 DETAILED CRIPTION OF THE LOBBYING VITY	The amount in line 1i represents the Art Institute of Chicago's portion of func Park for lobbying activities (\$12,928), ACA International estimate of support of its members (\$120), lobbying portion of State and National dues of the An (\$224), Choose Chicago estimate allocated to lobbying activities (\$10), Coali Assistance Organizations dues attributed to lobbying expenses (\$31), International Association dues attributed to lobbying activities (\$13), and a good-faith estimate of the Articles (\$13), and a good-faith estimate (\$13),	of lobby nerican I tion of H ational F	/ing acti Institute Higher E acility N	ivities e of A duca Manag	s on be Archited tion gement	half cts

programs and initiatives taking place in the district

National Association of Independent Colleges and Universities that relate to lobbying (\$994) Museums in the Park works with the Chicago Park District, Chicago Public Schools, the City of Chicago, the State of Illinois and other entities to build greater awareness of the intrinsic value of museums. The amount in line 1g represents the cost of lunch allocated to a representative during his tour of the School of the Art Institute of Chicago. During May and June of 2019, the School of the Art Institute of Chicago invited two state senators and representatives on its campus for a facilities tour and lunch and/or meetings with the President of SAIC. The purpose of hosting these site visits was to educate the senators and representatives about SAIC.

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

DLN: 93493126018120 OMB No 1545-0047

Open to Public Inspection

Intern	al Revenue Service	► Go to <u>www.irs.g</u>	ov/Form990 for the la	test information.		Inspection
	me of the organ				Employer iden	tification number
rne	Art Institute of Chic	ago			36-2167725	
Pa		zations Maintaining Donor Adviste of the organization answered "Ye			or Accounts.	
		<u> </u>	(a) Donor adv		(b)Funds a	and other accounts
1	Total number at	end of year				
2	Aggregate value	of contributions to (during year)				
3	Aggregate value	of grants from (during year)				
4	Aggregate value	at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No					
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No					
Pa	rt III Conser	vation Easements. Complete if th	ie organization answe	red "Yes" on Forr	n 990, Part IV,	line 7.
1	Purpose(s) of co	onservation easements held by the organ	nization (check all that a	pply)		
	Preservation	on of land for public use (e g , recreation	n or education)	Preservation of an	historically impor	tant land area
	☐ Protection	of natural habitat		Preservation of a	certified historic st	ructure
	☐ Preservation	on of open space				
2	Complete lines 2	2a through 2d if the organization held a e last day of the tax year	qualified conservation co	ontribution in the foi		on the End of the Year
а	Total number of	conservation easements			2a	
b	Total acreage re	stricted by conservation easements			2b	
С	Number of conse	ervation easements on a certified historic	c structure included in (a	a)	2c	
d		ervation easements included in (c) acqui n the National Register	red after 7/25/06, and r	ot on a historic	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶		luring the			
4	Number of states where property subject to conservation easement is located ▶					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No			☐ Yes ☐ No		
6	Staff and volunt	eer hours devoted to monitoring, inspec	ting, handling of violatio	ns, and enforcing co	onservation easem	nents during the year
7	Amount of expe ▶ \$	nses incurred in monitoring, inspecting,	handling of violations, a	nd enforcing conser	vation easements	during the year
8	Does each cons	ervation easement reported on line 2(d)	above satisfy the requir	ements of section 1	70(h)(4)(B)(ı)	
	and section 170	(h)(4)(B)(II)?				☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Par	t IIII Organi	zations Maintaining Collections te if the organization answered "Ye	of Art, Historical Ti		er Similar Ass	ets.
1a	art, historical tr	on elected, as permitted under SFAS 11 easures, or other similar assets held for XIII, the text of the footnote to its finan	public exhibition, educat	ion, or research in f		
b	provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
((i) Revenue ınclud	led on Form 990, Part VIII, line 1			> \$	
(i	ii)Assets ıncluded	ın Form 990, Part X			▶ \$	
2		on received or held works of art, historic hts required to be reported under SFAS 1			ncıal gaın, provide	e the
а	Revenue include	ed on Form 990, Part VIII, line 1			> \$	
b	Assets included	ın Form 990, Part X			▶ \$	
For		iction Act Notice, see the Instruction	s for Form 990.	Cat No.	52283D Sche c	lule D (Form 990) 2018

Using the organization's acquisition, accession, and other records, check any of the following that are a significant items (check all that apply) a	pose in □ Yes ☑ No			
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt pur Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year	☐ Yes ☑ No ount on Form 990, Part ☐ Yes ☐ No			
C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt pur Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year 1c 1d	☐ Yes ☑ No ount on Form 990, Part ☐ Yes ☐ No			
Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt pur Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year	☐ Yes ☑ No ount on Form 990, Part ☐ Yes ☐ No			
Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year	☐ Yes ☑ No ount on Form 990, Part ☐ Yes ☐ No			
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year	ount on Form 990, Part			
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an am X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year 1c 1d	☐ Yes ☐ No			
included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year 1d				
c Beginning balance 1c 1d Additions during the year 1d	Amount			
c Beginning balance 1c 1d Additions during the year 1d				
d Additions during the year				
Discripations dufflid the Year				
f Ending balance				
-	. 🗆 Yes 🗆 No			
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line				
	years back (e)Four years back			
	52,156,186 1,004,102,659			
	35,880,530 39,741,238			
c Net investment earnings, gains, and losses 54,161,973 98,729,220 126,227,068 -	15,202,998 32,661,422			
d Grants or scholarships 4,209,172 4,298,834 4,021,698	3,803,429 3,465,407			
e Other expenditures for facilities	55,602,314 108,323,033			
f Administrative expenses 2,604,925 2,477,727 3,315,697	2,501,101 2,560,693			
g End of year balance	70,926,874 962,156,186			
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as				
a Board designated or quasi-endowment ► 32 %				
b Permanent endowment ► 41 %				
c Temporarily restricted endowment ► 27 %				
The percentages on lines 2a, 2b, and 2c should equal 100%				
Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No				
(i) unrelated organizations	3a(i) No			
(ii) related organizations				
4 Describe in Part XIII the intended uses of the organization's endowment funds				
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990,	Part X, line 10.			
Description of property (a) Cost or other basis (b) Cost or other basis (other) (investment) (c) Accumulated depreciation				
1a Land	34,972,096			
b Buildings	0 87,721,406			
c Leasehold improvements 493,885,085 201,914,32	6 291,970,759			
d Equipment	6 6,559,456			

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

421,223,717

Part VII Investments—Other Securities.	Complete if the organization ar	ا nswered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.		
(a) Description of security or category(including name of security)	y (b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(3) Other	255.045.4	
(A) Hedge Funds	256,915,1	
(B) Venture Capital /Private Equity	96,053,8	50 F
(C) Real Assets (D)	50,929,8	11 F
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line		93
Part VIII Investments—Program Related Complete if the organization answ		, line 11c. See Form 990, Part X, line 13.
(a) Description of investment		
(1)		Cost of end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line	13)	
Part IX Other Assets. Complete if the organ	ization answered 'Yes' on Form 990, (a) Description	, Part IV, line 11d See Form 990, Part X, line 15
(1)	(a) Description	(b) Book valu
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col	(B) line 15)	
Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	organization answered 'Yes' on	Form 990, Part IV, line 11e or 11f.
1. (a) Description of liabi	lity (b) Book value
(1) Federal income taxes		22 524 096
Pension Liability Refundable Advances		33,534,086 4,319,812
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line		37,853,898
2. Liability for uncertain tax positions. In Part XIII, programization's liability for uncertain tax positions und		

Part XI

2

b

5

1

2

c

d

3

4

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2018

Page 4

9,775,500

381,473,310

-5,030,326

376,442,984

344,719,913

22,805,679

321,914,234

2,604,925

324.519.159

Schedule D (Form 990) 2018

Add lines 4a and 4b .

b	Donated services and use of facilities
c	Recoveries of prior year grants
d	Other (Describe in Part XIII)
e	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on line 1 but not on Form 990, Part IX, line 25

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 . . .

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Subtract line 2e from line 1

Add lines 2a through 2d . .

Return Reference

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

2a

2b

2c 2d

4a

4b

2a

2b

2c

2d

4a

4b

Explanation

2e 3

2,604,925

-7.635.251

454,664

22,351,015

2,604,925

4c

2e

3

4c

5

9.320.836

454.664

Schedule D (Form 990) 2018	
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007697 **Software Version:** 2018v3.1

EIN: 36-2167725

Name: The Art Institute of Chicago

Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 1a Collections of art - financial statement footnote	From the Institute's audited financial statements "The value of the art objects in the permanent collection, and the holdings of the libraries, are excluded from the statements of financial position. Additions to the permanent collection are made either by gifts, beque sts, or through purchases using Institute's acquisition funds. Institute acquisition funds may be classified as with donor restrictions, in which either (i) the principal balance is to be held in perpetuity and only the income earned on principal balances may be used for acquisitions, or (ii) both the principal and earned income may be used for acquisitions, or without donor restrictions, representing funds designated by the Board to be used for acquisitions. The withdrawal of works of art from the collection of the Institute is performed in accordance with a formal policy initially adopted in 1975 and last revised in fiscial year 2019. The objects are generally offered for sale at a public auction and the proce eds from such dispositions are classified as with donor restrictions for the purchase of works of art. All works of art and certain library collections are held for public exhibition, or research, they 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. Therefore, it is not included in the statements of financial position."

Supplemental Information	
Return Reference	Explanation
Collections of art - description of	The Institute's permanent collection consists of art objects as well as the holdings of th e 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

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Supplemental Information		
Return Reference	Explanation	
Schedule D, Part V, Line 4 Intended uses of endowment funds	The Institute establishes endowment funds for the purpose of investing assets in a manner that preserves the real value of the endowment principal and provides spendable funds that can be used to fulfill the purposes for which the endowments were established. The Instit ute's Executive Committee of the Board of Trustees determines the method to be used to appropriate endowment funds for expenditure. The Institute's spendable endowment payout formula is a controlled growth distribution formula. Depending upon market conditions and the needs and available resources of the Institute, appropriations for expenditure from individual endowments may be temporarily suspended to facilitate preservation of the endowment or in excess of the spending policy as deemed prudent by the Executive Committee.	

Supplemental Information		
Return Reference	Explanation	
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	From the Institute's audited financial statements "The Institute is a not-for-profit corp oration exempt from federal income tax under Section 501(a) of the Internal Revenue Code a s an organization described in Section 501(c)(3), the Institute is similarly exempt from s tate income taxes. Despite the general exemption from income taxation, the Institute is su bject to federal and state income tax at corporate rates on its unrelated business income. Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 7 40, 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 In stitute has reported federal net operating losses ("NOLs") of approximately \$9.8 million for tax periods through June 30, 2018. The Institute does not have the ability to estimate the NOL through June 30, 2019, as the NOL calculation is reliant upon third-party informat ion, which is not yet available. These NOLs will expire, if not utilized, between the year s 2028 and 2037. The Institute has not recorded a tax benefit for these NOLs for the years ended June 30, 2019 and 2018, because it is unlikely that the Institute will be able to r ealize the benefit." The financial statements did not report uncertain tax positions.	

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Cost of Goods Sold4868825 Rental Expenses1388508 Special Events1374458 Raffles3460 -

Sι

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	Cost of Goods Sold - 4868825 Rental Expenses - 1388508 Special Events - 1374458 Raffles - 3460 PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COSTS - 14715764

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493126018120 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** The Art Institute of Chicago 36-2167725 Part I YES NO 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 Yes 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 Yes 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 has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5c c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2018)

Schedule F (Form 990 or 990-F7) (2018)

	tatement of				
	SCHEDULE F (Form 990) Statement of Activities Outside th			side the United States OMB No 15	
► Complete if the organization answered "Yes" to Form 990, Part IV, line 14 ► Attach to Form 990.				ıne 14b, 15, or 16.	2018
Department of the Treasury Internal Revenue Service	► Go to www.irs	.gov/Form990 for II	nstructions and the latest ii	nformation.	Open to Public Inspection
Name of the organization The Art Institute of Chicago				Employe 36-21677	r identification number
Part I General Informa Form 990, Part IV,		s Outside the U	Jnited States. Comple	te if the organiza	tion answered "Yes" to
1 For grantmakers. Does t	=			=	
other assistance, the grant to award the grants or ass		the grants or assis	stance, and the selection	criteria used	☐ Yes ☐ No
2 For grantmakers. Describe outside the United States	be in Part V the org	ganization's proce	dures for monitoring the	use of its grants a	nd other assistance
3 Activites per Region (The fo	llowing Part I, line 3	table can be dupli	cated if additional space is	needed)	
(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 program service, des specific type of service(s) in region	cribe for and investments in region
See Add'l Data					
Sa Sub-total D Total from continuation sheet Part I	s to	0 32			1,170,024 300,974,762
c Totals (add lines 3a and 3b)		0 34			302,144,786

Schedule F (Form 990) 2018 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. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other)

Sche	dule F (Form 990) 2018		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,"the 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)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign 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, don't file with Form 990)	Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	✓ Yes	□No

Schedule F	(Form 990) 2018	Page :
Part V	on urred by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; expenditures per region); Part II, line 1 (accounting method); Part III (accounting mn (c) (estimated number of recipients), as applicable. Also complete this part to provide see instructions).	
	ReturnReference	Explanation

Schedule F (Form 990) 2018

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 36-2167725

Name: The Art Institute of Chicago

Conf, Lectures, Other

Education

170,326

Form	000	Schodula	E Dart T	- Activities	Outcide	The United State	

(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 for region
East Asia and the Pacific	0	0	1 -	Conf, Lectures, Other	59,298

0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) North America (Canada & 0 Program Services Conf. Lectures. Other 32,728 Mexico only) |Education South Asia Conf. Lectures. Other 5.225 0 Program Services |Education

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South America 0 Program Services Conf. Lectures. Other 1.814 |Education Sub-Saharan Africa Conf. Lectures. Other 6.231 0 Program Services |Education

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 20 Program Services Exhibitions 687,607 Greenland) North America (Canada & Exhibitions 39,807 6 Program Services Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America Exhibitions 11.574 0 Program Services Sub-Saharan Africa 1 Program Services Exhibitions 13,002

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 0 Program Services |Marketing/Public Relations 15,503 Greenland) North America (Canada & Marketing/Public Relations 6.765 0 Program Services Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures ın region (by type) (i e , offices in the employees or is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific 5 Program Services **IEXHIBITIONS** 97.023 Europe (Including Iceland and 0 Program Services Member Travel 16,061 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 2.840 North America (Canada & 0 Program Services Member Travel Mexico only) Sub-Saharan Africa 4.220 0 Program Services Member Travel

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the 355 0 Program Services |Recruiting Carıbbean 115,457 East Asia and the Pacific 0 Program Services Recruiting

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 26.526 0 Program Services |Recruiting Greenland) Middle East and North Africa 4.870 0 Program Services Recruiting

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 29.970 North America (Canada & 1 |Program Services |Recruiting Mexico only) South Asia 28,939 0 Program Services Recruiting

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America 6.173 0 Program Services Recruiting East Asia and the Pacific 0 Program Services Research 2,918

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 0 Program Services 97,908 lResearch. Greenland) North America (Canada & Research 5.858 0 Program Services Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the CONF. LECTURES. OTHER 0 Program Services Carıbbean **IEDUCATION** Sub-Saharan Africa 7,221 0 Program Services Research

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific Study Trips 32,429 0 Program Services Europe (Including Iceland and 0 Program Services Study Trips 266,351 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South Asia Study Trips 49.725 0 Program Services South America 0 Program Services Study Trips 16,159

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Central America and the 0 | Passive Investments IN/A 298,746,726 Carıbbean Europe (Including Iceland and 0 .Passive Investments 94.862 IN/A Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa CONF. LECTURES. OTHER 6.647 0 Program Services **IEDUCATION** Middle East and North Africa **IRESEARCH** 66 0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific Marketing/Public Relations 448 0 Program Services East Asia and the Pacific 0 Program Services MEMBER TRAVEL 3,579

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America IRESEARCH. 1.683 0 Program Services South Asia 0 Program Services Member Travel 12,148

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South Asia **IEXHIBITIONS** 500 1 |Program Services North America (Canada & 0 PASSIVE INVESTMENTS IN/A 1,416,904 Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of fundraising, program region agents in services, grants to service(s) in region region recipients located in the region) Sub-Saharan Africa ISTUDY TRIPS 313 0 Program Services

DLN: 93493126018120

2018

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE G

(Form 990 or 990-EZ)

Go to www irs gov/Form990 for instructions and the latest information Name of the organization

Employer identification number

The	Art Institute of Chicago						36-2167725	
Pa	Fundraising Activi				answered "Yes" on Fo	rm 990,	Part IV, line 1	7.
1	Indicate whether the organiza	ation raised funds thr	ough any	y of the f	ollowing activities Check	all that ap	pply	
а	✓ Mail solicitations			e	Solicitation of non-	-governm	ent grants	
b	b Internet and email solicitations			f	Solicitation of gove	ernment g	ırants	
С	✓ Phone solicitations			g	Special fundraising	events		
d	✓ In-person solicitations							
2a	Did the organization have a wor key employees listed in Fo	vritten or oral agreem rm 990, Part VII) or e	nent with entity in	any indi connectio	vidual (including officers, on with professional fundr	directors, aising ser		s □ No
b	If "Yes," list the ten highest p to be compensated at least \$!			ndraisers) pursuant to agreements	under wh		
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont) Did ser have ody or crol of outions?	(iv) Gross receipts from activity	or re fundra	nount paid to etained by) liser listed in col (i)	(vi) Amount paid to (or retained by) organization
		T-1	Yes	No				
	SD&A Teleservices Inc 5757 W Century Blvd	Telemarketing		No	137,560		95,301	42,259
	Los Angeles, CA 90045							
	Lukens Company 2800 Shirlington Rd	Direct Marketing		No	1,295,175		365,859	929,316
	Arlıngton, VA 22206							
	Donald A Campell & CO 1 East Wacker Dr 2100	Campaign Strategy		No			24,250	-24,250
	Chicago, IL 60601							
Tot	al			>	1,432,735		485,410	947,325

licensing

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

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

Sche	dule G (Form 990 or 990-EZ) 2018					P	age 3
11	Does the organization conduct gaming	activities with nonmembers	?		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming		member of a partnership or other entity		□Yes		
13	Indicate the percentage of gaming activ	rity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
14	Enter the name and address of the pers	son who prepares the organ	ızatıon's gamıng/special events books and re	cords			
	Name ►						
	Address •						
15a	Does the organization have a contract virevenue?	with a third party from whor	m the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		and the	e			
		·					
С	If "Yes," enter name and address of the	•					
	Name •						
	Address ▶						
16	Gaming manager information						
	Name ▶						
	Gaming manager compensation ► \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	Is the organization required under state	e law to make charitable dis	tributions from the gaming proceeds to		_	_	
	retain the state gaming license?		to the other countries and the countries are		☐ Yes	□ No	
b	in the organization's own exempt activi		ted to other exempt organizations or spent \$				
Par	t IV Supplemental Informatio	n. Provide the explanati	ons required by Part I, line 2b, columns cable. Also provide any additional infor				 S.
	Return Reference		Explanation				
	or payment of expenses	CONTRACT AND OTHER AD OVERHEAD PROFESSIONAI \$36,214 RESPECTIVELY ,LL RATE PER CONTRACT AND	AIC PAYS FUNDRAISING CONSULTANT FEES MINISTRATIVE COSTS SUCH AS POSTAGE, P L SERVICES FEES AND ADMINISTRATIVE COS JKENS COMPANY-AIC PAYS FUNDRAISING CO COSTS SUCH AS POSTAGE AND PRINTING P AGE AND PRINTING COSTS WERE \$392,781,	RINTIN STS WE DNSULT ROFES	IG, AND OF ERE \$59,08 FANT FEES	FICE 7 AND AT A STA	

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493126018120 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ► Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number The Art Institute of Chicago 36-2167725 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (2)(4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2010					Page Z
Part III Grants and Other Assistance to Part III can be duplicated if additio			inization answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	, (f) Description of noncash assistance
(1) Faculty Enrichment Grants	70	100,000		N/A	N/A
(2) Student Scholarships and Stipends	3381	48,682,843		N/A	N/A
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Scholarships and stipends are available to undergraduate students and graduate students through the admissions process. Once awarded, depending on the type of aid,

payment is applied or paid to the student. All students receiving scholarships and stipends have been selected on a non-discriminatory basis. Faculty enrichment grant opportunities are available to full-time and part-time faculty teaching in a degree program. Selections are based on the merit of the proposal and reviewed by members of a selection committee Payment are monitored by the Dean's office and all payments are approved by the Vice Provost and School Finance department before

payment is credited to either the student account or directly to the student. All payments are monitored and approved by the Financial Services department before

Page 2

Schedule I (Form 990) 2018

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(7)

Explanation

lpavment is made

Schedule I (Form 990) 2018

Part IV

grant funds

Return Reference

Schedule I, Part I, Line 2

Procedures for monitoring use of

efil	e GRAPHIC pi	int - DO NOT PROCESS	As Filed Dat	:a -	DLN: 934	9312	26018	120
Sch	edule J	Co	mpensat	ion Information	МО	IB No	1545-0	0047
(For	n 990)	For certain Office	rs, Directors, 1	Trustees, Key Employees, and Hig	hest			
		Complete if the ora	Compense anization answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20	18	₹ .
			▶ Attach	n to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	<u>v/Form990</u> tor	r instructions and the latest inform	nation.		to Pul ectio	
	ne of the organiz				Employer identificat			
The	Art Institute of Chic	ago			36-2167725			
Pa	rt I Questi	ons Regarding Compensat	tion					
							Yes	No
1a				f the following to or for a person listen by relevant information regarding thes				
		s or charter travel	$ \mathbf{\nabla}$	Housing allowance or residence for	personal use			
	_	companions		Payments for business use of persoi				
		nification and gross-up payments	; ⊻	Health or social club dues or initiation				
	☐ Discretion	nary spending account		Personal services (e g , maid, chauf	reur, cner)			
b		xes in line 1a are checked, did th all of the expenses described abo		follow a written policy regarding paym nplete Part III to explain	nent or reimbursement	1 b	Yes	
2				or allowing expenses incurred by all or, regarding the items checked in line	. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Directo	or, regarding the items checked in line	e la?			
3				ed to establish the compensation of th	ne			
	_	•		not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	☑ Compens	ation committee		Written ampleyment centract				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensa	tion committee			
4		-	990, Part VII, Se	ection A, line 1a, with respect to the fi				
	related organiza		,	, , ,				
а	Receive a sever	ance payment or change-of-cont	rol payment?			4a	Yes	
b	Participate in, o	r receive payment from, a supple	emental nonqua	lified retirement plan?		4b	Yes	
С		r receive payment from, an equi		_		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	I provide the app	plicable amounts for each item in Part	: 111			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5	For persons liste		n A, line 1a, did	the organization pay or accrue any				
а	The organization	_				5a		No
b	Any related orga					5b		No
		5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	17				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Yes		the organization provide any nonfixed art III	d	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8	Yes	
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follow	w the rebuttable	presumption procedure described in	Regulations section	9	Yes	
For I	Danerwork Redi	iction Act Notice, see the Inst	tructions for Fo	orm 990 Cat No. 5	0053T Schedule 1	(Form	990)	2018

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting							
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	≥ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1		1	I	1
							!
				+			
	+			+			
				+			
1-				+			
1							
			1				

	rage of				
art III Supplemental Information					
ovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				

Schedule J, Part I, Line 1a First-class | First class travel is allowed under limited circumstances as set forth in the travel policy

Page 3

Schedule J (Form 990) 2018

or charter travel

Return Reference	Explanation
Schedule J, Part I, Line 1a Travel for	The Presidents of the Museum and the School and the Chancellor are allowed to have their partners accompany them on business trips if their presence is necessary
companions	for a specific, bonafide purpose of the Institute

Return Reference	Explanation
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	The President of the School is paid a housing allowance of \$4000 per month which is treated as taxable compensation

Return Reference	Explanation
social club dues or initiation fees	Athletic, social, or other club fees incurred by the President of the School, the President of the Museum, and the Chancellor are reimbursed to the extent they are used for business purposes. In addition, the employment contracts for the President of the School and the Chancellor allow for reimbursement for up to \$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.

Return Reference	Explanation
Schedule J, Part I, Line 4a Severance or change-of-control payment	Severance was paid to Craig Barton in the amount of \$230,765

Return Reference	Explanation
Supplemental nonqualified retirement plan	As noted in the audited financial statements, a supplemental non qualified retirement plan exists for the benefit of a select group of management or highly compensated employees whose benefits under other Institute qualified retirement plans are limited by the IRS. Employees are eligible if their compensation for a plan year is in excess of the IRS limits under Code Section 401(a)(17), if they received a benefit accrual or employer contribution under other Institute qualified plans, and if they have not voluntarily terminated employment prior to the first business day following the plan year. Benefits are calculated based on the excess of benefits that would be provided under Institute qualified plans if IRS compensation limits did not exist. The following individuals received payments under the supplemental retirement plan. James Rondeau amount paid in calendar year 2018 of \$150,000 Julia E. Getzels amount paid in calendar year 2018 of \$82,649 Elissa Tenny amount paid in calendar year 2018 of \$22,200 Eve Jeffers amount paid in calendar year 2018 of \$23,344 Craig Barton amount paid in calendar year 2018 of \$675 Andrew Simnick amount paid in calendar year 2018 of \$713 Walter Massey amount paid in calendar year 2018 of \$270,985

Return Reference	Explanation
	The President, Museum and the Provost were paid their salaries under contracts that were subject to the initial contract exception. As noted in 4A above, the Provost was paid severance under a separate agreement

Software ID: 18007697 **Software Version:** 2018v3.1

EIN: 36-2167725

Name: The Art Institute of Chicago

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

•	; J,		irectors, Trustees, K					(-)
(A) Name and Title	ŀ		of W-2 and/or 1099-MISO		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficites		reported as deferred on prior Form 990
James Rondeau	(1)	734,407	0	170,224	68,000	8,057	980,688	0
President, Museum	(11)	0	0	0	0	0	0	0
Elissa Tenny	(1)	531,517	0	137,844	24,300	17,936	711,597	0
President, School	(11)	0	0	0	0	0	0	0
Julia Getzels	(1)	396,619	0	103,085	104,000	20,840	624,544	0
EVP & General Counsel- Ended 6/2019	(11)	0	0	0	0	0	0	0
Alexandra Holt	(1)	289,778	0	604	20,693	8,132	319,207	0
EVP, Finance & Admin	(11)	0	0	0	0	0	0	0
Lisa Wainwright	(1)	252,698	0	902	23,454	17,518	294,572	0
Dean of Faculty/VP Acad Admin	(11)	0	0	0	0	0	0	0
Brian Esker	(1)	224,583	0	19,531	76,000	14,961	335,075	0
VP of Finance & Admin, School	(11)	0	0	0	 0	0	0	0
Rose Milkowski	(1)	239,971	o	532	21,855	3,471	265,829	0
VP for Enrollment Management	(11)	0	0	0	0	0	0	0
Thomas Buechele	(1)	212,856	0	4,556	58,000	21,621	297,033	0
VP for Campus Operations, School	(11)	0	0	0	0	0	0	0
Evelyn Jeffers	(1)	523,882	0	44,888	24,750	17,928	611,448	0
VP for Museum Development	(11)	0		0	0	0	0	0
Michael Nicolai	(1)	216,502	0	21,536	59,000	21,022	318,060	0
Chief Human Resources	(II)	0		0	0			0
Officer Andrew Simnick	(1)	301,559	0	1,887	24,722	23,897	352,065	0
Sr VP for Finance, Strategy,	(II)	0		0	0	0	0	0
& Ops Sarah Guernsey	(1)	252,081	0	1,753	72,000	19,416	345,250	0
Deputy Director, Curatorial	(II)	0		0	0			
Affairs Craig Barton	(1)	158,206	0	233,301	11,939	7,761	411,207	0
Provost-Ended 7/2018	(11)	0						
Kırstıe Lytwynec	(1)	255,904	0	0	24,758	9,315	289,977	0
VP and General Manager,	(II)	0						
Retail Russell Collett	(1)	204,840	0	809	18,604	1,892	226,145	0
VP of Operations	(11)	0						
Ann Goldstein	(1)	302,579	0	2,040	21,689	13,468	339,776	0
Deputy Director, Chair & Curator Modern & Contemporary Art	(11)	0	0	0	0	0	0	0
Tao Wang	(1)	193,372	0	19,364	19,373	12,357	244,466	0
Chair of Asian Art/Executive Director Initiatives in Asia	(11)	0	0	0	0	0	0	0
Maria Simon	(1)	206,289	0	2,099	41,000	20,037	269,425	0
Associate General Counsel	(II)	0			0		· · · · · · · · · · · · · · · · · · ·	ი
Paul Coffey	(1)	226,012	0	2,319	78,000	17,516	323,847	0
Vice Provost	(11)	0	0	0	0	0	0	0
Eugene Adams	(1)	205,378	0	20,687	88,000	26,083	340,148	0
Chief Information Officer	(11)	0		0	0	0	0	0
			,	<u> </u>	<u> </u>	<u> </u>		<u> </u>

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D)column (B) (i) Base Compensation (iii) reported as deferred on compensation Other reportable Bonus & incentive prior Form 990 compensation compensation Deborah Johnston 112.575 9,004 13,361 7.912 142,852 Former Controller

10,609

404,154

81.732

280,215

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

113.324

Walter Massey

Chancellor, Former President, SAIC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493126018120 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule K Supplemental Information on Tax-Exempt Bonds (Form 990) **2018** ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open to Public ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization Employer identification number The Art Institute of Chicago 36-2167725 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No 113.537.854 Refund 10/15/1992, 2/23/1995, Χ Illinois Finance Authority 86-1091967 45200F3N7 06-09-2010 Χ Χ and 3/27/1996 Bonds, Adv Refund Portion of 2/9/2000 Series 2000A Bonds Illinois Finance Authority 86-1091967 45203HMP4 10-18-2012 66,292,422 Advance refund portions of 3/18/98 Χ Χ Χ Srs 1998A, 2/9/00 Srs 2000A, 7/9/03 Srs 2003A, 5/20/10 Srs 2010B Illinois Finance Authority 86-1091967 45204EHD3 08-25-2016 42,808,133 Advance refund Series 2009A Х Χ Χ Bonds issued 3/26/2009 Part ${
m I\hspace{-.1em}I}$ **Proceeds** C 60,595,000 28,255,000 2 135,000 3 66,292,422 113,537,854 42,808,133 5 6 7 4,760 8 9 5,986 10 11 113,531,868 66,292,422 42.803.373 12 13 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ Χ Χ 14 Were the bonds issued as part of an advance refunding issue? 15 Χ Χ Χ Χ Х Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Х Χ Χ Private Business Use Part Ⅲ Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Are there any lease arrangements that may result in private business use of bond-financed

Cat No 50193E

Schedule K (Form 990) 2018

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

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?...

Rebate not due yet?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government 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)

Does the bond issue meet the private security or payment test? . . . Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

b

C

d

6

Part IV

b

C

Arbitrage

Page 2

D

D

Schedule K (Form 990) 2018

No

Yes

0 %

0 %

0 %

Α

No

Χ

Χ

Χ

Χ

Х

Yes

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В

No

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Yes

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C

No

Χ

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Yes

Х

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Were gross proceeds invested in a guaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

the GIC satisfied?

requirements of section 148? . . .

Return Reference

Schedule K, Part IV, Line 6 Columns A

В

Nο

Explanation

No

Χ

Х

Yes

Χ

Yes

No

No

Yes

Х

No

Yes

Χ

Х

This question is being answered without regard to yield-restricted advance refunding escrow financed with proceeds of the bonds

Yes

Χ

Χ

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Page 3

No

Nο

D

Yes

Yes

Schedule K (Form 990) 2018

(GIC)?

period?

Part V

Part VI

& C

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN A	Issuer name Illinois Finance Authority The calculation for computing no rebate due was performed on 07/24/2015

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN B	Issuer name Illinois Finance Authority The calculation for computing no rebate due was performed on 10/18/2017

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Schedule L Form 990 or 990	0-EZ) ► Comple			1S with In				5a, 2	25b, 26		MB No 1	.545-0047	
			28b, or 28	c, or Form 99 h to Form 99	0-EZ, Part V,	line 38a or 4		,	·		20	18	
		⊳G o t	o <u>www.irs.</u>	gov/Form990	of for the lates	st informatio	n.						
epartment of the Tre iternal Revenue Serv	I									· ·		o Public ection	
Name of the org	anization						Er	nplo	yer ide	ntifica	tion nu		
The Art Institute of	Cnicago						36	-216	7725				
	ss Benefit Tra												
-	lete if the organization) Name of disqual			orm 990, Part Relationship be					rt V, lir escript		(4)	Corrected	
1 (a) Name of disquar	med person	(6)		organization	illed person al			ansacti		Ye		
							+						
Cor rep (a) Name of	ans to and/or nplete if the organ orted an amount of (b) Relationship with organization	nization answe on Form 990, (c) Purpose	ered "Yes" or Part X, line ! (d) Loan i	n Form 990-EZ, 5, 6, or 22	(e)Original principal amount	8a, or Form 99 (f)Balance due		In	(I Appro			(i)Written agreement?	
			То	From	-		Yes	No	comm Yes	No No			
			10	110111			163	NO	163	NO	163	NO	
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otal	•	•	•	•	\$			•		•			
	ints or Assista		_			line 27							
Con	nplete if the org		swered "Ye		990, Part IV,	line 27.	of assi	stanc	e	(e) Pu	rpose of	assistance	
Con	nplete If the org	anızatıon an) Relatıonship terested perso	swered "Ye between on and the	es" on Form 9	990, Part IV,		of assi	stanc	e	(e) Pu	rpose of	assistance	
Con a) Name of Inte	nplete If the org	anızatıon an) Relatıonshı	swered "Ye between on and the	es" on Form 9	990, Part IV, of assistance	(d) Type		stanc			· 		
Con a) Name of Inter	nplete If the org	anızatıon an) Relatıonship terested perso	swered "Ye between on and the	es" on Form 9	990, Part IV, of assistance			stanc	Ti	ution r	· 	for family	
	nplete If the org	anızatıon an) Relatıonship terested perso	swered "Ye between on and the	es" on Form 9	990, Part IV, of assistance	(d) Type		stanc	Ti	ution r	emissior	for family	
Con a) Name of Inter	nplete If the org	anızatıon an) Relatıonship terested perso	swered "Ye between on and the	es" on Form 9	990, Part IV, of assistance	(d) Type		stanc	Ti	ution r	emissior	for family	
Con a) Name of Inter	nplete If the org	anızatıon an) Relatıonship terested perso	swered "Ye between on and the	es" on Form 9	990, Part IV, of assistance	(d) Type		stanc	Ti	ution r	emissior	for family	

Complete if the organization			a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organiz rever	ation's
				Yes	No
(1) Peter Haratonik	Family Member of Elissa Tenny, Current Officer	33,447	Employee Compensation		No
(2) Tess Haratonık	Family Member of Elissa Tenny, Current Officer	10,716	Employee Compensation		No
(3) Silvia Beltrametti	Family Member of Jay Frederick Krehbiel,	11,450	Employee Compensation		No

Current Trustee

Schedule I (Form 990 or 990-F7) 2018

Supplemental Information

Explanation

Part V Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

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(For	m 990)	►Complete if the		ons answered "Yes" on Fo		9 or 30) .	20	18	
		► Attach to Form	990.							
	tment of the Treasury al Revenue Service	▶Go to <u>www.irs.c</u>	gov/Form9	<u>190</u> for the latest informat	ion.			Open to		
	e of the organizat					Emplo	yer ident	tification n	umbei	-
ine A	rt Institute of Chicag	JO				36-216	7725			
Pa	rt I Types	of Property								
			(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	n		(d) d of determi ontribution a		s
1	Art—Works of art	t	X	1,520		Other	- SEE PAI	RT II		
2	Art—Historical tre	easures .		=,===						
3	Art—Fractional in	nterests								
4	Books and public	ations	Х		3,468	Marke	t value			
5	Clothing and hou									
6	goods Cars and other v									
7	Boats and planes									
8	Intellectual prope									
9	Securities—Public	,	X	153	12,286,512	Marke	t value			
	Securities—Close	•		133	12,200,312	- I I I I I I I I	.c varac			
	Securities—Partr	nership, LLC,								
12	Securities—Misce									
13	Qualified conserve contribution—Hi structures	vation storic								
14	Qualified conserve contribution—Of	/ation								
15	Real estate—Res	idential .								
16	Real estate—Con									
17	Real estate—Oth									
18	Collectibles		X	1	500,000	Marke	t value			
19	Food inventory									
20 21	Drugs and medic	.ai supplies .								
	Historical artifact	• • • •								
	Scientific specim									
	Archeological art									
	Other ► (artmental Supplies	s)	Х	21	47,775	Marke	t value			
	Other ► (nal Events)		Х	16	20,837	Marke	t value			
27	Other ▶ ()								
28	Other ▶ ()								
29				ation during the tax year for 3, Part IV, Donee Acknowled		29				33
20.	Dumma History	al, al alia a			and the second of the second of the	ا اداما	00 H 1		Yes	No
30a	must hold for at	least three years fi	rom the date	y contribution any property re e of the initial contribution, a	and which is not required to					No
b	If "Yes," describ	e the arrangement	ın Part II					504		
31	Does the organi	zation have a gift a	cceptance p	olicy that requires the reviev	v of any nonstandard contri	butions	;?	31	Yes	
32a		zation hire or use th		or related organizations to so	olicit, process, or sell nonca	sh •		32a		No
b	If "Yes," describ	e ın Part II								
33	If the organizati describe in Part	·	n amount in	column (c) for a type of pro	perty for which column (a)	ıs checl	ked,			
Eor D		on Act Notice, see th	e Instruction	ne for Form 990	Cat No. 512271		Schar	dule M (Form	. 000)	2018)

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SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to specific of Form 990 or 990-EZ or to provide any additional information Attach to Form 990 or 990-EZ.	questions on mation.	OMB No 1545-0047 2018 Open to Public Inspection
Name l Bf the of g The Art Institute of	Chicago	36-2167725	dentification number
990 Schedule	e O, Supplemental Information		
Return Reference	Explanation		
Form 990, Part III, Line 1 Organization Mission	The purposes for which The Art Institute of Chicago is formed are To found, build, r in and operate museums, schools, and libraries of art and theatres, to provide suppilities in connection therewith, to conduct appropriate activities conducive to the artistic development of the region, and to conduct and participate in activities of national international significance, To form, conserve, research, publish, and exhibit a permacollection of objects of art of all kinds, to present temporary exhibitions including loaned objects of art of all kinds, and to cultivate and extend the arts by appropriate me, To establish and conduct comprehensive programs of education, including preparaisual artists, teachers of art, and designers, to provide education services in written, poken and media formats, To provide lectures, instruction and entertainment, including matic, film and musical performances of all kinds, which complement and further the I purposes of the Institute, To receive in trust property of all kinds and to exercise all necessary powers as trustee for such trust estates whose objects are related to the erance of the general purposes of the Institute or for the establishment or maintenar works of art	ort fac it and nent eans ation of v s ling dra genera furth	

Doturn

Reference	Ехріанацон
l 🗕	The Art Institute of Chicago is not required to file Form 8899. The Institute receives con
l Part V. Line	I tributions of intellectual property from time to time, however, the type of property contr

Evolunation

Part V, Line
7g Intellectual property from time to time, however, the type of property contr
ibuted does not meet the definition of "qualified intellectual property" for Form 8899 fil
Intellectual
Property

Return Reference	Explanation
Form 990, Part VI, Line 15b Compensation Review & Approval Process - Key Employees	In addition to the process described for Line 15A, for key employees whose compensation is not reviewed and approved by the Compensation and Benefits Committee, their compensation is generally based on current independent salary surveys that are compiled by and maintain ed by the Institute's Human Resources Department and is decided by the employee's supervis or based on factors such as experience and performance

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	As provided in the By-Laws, during the intervals between the meetings of the Board of Trus tees, the Executive Committee shall possess and may exercise, in all cases in which specia. I directions have not been given by the Board, all the powers of the Board of Trustees in the management and direction of the Art Institute, and in respect to all other business and diffairs of the Art Institute, in such manner as shall be for its best interest, except the filling of any vacancy on the Board of Trustees, the amendment of the bylaws or the articles of incorporation, and all other powers and authorities, the exercise of which by the Executive Committee is prohibited by law. The Executive Committee shall consist only of Trustees. Its members shall be the Chairman of the Board of Trustees, the Chairmen of those Standing Committees with responsibilities for both the Museum and the School, the Vice Chairmen of the Board of Trustees, and the Chairman of the Board of Governors of the School If any of such individuals is not a Trustee, he or she may be invited to attend Executive Committee meetings from time to time to provide a report for his or her committee.

persons

Return Reference	Explanation
Form 990, Part	Caryn Harris and Stephanie Field Harris - Family relationship, Walter Massey and Cary McMi
VI, Line 2	llan - Business relationship, Matthew R. Gibson and Thomas Pritzker - Business relationshi
Family/business	p, Jay Frederick Krehbiel and David Vitale - Business relationship, Thomas Pritzker and Ca
relationships	ry McMillan - Business relationship, Betsy Bergman Rosenfield and Andrew Rosenfield - Fami
amongst	ly relationship, A. Steven Crown and Louis B. Susman - Business relationship, Anita Sinha
ınterested	and Prabhakant Sınha - Family relationship, Gordon Segal and Eric Lefkofsky - Business rel

ationship, Sarah Garvey and Eric McKissack - Business relationship

990 Schedule O, Supplemental Information

Return

Reference	Explanation
Form 990, Part VI, Line 4 Significant changes to organizational documents	The Institute's by laws were amended on September 12, 2018 There were no material changes resulting from the amendment

Explanation

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The 990 is prepared internally by the Institute's Accounting Office and reviewed by the EV P for Finance and Administration and an independent professional accounting firm. The Institute's management confers with legal and bond counsel as needed to complete the tax filing. A full version of the Form 990 is presented to and reviewed by the Institute's Audit an d Risk Committee for comment, with the single exception that the Schedule B, Schedule of C ontributors, is redacted to omit the names and addresses of the individual contributors to preserve donor anonymity. An unmodified version of the complete 990 is reviewed by the Audit and Risk Committee Chair. Any questions or concerns identified by the Audit and Risk C ommittee are addressed and all appropriate changes are incorporated into the Form 990. After all input has been addressed, the final public disclosure version of the 990 is distributed to all voting members of the Institute's board of Trustees prior to filing with the IRS. After the final version of the Form 990 has been distributed and time for comments has expired, management and staff file the final Form 990 as required.

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	Under the Institute's Conflict of Interest Policy, all members of the Board of Trustees, B oard of Governors, and Standing and Advisory Committees, and all officers and assistant of ficers of the Institute (collectively known as "Related Parties") must act in the best int erests of the Institute, without regard to their business, family, or personal activities and concerns If a Related Party believes he or she has an actual or potential financial c onflict of interest, the Related Party shall immediately disclose such conflict to the Cha irman 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. When such matters are considered, the Related Party shall not be counted for purposes of determining whether there is a quorum. Financial interest 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 annual by to all Related Parties. All voting Trustees, members of the Board of Governors, members of standing committees, Officers, and Vice Presidents are required to attest annually to their familiarity with the policy and to provide any information the Institute deems relev ant concerning any possible conflicts of interest. The annual conflict of interest replies are logged and monitored by the Institute's General Counsel's office.

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Institute's Executive Committee, composed entirely of independent Trustees, approves c ompensation for the President and Director of the Museum, the President of the School, and for the Chancellor The Institute's Compensation and Benefits Committee, also composed entirely of independent Trustees, approves compensation for other employed officers and for certain key employees. The two committees use the following process in considering compensation. The Institute's outside compensation expert prepares a written compensation analysis report for each person whose compensation is to be presented to either the Executive Committee or the Compensation and Benefits 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 reasonablenes of the proposed compensation. The report is provided to the relevant 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 Chief Human Resources Officer 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 the decisions on compensation are documented in contemporaneous meeting minutes. In the case of the President and the Director of the Museum and the President of the School, the Chancellor, the Provost, and the Dean of Faculty of the School, the decisions may be reflected in employment contracts as well.

990 Schedule O, Supplemental Information Return Explanation

Reference

the public

Reference	
Form 990,	The Institute's governing documents are available to the public via written request to the
Part VI, Line	Institute and in addition, in part through applicable governmental agencies. The Institut
19 Required	e's financial statements are available to the public via the Institute's own website, via
documents	the Illinois Attorney General's website and upon written request. The conflict of interest
available to	policy is available to the public upon written request to the Institute

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a, Column (B) Hours Per Week	The amount of hours per week devoted to position has been noted as 1 hour for all Trustees The amount of actual hours per week devoted by each Trustee varies depending on the position held and the committees the Trustee devotes time to

Return Reference	Explanation
Form 990,	All other - Total Revenue 3586965, Related or Exempt Function Revenue 3586965, Unrelated

Part VIII, Line
2f Other
Program
Service
Revenue

990 Schedule O, Supplemental Information

Return
Reference

Explanation

	Pension Related Changes Other Than Net Periodic Pension Cost14715764,
Part XI, Line	
9 Other	
changes in	
net assets or	
fund	
balances	

Return Reference	Explanation
Schedule B, 501(c)(3) Special Rule Explanation Special Rules, Box 1	The Art Institute of Chicago is exempt under two categories listed in Schedule A Part I b ox 2, which describes a school under Section 170 (b) (1) (A) (ii) and box 7, which describes an organization that normally receives a substantial part of its support from a governmental unit or from the general public under Section 170 (b) (1) (A) (vi) The Art Institut e of Chicago has selected box 2, consistent with the instructions that only one applicable box should be checked. Since the Institute is also exempt under Schedule A, Part I box 7, Schedule B Parts I and II have been completed under the Special Rules Box 1 as the Institute has met the 33 1/3% support test of the regulations under sections 509 (a) (1) / 170 (b) (1) (A) (vi)

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -										DLN: 93493	126018	3120
SCHEDULE R (Form 990)	> (Related C	_		s" on Form	990, Part		-		37.		20	1545-004	17
Department of the Treasury Internal Revenue Service		► Go to <u>www</u>	irs.gov/				e latest info	ormation.				Open to	o Public ection	С
Name of the organization The Art Institute of Chicago									Empl	loyer identif	ication	number		
										167725				
Part I Identification See Additional Data Table	of Disregarded E	ntities Complete if	he organ	ization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
	(a) EIN (ıf applıcable) of dısr	egarded entity		(b) Primary a		Legal dom	c) nicile (state n country)	(d) Total inc	ome	(e) End-of-year as	sets	(f Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Ex npt organizations di		s Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part IV	/, line 34 be	cause	it had one or	more	
Name, address, and	(a) d EIN of related organızatı	ion	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public ch	(e) narity status n 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?
													Yes	No
For Paperwork Reduction Ac	t Notice, see the Inc	structions for Form 9	90.		Ca	it No 5013	 35Y				Sch	edule R (Form	990) 20	18

(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predom Income(r unrela excluded tax ur sections	elated, ited, d from ider s 512-	(f) Share of total income	(g) Share of e end-of-year assets	(† Disprop alloca	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	agıng	(k Percei owne	ntage
					514	+)			Yes	No		Yes	No		
								+							—
Part IV Identification of Related Organ because it had one or more related							ation ans	wered "Yes	on Fo	orm 99	90, Part IV	line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	Lo doi (state o	(c) egal micile or foreign intry)		(d) controlling entity	Type (C co	(e) of entity rp, S corp, trust)	(f) Share of tota Income		(g) e of end- year assets	-of- Perce	h) ntage ership	(1	(i) ection 3) con entit	512(l itrolle ty?
1)AIC - PP INC	Investments		CJ	The A			C Corporation		0		1 100 %			Yes 'es	No
190 Elgin Avenue George Town, Grand Cayman KY19005 23 98-0574645				of Chi	cago										
(2)Perpetual Trusts Held by Thırd Parties (7)	Fundraising		IL	The Al	t Institute cago	Trust							Y	'es	
(3)Charitable Remainder Trust (1)	Fundraising		IL	The Al	t Institute cago	Trust							Y	'es	
						1							1		

(d) Method of determining amount involved

Schedule R (Form 990) 2018

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, 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 organizations listed in Parts II-IV?			1						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a	No						
b Gift, grant, or capital contribution to related organization(s)		1 b	No						
c Gift, grant, or capital contribution from related organization(s)		1c	No						
d Loans or loan guarantees to or for related organization(s)		1d	No						
e Loans or loan guarantees by related organization(s)		1e	No						
f Dividends from related organization(s)		1f	No						
g Sale of assets to related organization(s)		1g	No						

Loans or loan guarantees to or for related organization(s)	•			•			•	•	•					•				•	•	•	•		•				1a		NO
Loans or loan guarantees by related organization(s) .																											1e		No
Dividends from related organization(s)		•				•																					1 f		No
Sale of assets to related organization(s)																											1 g		No
Purchase of assets from related organization(s)																											1h		No
Exchange of assets with related organization(s)																											1 i		No
	Loans or loan guarantees by related organization(s)	Dividends from related organization(s)	Loans or loan guarantees by related organization(s)	Loans or loan guarantees by related organization(s)																									

		\Box	
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	No
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
0	Sharing of paid employees with related organization(s)	10	No

g	Sale of assets to related organization(s)	1-9		140
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			

(b) Transaction type (a-s)

(c) Amount involved

(a) Name of related organization

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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, unrelated, excluded from tax under sections 512-	01	(e) e all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2018



Additional Data

Software ID: 18007697

Name, address, and EIN (if applicable) of disregarded entity

Software Version: 2018v3.1

EIN: 36-2167725

(b)

Primary Activity

Name: The Art Institute of Chicago

Investments

Investments

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(1) AICCB LLC

(1) AICGS LLC

36-2167725 (3) AIC AA LLC

36-2167725 (4) AIC AX LLC

36-2167725

36-2167725

36-2167725

36-2167725

90-0708171

(5) AIC BLK LLC

111 South Michigan Avenue Chicago, IL 60603 20-5052348

111 South Michigan Avenue Chicago, IL 60603 36-2167725 (2) AICHP LLC

Investments DE 310,729 The Art Institute of Chicago 111 South Michigan Avenue Chicago, IL 60603 734,426 The Art Institute of Chicago Investments DE 231,311 111 South Michigan Avenue Chicago, IL 60603 Investments DE 167,984 341,675 The Art Institute of Chicago 111 South Michigan Aveue Chicago, IL 60603 1,017,668 The Art Institute of Chicago Investments DE 261,661 111 South Michigan Avenue Chicago, IL 60603 (6) AIC MS SS LLC DE 0 944,544 The Art Institute of Chicago Investments 111 South Michigan Aveune Chicago, IL 60603 (7) AIC GS MEZZ LLC 134,516 The Art Institute of Chicago Investments DE 31,589 111 South Michigan Avenue Chicago, IL 60603 (8) AIC Ventures LLC Consulting ΙL 0 0 The Art Institute of Chicago 111 South Michigan Avenue Chicago, IL 60603

(c)

Legal Domicile

(State

or Foreign Country)

DE

DE

(d)

Total income

480,498

200,841

0

(e)

End-of-year assets

(f)

Direct Controllina

Entity

600,000 The Art Institute of Chicago

1,329,615 The Art Institute of Chicago