

****PUBLIC DISCLOSURE COPY****

Form **990**

OMB No. 1545-0047

Return of Organization Exempt From Income Tax

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

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning 7/01, 2010, and ending 6/30, 2011

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

The Art Institute of Chicago
111 South Michigan Avenue
Chicago, IL 60603

D Employer Identification Number
36-2167725

E Telephone number
312-443-3600

G Gross receipts \$ 814,702,358.

F Name and address of principal officer: Eric Anyah
Same As C Above

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If 'No,' attach a list. (see instructions)

I Tax-exempt status 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ www.artic.edu and www.saic.edu

H(c) Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶

L Year of Formation: 1879 **M** State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities: To found, build, maintain and operate museums, schools, and libraries of art and theatres.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	42
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	40
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	3,135
6 Total number of volunteers (estimate if necessary)	6	794
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,395,256.
b Net unrelated business taxable income from Form 990-T, line 34	7b	-413,822.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	66,514,047.	79,911,597.
9 Program service revenue (Part VIII, line 2g)	135,434,821.	214,444,567.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	43,632,738.	94,124,670.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,809,074.	8,604,127.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	256,390,680.	397,084,961.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	27,712,714.	30,538,203.
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	93,657,225.	94,840,270.
16a Professional fundraising fees (Part IX, column (A), line 11e)	195,599.	252,414.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>5,821,220.</u>		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	107,700,445.	187,280,546.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	229,265,983.	312,911,433.
19 Revenue less expenses. Subtract line 18 from line 12	27,124,697.	84,173,528.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1268164380.	1,414,483,069.
21 Total liabilities (Part X, line 26)	420,837,362.	408,370,577.
22 Net assets or fund balances. Subtract line 21 from line 20	847,327,018.	1,006,112,492.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: Patricia Rowlands Lawson Date: _____
 Type or print name and title: Controller

Paid Preparer Use Only

Print/Type preparer's name: DELOITTE TAX, LLP Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: _____

Firm's name: _____ Firm's EIN: _____
 Firm's address: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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Form **8453-EO**

Exempt Organization Declaration and Signature for Electronic Filing

OMB No. 1545-1879

For calendar year 2010, or tax year beginning 7/01, 2010, and ending 6/30, 2011

2010

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

▶ See instructions

Department of the Treasury
Internal Revenue Service

Name of exempt organization

The Art Institute of Chicago

Employer identification number

36-2167725

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

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

1a Form 990 check here .. ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>397,084,961.</u>
2a Form 990-EZ check here .. ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a Form 1120-POL check here ... ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	_____
4a Form 990-PF check here .. ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5) ...	4b	_____
5a Form 8868 check here .. ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	_____

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here

_____ 5/9/12 ▶ Controller
Signature of officer Date Title

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

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

ERO's Use Only	ERO's signature ▶	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code	EIN		Phone no.	

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶		Phone no.	
	Firm's address ▶				

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

Form 8453-EO (2010)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

See Schedule O

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

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

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

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

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

4a (Code:) (Expenses \$ 162,408,317. including grants of \$ 63,490.) (Revenue \$ 95,000,943.)

The Museum provides a variety of educational programs focusing on the collection, conservation, research, publication, exhibition, and interpretation of the museum's internationally significant permanent collection of art. The Museum also presents temporary exhibitions of international importance, which include loaned objects from other collections. Included in the exhibition programming for fiscal year 2011 were several non-ticketed temporary exhibitions, including Hyperlinks: Architecture and Design; Henri Cartier-Bresson: The Modern Century; Kings, Queens and Courtiers: Art in Early Renaissance France; Richard Hawkins: Third Mind; and Arms and Armor: Highlights of the Permanent Collection. During fiscal year 2011, the Museum served 1.4 million visitors.

4b (Code:) (Expenses \$ 123,744,687. including grants of \$ 30,474,713.) (Revenue \$ 125,416,465.)

The School of the Art Institute is an accredited post-secondary institution of higher learning which provides both graduate and undergraduate study. This curriculum provides for the preparation of visual artists, teachers of art, designers and others in areas that include written, spoken, and media formats. Overall full-time-equivalent enrollment of degree-seeking students was 2,862, an increase of 4% over the prior year. The curriculum has attracted students from over 50 countries.

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

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

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

4e Total program service expenses ▶ 286,153,004.

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Part IV Checklist of Required Schedules

		Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A.</i>	1	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions).	2	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>	3		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II.</i>	4	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>	5		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I.</i>	6		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>	7		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>	8	X	
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>	9		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	10	X	
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>	11a	X	
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11b	X	
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII.</i>	11c		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX.</i>	11d		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X.</i>	11e	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11f	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.</i>	12a		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	12b	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>	13	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Parts I and IV.</i>	14b	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Parts II and IV.</i>	15		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Parts III and IV.</i>	16		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I (see instructions).</i>	17	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>	18	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>	19	X	
20 a Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H.</i>	20		X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).	20b		

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Part IV Checklist of Required Schedules (continued)

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

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 761		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 3		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 3,135		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.	X	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4 b	If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year. 		
7 e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
7 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966?		
9 b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12. 		
10 b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 		
11	Section 501(c)(12) organizations. Enter:		
11 a	Gross income from members or shareholders. 		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13 a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13 b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 		
13 c	Enter the amount of reserves on hand. 		
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14 b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.		

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

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

Section A. Governing Body and Management

			Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year. . . .	1 a	42		
b Enter the number of voting members included in line 1a, above, who are independent. . . .	1 b	40		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? . . . See Schedule O.	2		X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Does the organization have members or stockholders? . . . See Schedule O.	6		X	
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule O.	7 a		X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8 a		X	
b Each committee with authority to act on behalf of the governing body?	8 b		X	
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.	9			X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ▶ Patricia Rowlands Lawson 111 South Michigan Avenue Chicago IL 60603 312-499-4050

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Anne Searle Bent Trustee	1	X					0.	0.	0.	
(2) Robert H. Bergman Trustee	1	X					0.	0.	0.	
(3) Barbara Bluhm-Kaul Trustee	1	X					0.	0.	0.	
(4) Gilda Buchbinder Trustee	1	X					0.	0.	0.	
(5) Linda Buonanno Trustee	1	X					0.	0.	0.	
(6) Francie Comer Trustee	1	X					0.	0.	0.	
(7) Lester Coney Trustee	1	X					0.	0.	0.	
(8) A. Steven Crown Trustee	1	X					0.	0.	0.	
(9) William M. Daley Trustee	1	X					0.	0.	0.	
(10) Janet Duchossois Trustee	1	X					0.	0.	0.	
(11) John A. Edwardson Trustee	1	X					0.	0.	0.	
(12) Marshall Field Trustee	1	X					0.	0.	0.	
(13) Karen Frank Trustee	1	X					0.	0.	0.	
(14) Denise Gardner Trustee	1	X					0.	0.	0.	
(15) James A. Gordon Trustee	1	X					0.	0.	0.	
(16) Kenneth C. Griffin Trustee	1	X					0.	0.	0.	
(17) Caryn Harris Trustee	1	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) John W. Jordan II Trustee	1	X					0.	0.	0.	
(19) Rita Knox Trustee	1	X					0.	0.	0.	
(20) Anstiss Hammond Krueck Trustee	1	X					0.	0.	0.	
(21) Eric P. Lefkofsky Trustee	1	X					0.	0.	0.	
(22) Lawrence F. Levy Trustee	1	X					0.	0.	0.	
(23) Robert M. Levy Trustee	1	X					0.	0.	0.	
(24) John Manley Trustee	1	X					0.	0.	0.	
(25) Nancy Lauter McDougal Trustee	1	X					0.	0.	0.	
(26) Eric T. McKissack Trustee	1	X					0.	0.	0.	
(27) Cary D. McMillan Trustee	1	X					0.	0.	0.	
(28) Samuel M. Mencoff Trustee	1	X					0.	0.	0.	
(29) Alexandra C. Nichols Trustee	1	X					0.	0.	0.	
1 b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A.							4,838,883.	0.	1,030,110.	
d Total (add lines 1b and 1c)							4,838,883.	0.	1,030,110.	

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

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>	3 X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes' complete Schedule J for such individual</i>	4 X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>		5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
US Equities Asset Mgmt LLC 20 N Michigan Ave #400 Chicago, IL 60602	Bldg Maint Services	1,641,043.
Hirtle Callaghan LLC 300 Barr Harbor Dr West Conshohocken, PA 19428	Investmnt Advsr/Mgmt	983,699.
Deloitte & Touche LLP 111 S Wacker Dr Chicago, IL 60606	Audit Services	325,675.
Prager, Sealy, & Co LLC 1 Maritime Plaza #1000 San Francisco, CA 94111	Financ'l Advsy Srvc	178,684.
Stein Ray & Harris LLP 222 W Adams #1800 Chicago, IL 60603	Attorney Services	151,464.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 13

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Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

Name of the Organization

The Art Institute of Chicago

Employer Identification number

36-2167725

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Cynthia Perucca Trustee	1	X					0.	0.	0.	
Paulita Pike Trustee	1	X					0.	0.	0.	
Thomas J. Pritzker Trustee	1	X					0.	0.	0.	
J. Christopher Reyes Chairman	1	X					0.	0.	0.	
Linda Johnson Rice Trustee	1	X					0.	0.	0.	
Andrew M. Rosenfield Trustee	1	X					0.	0.	0.	
John W. Rowe Trustee	1	X					0.	0.	0.	
Michael Sacks Trustee	1	X					0.	0.	0.	
Stephanie Sick Trustee	1	X					0.	0.	0.	
Prabhakant Sinha Trustee	1	X					0.	0.	0.	
Edward Byron Smith, Jr. Trustee	1	X					0.	0.	0.	
Isabel Stewart Trustee	1	X					0.	0.	0.	
Melinda Martin Sullivan Trustee	1	X					0.	0.	0.	
Marilynn Thoma Trustee	1	X					0.	0.	0.	
Byron D. Trott Trustee	1	X					0.	0.	0.	
David J. Vitale Trustee	1	X					0.	0.	0.	
Fredrick H. Waddell Trustee	1	X					0.	0.	0.	
Todd Warnock Trustee	1	X					0.	0.	0.	
James Cuno President	40			X			1,026,395.	0.	299,918.	
Walter E. Massey President	40			X			151,515.	0.	0.	
Julia E. Getzels Vice President	40			X			305,670.	0.	70,809.	

Form 990 2010

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Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

Name of the Organization The Art Institute of Chicago	Employer Identification number 36-2167725
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Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Eric Anyah CFO	40			X				235,306.	0.	34,118.
David Thurm COO Museum	40				X			359,941.	0.	63,385.
Mary Jane Drews VP for Museum Development	40				X			337,168.	0.	55,366.
Edward McNulty SVP/Planning/COO SAIC	40				X			275,732.	0.	60,336.
Lisa Wainwright Faculty Dean/VP Acad Admin	40				X			187,653.	0.	18,410.
Elizabeth Grainer VP of Aux Ops	40				X			175,909.	0.	54,134.
Rose Milkowski VP for Enrollment Mgmt	40				X			168,979.	0.	17,182.
Anthony Jones Chancellor	40					X		257,807.	0.	158,175.
Eugene Adams VP of IS/CIO	40					X		192,880.	0.	53,101.
Brian Esker VP Fin/Admn SAIC	40					X		183,504.	0.	27,949.
Samuel Quigley VP, CMIIT	40					X		177,890.	0.	24,401.
Douglas Druick Prince Trust Chair	40					X		174,213.	0.	77,162.
Wellington Reiter Former President of SAIC	40						X	628,321.	0.	15,664.

** PUBLIC DISCLOSURE COPY **

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns.....	1a					
	b Membership dues.....	1b 11,218,855.					
	c Fundraising events.....	1c 5,031,432.					
	d Related organizations.....	1d					
	e Government grants (contributions).....	1e 7,971,201.					
	f All other contributions, gifts, grants, and similar amounts not included above....	1f 55,690,109.					
	g Noncash contributions included in lns 1a-1f: \$	12,478,290.					
h Total. Add lines 1a-1f..... ▶			79,911,597.				
PROGRAM SERVICE REVENUE			Business Code				
	2a Tuition and Fees.....	611600	123336977.	123336977.			
	b Proceeds from Sale of Art.....	900099	75,904,318.	75,904,318.			
	c Museum Admissions.....	900099	8,571,420.	8,571,420.			
	d Other Restricted Prog Rev.....	900099	1,609,109.	1,609,109.			
	e Member Program Revenues.....	900099	971,055.	971,055.			
	f All other program service revenue.....		4,051,688.	3,049,881.		1,001,807.	
g Total. Add lines 2a-2f..... ▶			214444567.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)..... ▶		6,547,074.			6,547,074.	
	4 Income from investment of tax-exempt bond proceeds..... ▶						
	5 Royalties..... ▶		179,133.			179,133.	
	6a Gross Rents.....	(i) Real	2,563,399.				
		(ii) Personal					
		b Less: rental expenses.....	1,030,668.				
		c Rental income or (loss).....	1,532,731.				
	d Net rental income or (loss)..... ▶			1,532,731.		65,100.	1,467,631.
	7a Gross amount from sales of assets other than inventory.....	(i) Securities	494718039.				
		(ii) Other					
		b Less: cost or other basis and sales expenses.....	407140443.				
		c Gain or (loss).....	87577596.				
	d Net gain or (loss)..... ▶			87,577,596.			87,577,596.
	8a Gross income from fundraising events (not including \$ 5,031,432. of contributions reported on line 1c). See Part IV, line 18.....	a	719,410.				
		b Less: direct expenses.....	2,175,045.				
		c Net income or (loss) from fundraising events..... ▶			-1,455,635.		
	9a Gross income from gaming activities. See Part IV, line 19.....	a	44,814.				
b Less: direct expenses.....		42,424.					
c Net income or (loss) from gaming activities..... ▶			2,390.			2,390.	
10a Gross sales of inventory, less returns and allowances.....	a	14368229.					
	b Less: cost of goods sold.....	7,228,817.					
	c Net income or (loss) from sales of inventory..... ▶			7,139,412.	5,972,841.	1,166,571.	
Miscellaneous Revenue		Business Code					
11a Other Invest. Inc (Loss).....	900099		1,168,527.		163,585.	1,004,942.	
b Other.....	900099		37,569.			37,569.	
c							
d All other revenue.....							
e Total. Add lines 11a-11d..... ▶			1,206,096.				
12 Total revenue. See instructions..... ▶			397084961.	219415601.	1,395,256.	96,362,507.	

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Part IX Statement of Functional Expenses

*Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).*

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.....	63,490.	63,490.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.....	30,474,713.	30,474,713.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.....				
4 Benefits paid to or for members.....				
5 Compensation of current officers, directors, trustees, and key employees.....	3,907,511.	2,106,770.	1,407,685.	393,056.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).....	0.	0.	0.	0.
7 Other salaries and wages.....	66,586,556.	56,879,471.	7,452,550.	2,254,535.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions).....	8,254,293.	6,585,539.	1,287,287.	381,467.
9 Other employee benefits.....	11,304,289.	8,989,940.	1,885,216.	429,133.
10 Payroll taxes.....	4,787,621.	4,041,431.	565,255.	180,935.
11 Fees for services (non-employees):				
a Management.....				
b Legal.....	927,121.		927,121.	
c Accounting.....	344,431.		344,431.	
d Lobbying.....	25,370.	25,370.		
e Professional fundraising services. See Part IV, line 17.....	252,414.			252,414.
f Investment management fees.....	1,838,522.		1,838,522.	
g Other.....	15,410,617.	14,168,362.	471,877.	770,378.
12 Advertising and promotion.....	1,860,729.	1,755,475.		105,254.
13 Office expenses.....	9,667,103.	8,349,019.	585,645.	732,439.
14 Information technology.....	1,554,193.	793,192.	727,760.	33,241.
15 Royalties.....	106,803.	106,803.		
16 Occupancy.....	18,085,523.	17,246,257.	717,875.	121,391.
17 Travel.....	3,208,894.	3,079,252.	28,575.	101,067.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.....				
19 Conferences, conventions, and meetings.....	293,617.	234,029.	50,184.	9,404.
20 Interest.....	12,946,808.	11,703,700.	1,243,108.	
21 Payments to affiliates.....	14,865.	14,865.		
22 Depreciation, depletion, and amortization.....	25,227,078.	24,481,455.	745,623.	
23 Insurance.....	1,371,683.	1,371,683.		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <u>Accessions/Books/Other Art</u>	83,914,443.	83,914,443.		
b <u>Furniture, Fixtures, Equipment</u>	4,934,689.	4,452,240.	467,752.	14,697.
c <u>Other Expenses</u>	2,678,366.	2,445,814.	190,743.	41,809.
d <u>Bad Debt Expense</u>	1,470,272.	1,470,272.		
e <u>Exhibition Related Expenses</u>	1,399,419.	1,399,419.		
f All other expenses.....				
25 Total functional expenses. Add lines 1 through 24f.....	312,911,433.	286,153,004.	20,937,209.	5,821,220.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.....				

** PUBLIC DISCLOSURE COPY **

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1	Cash — non-interest-bearing		1
	2	Savings and temporary cash investments	3,784,874.	2
	3	Pledges and grants receivable, net	56,771,250.	3
	4	Accounts receivable, net	4,778,154.	4
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	171,250.	5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6
	7	Notes and loans receivable, net	3,715,772.	7
	8	Inventories for sale or use	7,137,403.	8
	9	Prepaid expenses and deferred charges	6,866,541.	9
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	624,336,307.	
	10b	Less: accumulated depreciation	147,756,389.	
	10c		489,638,858.	10c
	11	Investments — publicly traded securities	416,411,071.	11
	12	Investments — other securities. See Part IV, line 11	278,584,873.	12
	13	Investments — program-related. See Part IV, line 11		13
	14	Intangible assets		14
15	Other assets. See Part IV, line 11	304,334.	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,268,164,380.	16	
LIABILITIES	17	Accounts payable and accrued expenses	38,693,962.	17
	18	Grants payable		18
	19	Deferred revenue	18,667,201.	19
	20	Tax-exempt bond liabilities	304,170,901.	20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	900,000.	23
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities. Complete Part X of Schedule D	58,405,298.	25
	26	Total liabilities. Add lines 17 through 25	420,837,362.	26
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27	Unrestricted net assets	53,965,851.	27
	28	Temporarily restricted net assets	503,678,873.	28
	29	Permanently restricted net assets	289,682,294.	29
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances.	847,327,018.	33
	34	Total liabilities and net assets/fund balances.	1,268,164,380.	34

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Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	397,084,961.
2 Total expenses (must equal Part IX, column (A), line 25)	2	312,911,433.
3 Revenue less expenses. Subtract line 2 from line 1	3	84,173,528.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	847,327,018.
5 Other changes in net assets or fund balances (explain in Schedule O) ..See..Schedule..O	5	74,611,946.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,006,112,492.

Part XII Financial Statements and Reporting

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

		Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

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OMB No. 1545-0047

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

2010

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization The Art Institute of Chicago	Employer identification number 36-2167725
---	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III — Functionally integrated d Type III — Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box. _____
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')...						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge....						
4 Total. Add lines 1 through 3....						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)...						
6 Public support. Subtract line 5 from line 4.....						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4.....						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.....						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).....						
11 Total support. Add lines 7 through 10.....						
12 Gross receipts from related activities, etc (see instructions).....					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)).....	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14.....	15	%
16a 33-1/3% support test – 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization..... <input type="checkbox"/>		
b 33-1/3% support test – 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization..... <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2010. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization..... <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2009. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization..... <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 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.						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lns 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests – 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

b 33-1/3% support tests – 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

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Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Additional Supplemental Information

Part I, Line 2 - Although The Art Institute of Chicago is exempt under two categories listed in Part I, box 2 which describes a school, section 170(b)(1)(A)(ii) and box 7 which describes an organization that normally receives a substantial part of its support from a governmental unit or from the general public, Section 170(b)(1)(A)(vi). The Art Institute of Chicago has selected box 2, because per instructions only one applicable box should be checked.

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SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2010

Open to Public Inspection

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

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of organization The Art Institute of Chicago	Employer identification number 36-2167725
---	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures. ▶ \$ _____
- 3 Volunteer hours.

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ _____ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If 'Yes,' describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which 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 filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

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

Limits on Lobbying Expenditures
 (The term 'expenditures' means amounts paid or incurred.)

(a) Filing organization's totals (b) Affiliated group totals

- 1 a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns.

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

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities? If 'Yes,' describe in Part IV. See Part IV.	X		25,370.
j Total. Add lines 1c through 1i.			25,370.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

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

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

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

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

Part IV Supplemental Information

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

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

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

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**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

OMB No. 1545-0047

2010

Open to Public Inspection

Employer identification number

The Art Institute of Chicago

36-2167725

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements.....	2a
b Total acreage restricted by conservation easements.....	2b
c Number of conservation easements on a certified historic structure included in (a).....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.....	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- 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
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... Yes No
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. See Part XIV.
 - 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) Revenues included in Form 990, Part VIII, line 1.....	▶ \$ _____
(ii) Assets included in Form 990, Part X.....	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1.....	▶ \$ _____
b Assets included in Form 990, Part X.....	▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. See Part XIV
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	663,913,585.	616,716,313.	840,448,838.		
b Contributions	67,894,964.	25,467,861.	10,847,284.		
c Net investment earnings, gains, and losses	151,400,848.	64,519,514.	-189934854.		
d Grants or scholarships	3,082,178.	3,199,183.	2,778,756.		
e Other expenditures for facilities and programs	35,698,555.	37,713,043.	38,338,254.		
f Administrative expenses	1,838,522.	1,877,877.	3,527,945.		
g End of year balance	842,590,142.	663,913,585.	616,716,313.		

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

- a Board designated or quasi-endowment 38.00 %
- b Permanent endowment 37.00 %
- c Term endowment 25.00 %

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		11,324,688.		11,324,688.
b Buildings		58,517,837.	20,386,428.	38,131,409.
c Leasehold improvements		536,431,041.	117,308,220.	419,122,821.
d Equipment		16,834,617.	9,036,615.	7,798,002.
e Other		1,228,124.	1,025,126.	202,998.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 476,579,918.

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Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other <u>Hedge Funds</u>	138,246,402.	End of Year Market Value
(A) <u>Real Assets</u>	121,117,107.	End of Year Market Value
(B) <u>Venture Capital/Private Equity</u>	85,943,510.	End of Year Market Value
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)	345,307,019.	

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets. (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15)	

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) <u>Pension Liability</u>	40,709,364.	
(3) <u>Refundable Advances</u>	3,355,268.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	44,064,632.	

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

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

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

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

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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

From Page 7 of the Institute's Consolidated Audited Financial Statements: "Art
Objects and Library Collections - The value of the art objects in the permanent
collection, as well as the holdings of the libraries, is excluded from the
consolidated statements of financial position. Additions to the permanent collection
are made either by gifts, bequests, or through purchases using Institute acquisition
funds. Institute acquisition funds may be classified as permanently restricted, for
which only the income earned on principal balances may be used for acquisitions;

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Part XIV Supplemental Information (continued)

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

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

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

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

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

Part V, Line 2c - Term Endowment Percentage

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

Part V, Line 4 - Intended Uses Of Endowment Fund

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

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Part XIV Supplemental Information (continued)

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

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

Part X - FIN 48 Footnote

From Page 9 of the Institute's Consolidated Audited Financial Statements: "The Institute is a not-for-profit corporation exempt from federal income tax under Section 501(a) of the Internal Revenue Code, as an organization described in Section 501(c) (3); the Institute is similarly exempt from state income taxes. Despite the general exemption from income taxation, the Institute is subject to federal and state income tax at corporate rates on its unrelated business income. Accounting Standards Codification ("ASC") 740, Income Taxes, prescribes a comprehensive model for how an institution should recognize, measure, present, and disclose in its financial statements uncertain tax positions that the institution has taken or expects to take on a tax return. For federal purposes, the Institute has reported federal net operating losses (NOLs) of approximately \$6.0 million for tax periods through June 30, 2010. The Institute does not have the ability to estimate the NOL through June 30, 2011, as the NOL calculation is reliant upon third-party information, which is not yet available. These NOLs will expire, if not utilized, between the years 2025 and 2030. The Institute has not recorded a tax benefit for these NOLs for the years ended June 30, 2011 and 2010, respectively; because it is not more likely than not that the Institute will be able to realize the benefit."

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SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

Part I

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

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Part II **Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

--- **Schedule E, Line 6 - Explanation of Aid or Assistance from Governmental Agency** -----

--- Part I, Line 6a - The Institute receives federal financial aid funding from the -----

--- Department of Education under the following programs: -----

--- Federal Pell Grant Program -----

--- Federal Supplemental Educational Opportunity Grants Program -----

--- Federal Work Study Program -----

--- Academic Competitiveness Grant Program -----

--- Javits Fellowships Program -----

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Schedule F
(Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

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

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

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated 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 (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) East Asia & the Pacific			Program Services	Scholarly Publ.	4,577.
(2) East Asia & the Pacific			Program Services	Study Tours	41,956.
(3) East Asia & the Pacific			Program Services	Travel/Educt'l	79,454.
(4) East Asia & the Pacific			Program Services	Travel/Recruit.	70,938.
(5) East Asia & the Pacific			Program Services	Exhibition Exp	250.
(6) Europe			Program Services	Exhibition Exp	428,938.
(7) Europe			Program Services	Scholarly Publ.	188,951.
(8) Europe		1	Program Services	Study Tours	370,234.
(9) Europe			Program Services	Travel/Educt'l	125,095.
(10) Europe			Program Services	Travel/Exhib	147,822.
(11) North America			Program Services	Exhibition Exp	1,616.
(12) North America			Program Services	Scholarly Publ	6,171.
(13) North America			Program Services	Travel/Recruit	30,477.
(14) South America			Program Services	Travel/Educt'l	33,186.
(15) South Asia			Program Services	Travel/Recruit	2,402.
(16) South Asia			Program Services	Travel/Educt'l	108,826.
(17) Europe			Program Services	Travel/Recruit'g	11,578.
3a Sub-total		1			1,652,471.
b Total from continuation sheets to Part I					207,062,951.
c Totals (add lines 3a and 3b)	0	1			208,715,422.

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

Schedule F (Form 990) 2010

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities. 0

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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Part 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 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).* 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, 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 file Form 5713, International Boycott Report (see instructions for Form 5713).* Yes No

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Continuation Sheet for Schedule F (Form 990)

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

2010

Continuation Page 1 of 1

Name of the organization The Art Institute of Chicago	Employer identification number 36-2167725
--	--

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type (i.e., fundraising, program services, grants to recipients located in the region))	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Middle East & N. Africa			Program Services	Travel/Educt'l	4,869.
North America			Program Services	Travel/Educt'l	11,830.
North America			Program Services	Travel/Exhib	1,520.
South America			Program Services	Travel/Recrut'g	1,923.
South Asia			Program Services	Travel/Exhib	151,259.
Sub-Saharan Africa			Program Services	Travel/Educt'l	8,514.
North America			Marketing	N/A	1,001.
Central Amer & Caribbean			Program Services	Travel/Educt'l	1,005.
East Asia			Program Services	Travel/Exhib	673.
South Asia			Program Services	Scholarly Publ	4,000.
South Asia			Marketing	N/A	26,362.
South America			Program Services	Study Tours	23,526.
Middle East & N. Africa			Program Services	Exhibition Exp	1,500.
Middle East & N. Africa			Program Services	Travel/Exhib	330.
Middle East & N. Africa			Program Services	Travel/Recruit	1,257.
Central Amer & Caribbean			Program Services	Travel/Recrut'g	312.
Europe			Marketing	N/A	25,070.
Central Amer & Caribbean			Passive Investments	N/A	172,174,000.
Europe			Passive Investments	N/A	1,580,000.
North America			Passive Investments	N/A	33,044,000.
Totals	0	0			207,062,951.

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SCHEDULE G
(Form 990 or 990-EZ)

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

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

**Open to Public
Inspection**

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

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

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

- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 SD&A Teleservc	Telemarket ing		X	443,259.	252,414.	190,845.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				443,259.	252,414.	190,845.

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

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

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Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		WB Daley Gala (event type)	Weston Wg Gala (event type)	9 (total number)	(add column (a) through column (c))	
REVENUE	1	Gross receipts	3,540,075.	597,211.	1,613,556.	5,750,842.
	2	Less: Charitable contributions	3,401,415.	482,009.	1,148,008.	5,031,432.
	3	Gross income (line 1 minus line 2)	138,660.	115,202.	465,548.	719,410.
DIRECT EXPENSES	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	684,677.	302,181.	1,188,187.	2,175,045.
	10	Direct expense summary. Add lines 4- through 9 in column (d)				2,175,045.
	11	Net income summary. Combine line 3, column (d), and line 10				-1,455,635.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming	
					(add column (a) through column (c))	
REVENUE	1	Gross revenue		44,814.	44,814.	
	2	Cash prizes				
EXPENSES	3	Non-cash prizes		42,424.	42,424.	
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes 0% <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes 0% <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100% <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				42,424.
	8	Net gaming income summary. Combine lines 1, column (d) and line 7				2,390.

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

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If 'No,' explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If 'Yes,' explain: _____

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- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	60.0 %
b An outside facility	13b	40.0 %

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

Name ▶ Patricia C. Rowlands

Address ▶ 111 South Michigan Avenue, Chicago, 60603

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes No

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

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

Name ▶

Address ▶

16 Gaming manager information:

Name ▶ N/A

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

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

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Department of the Treasury
 Internal Revenue Service
 Name of the organization
The Art Institute of Chicago
 Employer identification number
36-2167725

SCHEDULE I
(Form 990)
Grants and Other Assistance to Organizations, Governments and Individuals in the United States
 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
 ▶ Attach to Form 990.

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Northwestern Univ. 633 Clark Street Evanston, IL 60208	36-2167817	501 (c) (3)	63,490.	0. N/A	N/A		Conserv. Research
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Student Scholarships and					
2 Stipends	3,096	30,474,713.		N/A	N/A
3					
4					
5					
6					
7					

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

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

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

Part IV - Additional Supplemental Information

For organizational payments for research grants, a departmental program representative for the grant reviews and approves all payment requests before payment is issued.

**** PUBLIC DISCLOSURE COPY ****

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Employer identification number

The Art Institute of Chicago

36-2167725

Part I Questions Regarding Compensation

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

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

	Yes	No
1 a		
1 b	X	
2	X	
3		
4 a	X	
4 b	X	
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8	X	
9	X	

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

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

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

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

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

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Part III

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

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

a The organization?

b Any related organization?

If 'Yes' to line 5a or 5b, describe in Part III.

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

a The organization?

b Any related organization?

If 'Yes' to line 6a or 6b, describe in Part III.

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

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

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

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

Schedule J (Form 990) 2010

**** PUBLIC DISCLOSURE COPY ****

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

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

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

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1	James Cuno	(i) 622,528. (ii) 0.	(i) 0. (ii) 0.	(iii) 403,867. (ii) 0.	287,501. 0.	17,578. 0.	1,331,474. 0.	278,116. 0.
2	Walter E. Mass	(i) 148,765. (ii) 0.	(i) 0. (ii) 0.	(iii) 2,750. (ii) 0.	0. 0.	0. 0.	151,515. 0.	0. 0.
3	Julia E. Getze	(i) 293,898. (ii) 0.	(i) 0. (ii) 0.	(iii) 11,772. (ii) 0.	49,413. 0.	22,120. 0.	377,203. 0.	11,084. 0.
4	Eric Anyah	(i) 218,582. (ii) 0.	(i) 0. (ii) 0.	(iii) 16,724. (ii) 0.	21,000. 0.	13,762. 0.	270,068. 0.	0. 0.
5	David Thurm	(i) 317,981. (ii) 0.	(i) 0. (ii) 0.	(iii) 41,960. (ii) 0.	29,495. 0.	34,362. 0.	423,798. 0.	0. 0.
6	Mary Jane Drew	(i) 174,597. (ii) 0.	(i) 0. (ii) 0.	(iii) 162,571. (ii) 0.	54,000. 0.	1,889. 0.	393,057. 0.	7,937. 0.
7	Edward McNulty	(i) 267,242. (ii) 0.	(i) 0. (ii) 0.	(iii) 8,490. (ii) 0.	47,919. 0.	12,964. 0.	336,615. 0.	16,358. 0.
8	Lisa Wainwright	(i) 187,265. (ii) 0.	(i) 0. (ii) 0.	(iii) 388. (ii) 0.	4,643. 0.	14,329. 0.	206,625. 0.	0. 0.
9	Elizabeth Grai	(i) 175,230. (ii) 0.	(i) 0. (ii) 0.	(iii) 679. (ii) 0.	47,000. 0.	7,629. 0.	230,538. 0.	0. 0.
10	Rose Milkowski	(i) 168,840. (ii) 0.	(i) 0. (ii) 0.	(iii) 139. (ii) 0.	15,345. 0.	2,291. 0.	186,615. 0.	0. 0.
11	Anthony Jones	(i) 183,484. (ii) 0.	(i) 0. (ii) 0.	(iii) 74,323. (ii) 0.	158,175. 0.	0. 0.	415,982. 0.	57,823. 0.
12	Eugene Adams	(i) 175,435. (ii) 0.	(i) 0. (ii) 0.	(iii) 17,445. (ii) 0.	34,000. 0.	20,226. 0.	247,106. 0.	0. 0.
13	Brian Esker	(i) 166,769. (ii) 0.	(i) 0. (ii) 0.	(iii) 16,735. (ii) 0.	20,000. 0.	8,446. 0.	211,950. 0.	0. 0.
14	Samuel Quigley	(i) 177,211. (ii) 0.	(i) 0. (ii) 0.	(iii) 679. (ii) 0.	16,239. 0.	8,657. 0.	202,786. 0.	0. 0.
15	Douglas Druick	(i) 168,576. (ii) 0.	(i) 0. (ii) 0.	(iii) 5,637. (ii) 0.	69,000. 0.	12,352. 0.	255,565. 0.	0. 0.
16	Wellington Rei	(i) 181,617. (ii) 0.	(i) 0. (ii) 0.	(iii) 446,704. (ii) 0.	8,660. 0.	8,349. 0.	645,330. 0.	0. 0.

Part III Supplemental Information

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

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

The Presidents of the Museum and the School are allowed to travel first-class with certain limitations and to have their spouses accompany them on business related trips with certain limitations outlined in the employment contracts. The President of the School and his spouse traveled first class on one business related trip during calendar year 2010. The Former President of the School had spousal travel during calendar year 2010.

The Former President of the School and the Chief Operating Officer for the Museum received housing stipends. The housing stipends were grossed-up for applicable taxes. The stipend and gross-up were both addressed in the individual employment contracts.

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Part III Supplemental Information

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

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

The following individuals received severance payments:

Mary Jane Drews amount paid in calendar year 2010 of \$124,200

Wellington Reiter amount paid in calendar year 2010 of \$383,333

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

James Cuno amount paid in calendar year 2010 of \$397,816

Julia E. Getzels amount paid in calendar year 2010 of \$11,084

Mary Jane Drews amount paid in calendar year 2010 of \$13,737

Edward McNulty amount paid in calendar year 2010 of \$6,133

Anthony E. Jones amount paid in calendar year 2010 of \$57,823

Wellington Reiter amount paid in calendar year 2010 of \$9,675

Part III Supplemental Information

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

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

The payments reported in Form 990, Part VII for the Former President of the School of the Art Institute, were paid pursuant to a contract that was subject to the initial contract exception described in Regs. Section 53.4958-4(a)(3). The initial contract exception applies because the payments were made pursuant to a written contract and, as a new hire with no previous connection to the organization, Mr. Reiter was not a disqualified person immediately prior to entering the contract. The payments were fixed payments as defined under Regs. Section 53.4958-4(a)(3)(ii).

Although the initial contract exception applies to these payments, the Executive Committee of the Board of Trustees reviewed compensation survey data prepared by the Institute's outside compensation expert and considered other relevant factors to determine the appropriate initial offer. One member of the Executive Committee, an independent Trustee, then oversaw the ensuing contract negotiations. The Institute's outside compensation expert was consulted during the course of the negotiations to assure that the compensation under discussion was competitively reasonable. The final terms were reviewed by the compensation expert, who determined that the total remuneration was competitively reasonable, and then approved by the independent Trustee in consultation with the Chairman of the Board of Trustees. The total remuneration contained in the final compensation package was consistent with the package approved by the Executive Committee. The Board of Trustees received a description of the terms of the compensation package before

voting to hire Mr. Reiter.

BAA

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

The Art Institute of Chicago

Employer identification number

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 behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A IL Educ Facil Authority	52-1297563	4520015W6	7/09/2003	18,737,797.	Refund 6/16/1993 Bonds		X		X		
B IL Finance Authority	86-1091967	45200FVM8	3/26/2009	139,158,000.	Constr./Renov. Museum Facil.		X		X		
C IL Finance Authority	86-1091967	45200F3N7	6/09/2010	113,537,854.	See Part V		X		X		
D IL Finance Authority	86-1091967	45200F3B3	5/20/2010	55,941,880.	Refund 3/26/2009 2009B Bonds		X		X		

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		5,440,000.		80,000,000.				
2 Amount of bonds legally defeased								
3 Total proceeds of issue		18,750,756.		139,158,000.				55,941,880.
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows				22,717,845.				
7 Issuance costs from proceeds		219,546.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds		30,148.						1,880.
10 Capital expenditures from proceeds				139,158,000.				
11 Other spent proceeds		18,501,062.						55,940,000.
12 Other unspent proceeds								
13 Year of substantial completion		1988		2009			2002	2002

- 14 Were the bonds issued as part of a current refunding issue?
- 15 Were the bonds issued as part of an advance refunding issue?
- 16 Has the final allocation of proceeds been made?
- 17 Does the organization maintain adequate books and records to support the final allocation of proceeds?

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X				X
2 Are there any lease arrangements that may result in private business use of bond-financed property?				X				X

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

Schedule K (Form 990) 2010

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

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

Additional Information
 Part I, Line C, Column (f) - Description of Purpose - Refund 10/15/1992 Bonds, Refund 2/23/1995 Bonds, Refund 3/27/1996 Bonds, and Advance Refund Portion of 2/9/2000 Series 2000A Bonds. Part II, Line 3, Bond Issues "A" and "C" - The difference between total proceeds of issue and issue price reported in Part I, Column (e) is investment earnings. Part II, Line 16, Bond Issue "D" - The Borrower reserves the right to modify final allocation.

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SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization: **The Art Institute of Chicago** Employer identification number: **36-2167725**

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958..... ▶ \$ _____
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization..... ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total.....				▶ \$ _____						

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1) N/A	N/A	11,932. Tuition Remission
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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

Schedule L (Form 990 or 990-EZ) 2010

** PUBLIC DISCLOSURE COPY **

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) W Daley JPMorgan Officer	Trustee	146,465.	LOC/Banking Serv.		X
(2) A Jones Spouse P Carroll	Former Officer	14,225.	Employee Compensation		X
(3) J Rowe Exelon CEO/Dir	Trustee	1,051,156.	ComEd Electrical Serv.		X
(4) J Rowe Nthrn Trst Brd Memb	Trustee	263,558.	Inv.Custody/Perf Serv.		X
(5) F Waddell Nthrn Trst CEO	Trustee	263,558.	Inv.Custody/Perf Serv.		X
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

**** PUBLIC DISCLOSURE COPY ****

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

**Open To Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	383	1.	See Part II
2 Art—Historical treasures				
3 Art—Fractional interests	X	70	0.	See Part II
4 Books and publications	X		52,485.	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	174	11,754,718.	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests ..				
12 Securities—Miscellaneous				
13 Qualified conservation contribution— Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>Special Events</u>)	X	196	466,952.	FMV
26 Other ▶ (<u>Equipment</u>)	X	1	54,045.	FMV
27 Other ▶ (<u>Airfare</u>)	X	380	150,090.	FMV
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 26

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If 'Yes,' describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If 'Yes,' describe in Part II.	See Part II	
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.	See Part II	

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

Schedule M (Form 990) 2010

**** PUBLIC DISCLOSURE COPY ****

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

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

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

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

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

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

The Art Institute of Chicago

Employer identification number

36-2167725

Form 990, Part V, Line 7g

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

Form 990, Part V, Line 7h

Form 1098-C is not applicable to the Institute.

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

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

Schedule B, Special Rules, Box 1

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

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

Form 990, Part III, Line 1 - Organization Mission

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

****PUBLIC DISCLOSURE COPY****

Name of the organization The Art Institute of Chicago	Employer identification number 36-2167725
--	--

Form 990, Part III, Line 1 - Organization Mission

of national and international significance.

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

A family relationship exists between Trustees Robert H. Bergman and Andrew M. Rosenfield. A business relationship exists between Officer Walter E. Massey and Trustee Cary D. McMillan. Business relationships exist between the following Trustees: Samuel M. Mencoﬀ and John A. Edwardson; Thomas J. Pritzker and Byron Trott; Thomas J. Pritzker and Samuel M. Mencoﬀ; Kenneth C. Griffin and James A. Gordon; John W. Rowe and Frederick H. Waddell.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

The Institute's governing documents are available to the public via written request to the Institute and in addition, in part through applicable governmental agencies.

The Institute's financial statements are available to the public via the Institute's own website, via the Illinois Attorney General's website and upon written request.

The conflict of interest policy is available to the public upon written request to the Institute.

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

Net Unrealized Gains or Losses on Investments.....	\$ 50,041,911.
Pension Related Changes other than Net Periodic Pension Cost.....	19,205,713.
Unrealized Appreciation on Funds Held in Trust.....	5,364,322.
Total	<u>\$ 74,611,946.</u>

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships	OMB No. 1545-0047 2010
▶ Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ Attach to Form 990. ▶ See separate instructions.		
Department of the Treasury Internal Revenue Service		Employer identification number 36-2167725
Name of the organization The Art Institute of Chicago		

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) AICCB LLC 111 South Michigan Avenue Chicago, IL 60603 20-5052348	Investments	DE	560,176.	5,831,077.	N/A
(3) AICGS LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	386,209.	4,376,894.	N/A
(5) AICHP LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	19,575.	1,887,786.	N/A

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) Ox-Bow 3435 Rupprecht Way Saugatuck, MI 49453 38-1081760	Educational Institution	MI	501(c)(3)	2	N/A		X
(2) -----	-----	-----	-----	-----	-----	-----	-----
(3) -----	-----	-----	-----	-----	-----	-----	-----
(4) -----	-----	-----	-----	-----	-----	-----	-----
(5) -----	-----	-----	-----	-----	-----	-----	-----
(6) -----	-----	-----	-----	-----	-----	-----	-----
(7) -----	-----	-----	-----	-----	-----	-----	-----

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												

(2) -----												

(3) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

(2) -----							

(3) -----							

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

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

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?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) OX-Bow		b	60,000 . FMV	
(2) OX-Bow		d	610,350 . FMV	
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) -----										
(2) -----										
(3) -----										
(4) -----										
(5) -----										
(6) -----										
(7) -----										
(8) -----										

Part VII Supplemental Information

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

[Ruled area for supplemental information]

2010

Continuation Sheet for Schedule R

Continuation Page 1 of 1

Name of filing organization

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Part I Continuation of Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
AIC_AA_LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	169,055.	3,497,930.	N/A
AIC_AX_LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	0.	2,127,543.	N/A
AIC_BLK_LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	235,296.	10,264,506.	N/A
AIC_MS_SS_LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	0.	3,333,747.	N/A
AIC_GS_MEZZ_LLC 111 South Michigan Avenue Chicago, IL 60603 36-2167725	Investments	DE	866,140.	3,429,913.	N/A

