** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

A F	or the	2017 calendar year, or tax year beginning and e	ending	_	
B (Check if applicable:	C Name of organization		D Employer identifi	cation number
		Museum of Science and Industry			
L	change	Doing business as		36-2	167797
		Number and street (or P.O. box if mail is not delivered to street address) 5700 S. Lake Shore Drive	Room/suite		
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	89,739,573.
	Amende return	chicago, IL 60637-2093		H(a) Is this a group re	eturn
	tion	F Name and address of principal officer: David R. Mosena		for subordinates	? Yes X No
	penaing	same as C above		H(b) Are all subordinates in	ncluded? Yes No
			or 527	If "No," attach a	list. (see instructions)
		<u> </u>			
			L Year	of formation: 1933 N	∧ State of legal domicile: IL
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Museum of Science and Industry 36-2167797					
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A	1				
	D IV	et differated business taxable income from 1 om 1 990-1, life 34		_	
•	8 6	Contributions and grants (Part VIII, line 1h)			
nue	1	-			
eve					
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	1				
				0.	0.
S	1			27,630,544.	28,155,410.
use	16 a ₽	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
xbe	b ⊺	otal fundraising expenses (Part IX, column (D), line 25) $ ightharpoonup 4$, 591 , 36	<u> </u>		
Ĥ	17 C	other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			
	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
	19 R	evenue less expenses. Subtract line 18 from line 12		-4,298,465.	-10,137,079.
s or					
sset 3alai	20 T		2		
et A	21 T				
	22 N		<u>Z</u>	105,798,351.	205,748,727.
					y knowledge and belief, it is
uue	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of win	iicii preparei	lias any knowledge.	
ei	_	Signature of officer		I Date	
		,			
пеі	-				
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN
Paid				if	
		-			42-0714325
				5 2	
	-	CHICAGO, IL 60606		Phone no. 31	2-634-3400
May	the IR				X Yes No
_	Some of organization				

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The Museum of Science and Industry (the Museum) in Chicago is the
	largest science museum in the Western hemisphere and home to thousands
	of exhibits and artifacts. For more than 80 years, the Museum has been
	a premier destination in Chicago. The Museum's mission is to inspire
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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 \$ 33,885,215. including grants of \$) (Revenue \$ 13,519,301.)
	World-class permanent exhibitions which include Science Storms, a
	26,000-square-foot exhibit that reveals the extraordinary science
	behind some of nature's most powerful and compelling phenomena; Numbers
	in Nature, an exhibit that exposes and explains hidden patterns in the
	natural world and features a 1,800-square-foot mirror maze; and You!
	The Experience, a 15,000-square-foot exhibit that explores the human
	mind, body and spirit. Other favorite experiences include the U-505
	Submarine, the only German U-boat captured during World War II,
	surrounded by more than 30,000 square feet of artifacts and interactive
	activities; the Coal Mine, a reproduction of an Illinois coal mine that
	takes guests down 50 feet in a real hoist to the bottom of a mineshaft;
	Future Energy Chicago, a multi-player visual simulation where teams of
4b	(Code:) (Expenses \$10 , 618 , 253 • _ including grants of \$6 , 000 •) (Revenue \$\$ 528 , 631 •)
	Educational Programs and Activities, which include the Museum's Welcome
	to Science Initiative, impacts guests and students in the building and
	in their communities in a variety of ways. MSI offers live science
	demonstrations, facilitated learning labs for school groups, free
	teacher development and training, online experiments and lesson plans,
	after-school science club networks in underserved communities, and a
	club for teens that helps them learn science skills as they prepare for
	college.
	5 266 825
4c	
	Museum and Operations, which include guest services and support. These
	expenses support the Museum's vision of inspiring and motivating
	children to achieve their full potential in science, technology and
	engineering by providing guests and teachers with integrated learning
	experiences and programming that is centered on exciting and
	interactive exhibits that help explain how science directly impacts our
	daily lives.
4d	Other program services (Describe in Schedule O.)
_	(Expenses \$ 2,588,548 ⋅ including grants of \$) (Revenue \$ 1,392,434 ⋅) Total program service expenses ► 52,458,751 ⋅
<u>4e</u>	Total program service expenses ► 52,458,751.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete			
	Schedule J	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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		x
28	of any of these persons? It "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_		28a		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
		200		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			$ _{\mathbf{x}}$
0.4	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	١		 ₩
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			.
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			\ _{3,7}
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2017) Museum of Science and Industry Part V Statements Regarding Other IRS Filings and Tax Compliance

The Enter the number reported in Box 3 of Form 1098. Enter 0 if not applicable in the second of the common terms with a second of the common t		Check if Schedule O contains a response of note to any line in this part v					
b Enter the number of Forms W2G included in line 1a. Enter 0-fi not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and resportable gamining (gambling) winnings to pitze winners? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. Red for the calendary ware inding with or within the year covered by this return 1b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b If we calendary ware in a 2a is greater than 250, you may be required to e-five (see instructions) 3b If If wes, in all the calendary 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 accounts (FBAR). 5b If wes, instent the name of the foreign country. 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts (FBAR). 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles contributions? 5c Was the organization shall any receive deductible contributions under section 170(c). 6c Was the organization shall have receive deductible contributions under section 170(c). 6c Was did the organization shall we not tax deductibles a contribution or aparty to a prohibited tax shelter transaction orgits were not tax deductibles a contribution organization shall be a special contribution or tax deductibles or tax deductibles or the shall be approximated to the promise of the propagal				1 100		Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (graphing) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 3 If all cales and the second of the calendar year ending with or within the year covered by this return 3 If all cales and the second of the cales and the cales							
Gamblingly winnings to prize winners? a Flote the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return by I at least one is reported on line 2a, did the organization file all required federal employment tax returns? About. If the sum of lines 1 and and 2 is greater than 250, you may be required to e-file (see instructions) by I If Yee, 1 and 2 is greater than 250, you may be required to e-file (see instructions) by I If Yee, 1 and 2 is greater than 250, you may be required to e-file (see instructions) by I If Yee, 2 and 2 is greater than 250, you may be required to e-file (see instructions) by I If Yee, 3 and 2 is greater than 250, you may be required to e-file (see instructions) by II Yee, 3 and 3 is X by II Yee, 2 enter the name of the foreign country. by Was the organization and 1 is greater than 1 is a bank account, a countries account, or other financial accounts (FEAF). by Was the organization than 1 is was or is a party to a prohibited tax was reported tax shall be a party in the organization than 1 is was or is a party to a prohibited tax shall be a party in the organization and 1 is was or is a party to a prohibited tax shall be organization solicit any contributions that were not tax deductible from 8886-7. by If Yee, 2 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? by Organizations that may receive deductible contributions under section 170(c). by If Yee, 3 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles contributions under section 170(c). by If Yee, 5 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles and the surface of the sur							
Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year anding with or within the year covered by this roturn. Section Part Par	С					v	
tiled for the calendary year ending with or within the year covered by this return 2a 670 b 1f at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 3a 1 with the organization have unrelated business gross income of \$1,000 or more during the year? 3b 1 with the organization have unrelated business gross income of \$1,000 or more during the year? 3b 1 with the organization have unrelated business gross income of \$1,000 or more during the year? 3b 1 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x	0-		 I	 I	1c	^	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b If "Yes," has it filed a Form 900 T for this year? If "No," to line 3b, provide an explanation in Schedule 0 3b X At any time during the calendary 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)? 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. b If "Yes," enter the name of the foreign country. See instructions for filing requirements for finiCEN Form 114, Report of Foreign Bank and Financial account; (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Did to line 3b organization related a party to a prohibited tax shelter transaction at any contributions that were not tax deductible? 6c Did the organization state were not tax deductible as charitable contributions? 6c Did the organization related a payment in excess of 55 made party as a contribution and party for goods and services provided to the payor? 7a X 7b If "Yes," indicate the number of Forms 8282? Filed during the year 1b Did the organization received a payment in excess of 55 made party as a contribution of the value of the goods or services provided? 1b Did the organization received a payment in excess of 55 made party as premiums on a personal benefit contract? 7c X 7d Did the organization received a payment in excess of 55 made party as premiums on a persona	Za		0-	670			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a X 3b X 3c						y	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b 1f *Yes,* has it filed a Form 990* Tor this year? If *No,* to line 3b, provide an explanation in Schedule 0 3b X 4a 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)? 5c If *Yes,* there is the fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c If *Yes,* to line \$a or \$b, did the organization that it was or is a party to a prohibited text shelter transaction at any time during the tax year? 5c If *Yes,* to line \$a or \$b, did the organization that it was or is a party to a prohibited text shelter transaction? 5c If *Yes,* to line \$a or \$b, did the organization that it was or is a party to a prohibited text shelter transaction? 5c If *Yes,* to line \$a or \$b, did the organization that it was or is a party to a prohibited text shelter transaction? 5c If *Yes,* to line \$a or \$b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 6a X 8b If *Yes,* to lid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes,* to lid the organization notify the donor of the value of the goods or services provided? 7c Organization shall may receive deductible contributions under section 170(c). 8d If Yes,* to lid the organization notify the donor of the value of the goods or services provided? 7c Organization received a contribution of qualified intellectual property, did the organization fer provided to the payor of the provided to the payor of the province of the province of the province	D				20	22	
the fif "Yes," has it filed a Form 990-T for this year? fir "No," to line 3b, provide an explanation in Schedule O 4a 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. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If "Yes," to line Sa of Sb, lide the organization file Form 88861? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that terms or tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization seel, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? filed during the year e Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7c X g If the organization received a contribution of cars, bosts, airplanes, or other vehicles, did the organization file a Form 1098-C? 7b Sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Costs income from members or shareholders a Intal B Section 501(c)(12) organizations.	22				22	x	
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 accounts? See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Sa Dos the organization aparty to a prohibited tax shelter transaction at any time during the tax year? Sa Dos 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 as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If "Yes," did the organization riculate with every solicitation an express statement that such contributions or gifts were not tax deductible? Organization stat may receive deductible contributions under section 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization receive a payment in excess of \$75 made pathy as a contribution and pathy for goods and services provided to the payor? To granization self-exchange, or otherwise dispose of tangible personal property for which it was required to the file form 8282? To Use the organization self-exchange, or otherwise dispose of tangible personal property for which it was required? To life form 8282? To Sa							
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14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	С		13c				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					14a		X
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		

Form 990 (2017) Museum of Science and Industry 36-2167797 Page 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 or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 107									
b										
_										
		2	Х							
3										
	of officers, directors, or trustees, or key employees to a management company or other person?									
4	Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year 1			X						
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_		6		Х						
		Ť								
		7a		х						
b										
~		7b		х						
8										
		8a	Х							
	Fach committee with authority to act on behalf of the governing body?	8b	X							
_		05								
•		9		х						
Sec										
	1101 211 0110100 (11110 000tton 12 requeste innermation about politico net required by the internal riorenae occue.)		Yes	No						
10a	Did the organization have local chanters, branches, or affiliates?	10a	103	X						
		100								
		10b								
11a		11a	Х							
		1 Iu								
		12a	Х							
		12b	X							
		120								
·		12c	Х							
13		13	X							
		14	X							
.0										
а		15a	Х							
		15b	X							
		.55								
16a										
.54		16a		х						
h	, , ,	iou								
		16b								
Sec										
17	List the states with which a copy of this Form 990 is required to be filed ▶FL , IL									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	availab	le							
	for public inspection. Indicate how you made these available. Check all that apply.	_								
	X Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial							
	statements available to the public during the tax year.	•								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
	Jonathan Assell - 773-684-1414									
	5700 S. Lake Shore Drive, Chicago, IL 60637-2093									

Form 990 (2017)

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

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

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

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

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

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

(A) Name and Title	(B)	l			C)		iout	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	Average hours per week	box	not c , unle	heck ss pe	more rson	than is bot or/trus	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Kent P. Dauten	1.00	ļ								
Chairman/Trustee	1	Х						0.	0.	0.
(2) Allan E. Bulley, Jr.	1.00									
Vice Chairman/Trustee		Х						0.	0.	0.
(3) Alison L. Chung	1.00									
Vice Chairman/Trustee		Х						0.	0.	0.
(4) Frank M. Clark	1.00									
Vice Chairman/Trustee		Х						0.	0.	0.
(5) Michael W. Ferro, Jr.	1.00								_	
Vice Chairman/Trustee		Х						0.	0.	0.
(6) James A. Gordon	1.00								_	
Vice Chairman/Trustee		Х						0.	0.	0.
(7) Jay L. Henderson	1.00							_	_	_
Vice Chairman/Trustee		Х						0.	0.	0.
(8) Robert A. Livingston	1.00								_	
Vice Chairman/Trustee	1 00	Х						0.	0.	0.
(9) Barry L. MacLean	1.00	١								
Vice Chairman/Trustee	1 00	Х						0.	0.	0.
(10) Sheila A. Penrose	1.00	١								
Vice Chairman/Trustee	1 00	Х						0.	0.	0.
(11) William C. Bartholomay	1.00	٠,							_	0
Trustee	1 00	Х						0.	0.	0.
(12) Christopher B. Begy	1.00	X						0.	0.	0.
Trustee (13) George W. Bilicic	1.00	Δ						0.	0.	<u> </u>
• •	1.00	X						0.	0.	0.
Trustee	1 00	Δ						0.	0.	<u> </u>
(14) Charles K. Bobrinskoy	1.00	x						0.	0.	0.
Trustee (15) Parid G. Pahrath	1.00	Δ						0.	0.	<u> </u>
(15) David C. Bohnett	1.00	x						0.	0.	0
Trustee (16) Matthew J. Boler	1.00	^				\vdash		0.	<u> </u>	0.
Trustee	1.00	x						0.	0.	0.
(17) Barbara L. Bowles	1.00					\vdash			· ·	-
Trustee	1.00	X						0.	0.	0.
11 00000		77					L	<u> </u>	<u> </u>	- 000

Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees,	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not cl , unle: cer an	heck ss pe	rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) Byron T. Brazier, D.Min.	1.00									
Trustee		Х						0.	0.	0.
(19) John A. Canning, Jr. Trustee	1.00	Х						0.	0.	0.
(20) Michelle L. Collins	1.00									
Trustee		Х						0.	0.	0.
(21) Douglas M. Cook Trustee	1.00	Х						0.	0.	0.
(22) Christopher M. Crane Trustee	1.00	х						0.	0.	0.
(23) James S. Crown	1.00							-		
Trustee		Х						0.	0.	0.
(24) Pedro DeJesus, Jr. Trustee	1.00	х						0.	0.	0.
(25) Ann M. Drake	1.00								<u> </u>	-
Trustee		х						0.	0.	0.
(26) James J. Drury III	1.00									
Trustee		Х						0.	0.	0.
1b Sub-total							>	0.	0.	0.
c Total from continuation sheets to Part V							>	3,077,888.		251,426.
d Total (add lines 1b and 1c)							<u> </u>	3,077,888.		251,426.
2 Total number of individuals (including but r	not limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable	31

compensation from the organization

Yes No X 3 Х 4

X

	line 1a? If "Yes," complete Schedule J for such individual
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

rendered to the organization? If "Yes," complete Schedule J for such person

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Midway Building Services		
	Janitorial	1,688,828.
Universal Protection Service LP		
	Security	1,520,146.
MediaOcean/MBuy, 120 S. Riverside Plaza,		
	Advertising	1,419,692.
Berglund Construction Company		
8410 S. Chicago Avenue, Chicago, IL 60617	Construction	1,371,244.
Ravenswood Studio, Inc., 6900 N. Central		
Park Avenue, Lincolnwood, IL 60712	Specialized Designs	1,215,887.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization > 47		

See Part VII, Section A Continuation sheets

Form 990 (2017)

Form 990 Museum o	t Scienc	ce	ar	<u>ıd</u>	Ιı	<u>ıdı</u>	181	try	36-216	7797
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Posi	ition	1		Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				empl		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	n frus		ee/	mpen				organizations
	below	Individual trustee or director	nstitutional trustee	_	Key employee	Highest compensated employee	ъ			organization o
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
(27) W. James Farrell	1.00									
Trustee		Х						0.	0.	0.
(28) David A. Fisher	1.00							-	•	-
Trustee		х						0.	0.	0.
(29) Dennis J. FitzSimons	1.00	 						•		
Trustee		x						0.	0.	0.
(30) Ezequiel (Zeke) Flores	1.00									
Trustee	1.00	x						0.	0.	0.
(31) James J. Fuentes	1.00							0.	•	0.
Trustee	1.00	Х						0.	0.	0.
(32) Matthew R. Gibson	1.00							0.	0.	•
Trustee	1.00	X						0.	0.	0.
(33) Ronald J. Gidwitz	1.00	^						0.	0.	0.
Trustee	1.00	X						0.	0.	0.
	1.00	^						0.	0.	0.
· · · · · · · · · · · · · · · · · · ·	1.00	x						0.	0.	0.
Trustee (25) William M. Goodhaan	1.00	Δ						0.	0.	0.
(35) William M. Goodyear	1.00	x						0.	0.	0.
Trustee (26) Tarrage No. Green	1.00	Δ						0.	0.	0.
(36) James A. Gray	1.00	X						0.	0.	0.
Trustee	1.00	^						0.	0.	0.
(37) Catherine P. Greenspon	1.00	x						0.	0.	0.
Trustee	1.00	^						0.	0.	0.
(38) Doug C. Grissom	1.00	x						0.	0.	0.
Trustee	1.00	Δ						0.	0.	0.
(39) Betsy D. Holden	1.00	X						0.	0.	0
Past Trustee	1 00	Δ						0.	0.	0.
(40) Edward L. Kaplan	1.00								0	0
Trustee	1 00	Х						0.	0.	0.
(41) Michael P. Krasny	1.00	7.							0	^
Trustee	1 00	Х						0.	0.	0.
(42) Avis LaVelle	1.00	,,							0	0
Trustee	1 00	Х						0.	0.	0.
(43) Eric P. Lefkofsky	1.00	,,							•	0
Trustee	1 00	Х						0.	0.	0.
(44) Charles A. Lewis	1.00									_
Trustee	1 00	Х	_			_	<u> </u>	0.	0.	0.
(45) H. John Livingston	1.00									_
Trustee		Х						0.	0.	0.
(46) Christopher B. Lorenzen	1.00	 								_
Trustee		Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 Museum (or Science	ce	aı	ıa	ΤI	iai	1S 1	try	36-216	1191
Part VII Section A. Officers, Directors, T	rustees, Key E	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	ь				oloyee		the	organizations	compensation
	(list any hours for	direct				d emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	ee or	stee			nsate		(** 2) 1000 (**100)		and related
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee				organizations
	below	vidua	itution	ser	Key employee	hest c	Former			
	line)	Indi	Inst	Officer	Key	Higl	Forr			
(47) Duncan A. L. MacLean	1.00									
Trustee		Х						0.	0.	0
(48) DG Macpherson	1.00									
Trustee		Х						0.	0.	0
(49) Matthew M. Maloney	1.00									
Trustee		Х						0.	0.	0
(50) Walter E. Massey, Ph.D.	1.00									
Trustee		Х						0.	0.	0
(51) Andrew J. McKenna	1.00									
Trustee		Х						0.	0.	0
(52) William L. Morrison	1.00									
Past Trustee		Х						0.	0.	0
(53) Oscar Munoz	1.00									
Trustee		Х						0.	0.	0
(54) Robert S. Murley	1.00							_	_	_
Trustee		Х						0.	0.	0
(55) William A. Mynatt, Jr.	1.00								_	
Trustee		Х						0.	0.	0
(56) Robert F. Pasin	1.00	ļ								
Trustee		Х						0.	0.	0
(57) James M. Peck	1.00	ļ								
Trustee		Х						0.	0.	0
(58) Jason Pritzker	1.00	ļ								•
Trustee	1 00	Х						0.	0.	0
(59) Scott A. Rafferty	1.00	ļ							•	
Past Trustee	1 00	Х						0.	0.	0
(60) J. Christopher Reyes	1.00	١								
Trustee	1 00	Х						0.	0.	0
(61) Larry D. Richman	1.00	١								
Trustee	1 00	Х						0.	0.	0
(62) James A. Robinson	1.00	١,,							0	
Trustee	1 00	Х						0.	0.	0
(63) Desiree Rogers	1.00	٠,							_	_
Trustee	1 00	Х	_			_		0.	0.	0
(64) Jesse H. Ruiz	1.00	 								_
Trustee	1 00	Х	_	\vdash		_		0.	0.	0
(65) Michael J. Sacks	1.00	٠,							_	_
Trustee	1 00	Х	_	\vdash		_	_	0.	0.	0
(66) Juan Salgado	1.00	x						0.	0.	0
Past Trustee										

Form 990 Museum o	f Science	ce	ar	<u>ıa</u>	ΔI	ndı	1S1	try	36-216	7797
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	oyee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	L				oyee		the	organizations	compensation
	(list any	director				em pl		organization	(W-2/1099-MISC)	from the
	hours for related	or di	tee			sated		(W-2/1099-MISC)		organization
	organizations	Individual trustee or	Institutional trustee		99	npen				and related organizations
	below	dualt	rtiona	_	mplo)	st cor	<u></u>			organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
(67) Manuel Sanchez	1.00									
Trustee		Х						0.	0.	0.
(68) John F. Sandner	1.00									
Trustee		Х						0.	0.	0.
(69) E. Scott Santi	1.00									
Trustee		Х						0.	0.	0.
(70) Ronald M. Saslow	1.00									
Past Trustee		Х						0.	0.	0.
(71) Smita Shah	1.00							_	_	_
Trustee	1 00	Х						0.	0.	0.
(72) Ilan Shalit	1.00	۱								•
Trustee	1 00	Х						0.	0.	0.
(73) Virginia K. Simmons	1.00	۱								•
Trustee	1 00	Х						0.	0.	0.
(74) Gregory D. Smith	1.00	ļ ,,							0	0
Trustee	1 00	Х						0.	0.	0.
(75) Melody A. Spann-Cooper	1.00	x						0.	0.	0.
Trustee (76) J. Douglas Sparkman	1.00	^						0.	0.	0.
(76) J. Douglas Sparkman Trustee	1.00	X						0.	0.	0.
(77) Byron O. Spruell	1.00	122						0.	•	•
Trustee	1.00	x						0.	0.	0.
(78) Shundrawn A. Thomas	1.00	123							•	•
Trustee	1,00	x						0.	0.	0.
(79) Elizabeth M. Thompson	1.00									
Past Trustee		x						0.	0.	0.
(80) Ralph Wanger	1.00	<u> </u>						-	<u> </u>	
Trustee		x						0.	0.	0.
(81) Gregory D. Wasson	1.00									
Trustee		X						0.	0.	0.
(82) Ann C. Williams	1.00									
Trustee		Х						0.	0.	0.
(83) Neal S. Zucker	1.00									
Trustee		X						0.	0.	0.
(84) Rhett W. Butler	1.00									
Life Trustee		Х			L	L	L	0.	0.	0.
(85) Peter R. Carney	1.00									-
Life Trustee		Х				L		0.	0.	0.
(86) Lester Crown	1.00									
Life Trustee		Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 Museum o	DOTOR		<u> </u>			100	15	CT À	36-216	1131
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi	ition	1		Reportable	Reportable	Estimated
	hours	(c	neck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					loyee		the	organizations	compensation
	(list any hours for	lirecto				d em b		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or (stee			ısate		(***-27 1099-181130)		and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	idual	tution	ъ	Key employee	est cc	Je.			0
	line)	Indi	Insti	Officer	Key	High	Former			
(87) Victor J. Danilov, Ed.D.	1.00									
Life Trustee		Х						0.	0.	0.
(88) Robert J. Darnall	1.00									
Life Trustee		Х						0.	0.	0.
(89) William J. Devers, Jr.	1.00									
Life Trustee		Х						0.	0.	0.
(90) Jere D. Fluno	1.00									
Life Trustee		Х						0.	0.	0.
(91) J. Ira Harris	1.00									
Life Trustee		Х						0.	0.	0.
(92) Richard M. Jaffee	1.00									
Life Trustee		Х						0.	0.	0.
(93) James R. Kackley	1.00									
Life Trustee		Х						0.	0.	0.
(94) John P. Keller	1.00							_	_	_
Life Trustee		Х						0.	0.	0.
(95) Fredrick A. Krehbiel	1.00									
Life Trustee	1 00	Х						0.	0.	0 .
(96) Leon M. Lederman, Ph.D.	1.00	,,							0	0
Life Trustee	1 00	Х						0.	0.	0.
(97) Richard H. Lenny	1.00	٠,,							0	0
Life Trustee	1 00	Х						0.	0.	0 .
(98) Edward M. Liddy	1.00	\ \ -							0	0
Life Trustee	1 00	Х						0.	0.	0.
(99) Charles S. Locke	1.00	X						0.	0	0
Life Trustee	1.00	Δ						0.	0.	0 .
(100) Thomas L. Martin, Jr., Ph.D.	1.00	Х						0.	0.	0.
Past Life Trustee (101) Robert S. Morrison	1.00	^						0.	0.	0 .
Life Trustee	1.00	Х						0.	0.	0.
(102) Terry E. Newman	1.00							0.	· ·	0.
Life Trustee	1.00	Х						0.	0.	0.
(103) John D. Nichols	1.00								•	0.
Past Life Trustee	1.00	Х						0.	0.	0.
(104) James J. O'Connor	1.00								•	0 .
Life Trustee		Х						0.	0.	0.
(105) Wlliam A. Osborn	1.00									<u> </u>
Life Trustee		Х						0.	0.	0.
(106) Walter R. Peirson	1.00									<u> </u>
		ı				ı	ı	i	_	_
Life Trustee		Х						0.	0.	0.

Form 990 Museum C	of Science	ce	ar	<u>ıd</u>	Ir	ıdι	ıst	try	36-216	7797
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per					63		from	from related	other
	week (list any	jō				Highest compensated employee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				ne p		(W-2/1099-MISC)	(***2/1099*****100)	organization
	related	ee or	stee			en sate		(** = / ********************************		and related
	organizations	Itrust	nal fru		oyee	ошре				organizations
	below	ndividual trustee or director	nstitutional trustee	Officer	Key employee	hest o	Former			
	line)	Pul	Sul	Ħ	Ke	Hig	For			
(107) Cindy Pritzker	1.00								•	•
Life Trustee	1 00	Х						0.	0.	0.
(108) Louis A. Simpson	1.00									•
Life Trustee	1 00	Х						0.	0.	0.
(109) James A. Skinner	1.00	٠,,							0	0
Life Trustee	1 00	Х						0.	0.	0.
(110) S. Jay Stewart	1.00	. ,							0	0
Life Trustee	1.00	Х						0.	0.	0.
(111) Eugene A. Tracy	1.00	X						0.	0.	0.
Life Trustee	1.00	^						0.	0.	0.
(112) Arthur R. Velasquez Life Trustee	1.00	X						0.	0.	0.
(113) Arnold R. Weber, Ph.D.	1.00	Δ						0.	· ·	•
Life Trustee	1.00	x						0.	0.	0.
(114) David R. Mosena	35.00							0.	0.	•
President/Trustee	33.00	x		x				666,672.	0.	27,014.
(115) David J. Vitale	1.00							000,012.	•	27,011.
Treasurer/Trustee	1100	x						0.	0.	0.
(116) Eileen M. Cabrera	35.00	 						•		
Secretary/Assistant to President		1		x				97,505.	0.	8,293.
(117) Kurt E. Haunfelner	35.00							,,,,,,,		- ,
VP - Exhibits and Collections		1		х				272,998.	0.	9,950.
(118) Matthew C. Simpson	35.00							,		,
VP - Marketing/Public Relations		1		х				230,872.	0.	28,695.
(119) Yolanda Stephens	35.00									-
VP - Human Resources				Х				185,769.	0.	26,246.
(120) Andrea J. Ingram	35.00									
VP - Education and Guest Services				Х				229,263.	0.	15,185.
(121) Sheila M. Cawley	35.00									
VP - External Affairs				Х				251,924.	0.	28,263.
(122) Rose B. Fealy	35.00									
VP - Finance & Administration				Х				242,608.	0.	9,889.
(123) Mary Krinock	35.00									
Chief of Staff				Х				199,768.	0.	15,402.
(124) Edward McDonald	35.00							4	_	40
Director of Facilities	1					Х		145,197.	0.	18,620.
(125) Anne Rashford	35.00	1						4=4	_	40
Director of Temporary Exhibits	1					Х		151,025.	0.	13,447.
(126) Bryan Wunar	35.00	-						122 224		04 00=
Director of Community Initiatives						Х		132,331.	0.	24,985.
Total to Part VII, Section A, line 1c										

Form 990 Museum of	f Scienc	ce	ar	1d	Ιı	ndı	ıst	try	36-216	7797
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	(6	Position (check all that				h/)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatior from the organization and related organizations
(127) Christopher Wilson	35.00					l		122 465	•	00 054
Director of Exhibit Projects & Ops.	25 00					Х		133,467.	0.	20,254
(128) Hsinghua Chen General Counsel	35.00					х		138,489.	0.	5,183
otal to Part VII, Section A, line 1c								3,077,888.		251,426

Form 990 (2017) Museum of Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
Gra Iou	b	Membership dues	1b	3,061,155.				
S, (С	Fundraising events	1c	1,974,020.				
la la	d	Related organizations	1d					
imi	е	Government grants (contribution	ons) 1e	6,033,180.				
tion Y	f	All other contributions, gifts, grants	s, and					
ig i		similar amounts not included abov	e 1f	15,055,770.				
d of	g	Noncash contributions included in lines	1a-1f: \$	823,324.				
္မွ မ	h	Total. Add lines 1a-1f		>	26,124,125.			
				Business Code				
စ္ပ	2 a	General Admissions		900099	10,313,439.	10,313,439.		
Program Service Revenue	b	Special Exhibits		900099	2,916,736.	2,916,736.		
Sur	С	U-505 Permanent Exhibit	s	900099	1,595,106.	1,595,106.		
eve	d	Coal Mine Permanent Exh	nibits	900099	1,199,053.	1,199,053.		
og R	е	Giant Dome Theater		900099	849,971.	849,971.		
P.	f	All other program service rever	nue	900099	1,392,434.	1,392,434.		
		Total. Add lines 2a-2f			18,266,739.			
	3	Investment income (including						
		other similar amounts)			2,298,280.			2,298,280.
	4	Income from investment of tax						
	5	Royalties			538.			538.
		j	(i) Real	(ii) Personal				
	6 a	Gross rents	1,147,579					
	b	Less: rental expenses	820,763					
		Rental income or (loss)	326,816					
		Net rental income or (loss)	•		326,816.		326,816.	
		Gross amount from sales of	(i) Securities	(ii) Other	·		·	
	-	assets other than inventory	35,509,510	 '				
	b	Less: cost or other basis						
			34,099,397	12,443.				
	С	Gain or (loss)						
		Net gain or (loss)			1,397,670.			1,397,670.
Other Revenue		Gross income from fundraising including \$ 1,974,	events (not					
Ş		contributions reported on line						
ă.				111,100.				
her	h	Part IV, line 18 Less: direct expenses	a b	100 011				
ŏ		Net income or (loss) from fund		1,2,214.	-382,114.			-382,114.
			-		302,114.			302,114.
	o d	Gross income from gaming act		1,500.				
	L	Part IV, line 19 Less: direct expenses		10.010				
					-9,319.			-9,319.
		Net income or (loss) from gami			٥,315.			7,317.
	iu a	Gross sales of inventory, less r		1 120 527				
		and allowances						
		Less: cost of goods sold			פבח פב		721 715	125 510
	С	Net income or (loss) from sales			860,255.		724,745.	135,510.
	44	Miscellaneous Revenue		Business Code	2 275 025			2 275 025
	11 a	Parking and Other Guest	services	900099	2,275,025.			2,275,025.
	b	Food Court		722514	1,124,996.			1,124,996.
	С	All alla anno		900000	1 750 644	072 720	777 000	
	d	All other revenue		900099	1,750,644.	972,738.	777,906.	
				·····	5,150,665.	10 220 477	1 000 465	6 040 506
	12	Total revenue. See instructions.			54,033,655.	19,239,477.	1,829,467.	6,840,586.

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). Check if Schedule O contains a response or note to any line in this Part IX (C) (D) (A) Total expenses Do not include amounts reported on lines 6b. Program service expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 6,000. individuals. See Part IV, line 22 6,000. 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 2,277,449. 1,063,332. 561,983. 652,134. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 20,620,923. 15,624,851. 2,967,468. 2,028,604. Other salaries and wages 7 Pension plan accruals and contributions (include 573,202 347,337. 168,889. 56,976. section 401(k) and 403(b) employer contributions) 416,720. 2,670,581. 22,736. 3,110,037. 9 Other employee benefits 1,573,799. 953,659. 463,705. 156,435. 10 Payroll taxes Fees for services (non-employees): a Management 194,300. 194,300. Legal 81,211. 81,211. Accounting Lobbying Professional fundraising services. See Part IV, line 17 202,649. 202,649. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 3,888,366. 5,008,270. 384,477. 735,427. column (A) amount, list line 11g expenses on Sch O.) 2,941,392. 361,631. 3,310,833. 7,810. Advertising and promotion 12 60,789. $1\overline{58,107}$ 1,378,927. 1,160,031. 13 Office expenses 958,861. 273,888. 130,024. 1,362,773. Information technology 14 Royalties 15 1,239,843. 1,165,041. 74,802. 16 Occupancy 976,255. 616,303. 268,475. 91,477. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,323,581. 1,323,581. 20 Payments to affiliates 21 13,166,765. 295,202. 12,871,563. Depreciation, depletion, and amortization 22 468,034. 430,388. 37,646. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Building Maintenance 2,432,220. 2,303,350. 123,869. 5,001. Exhibit Rental Expense 1,778,802. 1,768,519. 1,945. 8,338. 11,746. Program Development 1,536,417. 1,125,089. 399,582. 627,259. 599,641. d Bank & Credit Card Fees 27,618. 921,185. 95,682. 640,866. 184,637. e All other expenses 4,591,367. 64,170,734. 52,458,751. 7,120,616. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here if following SOP 98-2 (ASC 958-720)

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 4,123,504. 1,669,369. Cash - non-interest-bearing 1 2,611,375. 1,557,114. 2 Savings and temporary cash investments 30,839,054. 26,421,466. 3 Pledges and grants receivable, net 1,576,236. 1,457,663. 4 Accounts receivable, net **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other 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 instr). Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 389,807. 409,528. 8 Inventories for sale or use 1,358,264. 1,198,438. Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 364,769,895. b Less: accumulated depreciation _________10b 231,590,219. 141,069,954. 133,179,676. 10c 57,124,525. 76,985,906. Investments - publicly traded securities 11 11 36,213,287. 29,234,567. 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 945,488. 1,078,884. 15 Other assets. See Part IV, line 11 15 276,251,494. 273,192,611. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 5,882,294. 17 5,453,003. 17 Accounts payable and accrued expenses 18 18 Grants payable 862,559. 1,746,663. 19 19 Deferred revenue 58,697,684. 57,991,398. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, _iabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 4,126,502. 3,136,924. Schedule D 70,453,143. 67,443,884. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 148,040,398. 147,744,620. Unrestricted net assets 31,545,673. 31,032,514. 28 Temporarily restricted net assets 26,212,280. 26,971,593. 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 205,748,727. 205,798,351. Total net assets or fund balances 33 33 276,251,494. 273,192,611. Total liabilities and net assets/fund balances

Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				55.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,17	•	
3	Revenue less expenses. Subtract line 2 from line 1	3	-10			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	205			
5	Net unrealized gains (losses) on investments	5	10	, 56	5,4	27.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-47	7,9	72.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	205	,74	8,7	27.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Ш
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e 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 Sch	edule O.				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle 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	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization Museum of Science and Industry 36-2167797 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 12, 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 (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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.)

Sec	ction A. Public Support		•	•						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
	Gifts, grants, contributions, and	,	, ,	. ,	, ,	, ,	.,			
	membership fees received. (Do not									
	include any "unusual grants.")	16,744,534.	20,572,431.	47,923,500.	27,598,744.	20,640,157.	133,479,366.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf	5,607,427.	5,690,148.	5,717,121.	5,686,336.	5,483,968.	28,185,000.			
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	22,351,961.	26,262,579.	53,640,621.	33,285,080.	26,124,125.	161,664,366.			
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)						19,971,840.			
6	Public support. Subtract line 5 from line 4.						141,692,526.			
Sec	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
7	Amounts from line 4	22,351,961.	26,262,579.	53,640,621.	33,285,080.	26,124,125.	161,664,366.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	2,679,136.	3,792,389.	2,243,107.	2,592,270.	2,298,818.	13,605,720.			
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 VI.)	3,793,450.	3,809,840.	4,491,024.	5,782,062.	4,620,869.	22,497,245.			
11	Total support. Add lines 7 through 10						197,767,331.			
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 94	,447,306.			
13	First five years. If the Form 990 is for	r the organization's	s first, second, third	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)				
~	organization, check this box and stor						<u></u>			
	ction C. Computation of Publ						71 (5			
	Public support percentage for 2017 (14	71.65 %			
	Public support percentage from 2016					15	73.60 %			
16a	33 1/3% support test - 2017. If the o	•		•		•				
_	stop here. The organization qualifies									
b	33 1/3% support test - 2016. If the d	-								
4-	and stop here. The organization qualifies as a publicly supported organization									
17a	17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization									
	meets the "facts-and-circumstances"									
b	b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the									
	organization meets the "facts-and-circ						>			
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s			

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

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support	olow, please com	proto r urt m.j				
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and	• •				, ,	
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
<u>Se</u>	ction B. Total Support						
	endar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital				1		
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>		
14	First five years. If the Form 990 is for	the organization	s first, second, thi	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	zation,
<u></u>	check this box and stop here ction C. Computation of Publi						P
	Public support percentage for 2017 (I			actume (fl)		15	0/
	Public support percentage for 2017 (i					16	<u>%</u> %
	ction D. Computation of Inves					10	70
17						17	%
	Investment income percentage from 2					18	
	a 33 1/3% support tests - 2017. If the						
.50	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2016. If the						
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization			•		ŭ	

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete :	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y integr	ated Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

ı aı	Type in Non-Functionally integrated 509	(a)(s) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	е	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		·	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i_	Carryover from 2012 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A, Part II, Line 10, Explanation for Other Income:

Miscellaneous Revenue

2013 Amount: \$ 77,625.

2014 Amount: \$ 383,074.

2015 Amount: \$ 528,685.

2016 Amount: \$ 1,715,032.

2017 Amount: \$ 944,328.

Film Lease Revenue

2016 Amount: \$ 29,489.

2017 Amount: \$ 28,410.

Film Product Revenue

2013 Amount: \$ 11,350.

2014 Amount: \$ 530.

2015 Amount: \$ 2,200.

Food Court Revenue

2013 Amount: \$ 924,689.

2014 Amount: \$ 976,195.

2015 Amount: \$ 1,440,473.

2016 Amount: \$ 1,391,486.

2017 Amount: \$ 1,124,996.

Parking and Other Services

2013 Amount: \$ 2,373,924.

2014 Amount: \$ 2,022,752.

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

2015 Amount: \$ 2,130,556.

2016 Amount: \$ 2,183,003.

2017 Amount: \$ 2,275,025.

Sponsorship Revenue

2013 Amount: \$ 225,000.

2014 Amount: \$ 240,000.

2015 Amount: \$ 249,035.

2016 Amount: \$ 295,000.

Fundraising Events Revenue

2013 Amount: \$ 156,742.

2014 Amount: \$ 129,441.

2015 Amount: \$ 74,056.

2016 Amount: \$ 102,225.

2017 Amount: \$ 111,100.

Gaming Revenue

2013 Amount: \$ 8,600.

2014 Amount: \$ 5,950.

2015 Amount: \$ 6,200.

2016 Amount: \$ 3,250.

2017 Amount: \$ 1,500.

Sales of Inventory

2013 Amount: \$ 15,520.

2014 Amount: \$ 51,898.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization

Employer identification number

OMB No. 1545-0047

Museum of Science and Industry

36-2167797

Organization type (check one):								
Filers of:		Section:						
Form 990	or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization						
Form 990)-PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
Note: Or	lly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General	Rule							
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special l	Rules							
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$\Bigsim \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \t							
but it mu	st answer "No" on l	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization Employer identification number

Museum of Science and Industry

36-2167797

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1		\$5,483,968.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2		\$ 4,225,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3		\$1,010,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4		\$1,010,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

Employer identification number

Museum of Science and Industry

36-2167797

Part II	Noncash Property (see instructions). Use duplicate copies of Po	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—			
	-17	Sahadula B (Fares	 990, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 4 Name of organization Employer identification number 36-2167797 Museum of Science and Industry Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047 **2017**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	Ocation 501(a)(4), (5), and (0), and a	tions Occasion Book III			
	Section 501(c)(4), (5), or (6) organizate of organization	tions: Complete Part III.		l F	mployer identification number
IVAII	· ·	of Science and I	nduatry	_	36-2167797
Pa	ort I-A Complete if the ord	ganization is exempt und	er section 501(c)	or is a section 52	
		,aa	<u> </u>		. o.gaa
1	Provide a description of the organiz	ration's direct and indirect politic	al campaign activities	in Part IV	
	Political campaign activity expendit	•	. •		> \$
	Volunteer hours for political campai				Ψ
Ŭ	volaritoor riodro for political campai	gir donvidos			
Pa	rt I-B Complete if the org	janization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955)	> \$
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	5	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes Mo
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				04(-1(0)
		anization is exempt und			
	Enter the amount directly expended	, ,	·		> \$
2	Enter the amount of the filing organ		-		
_	exempt function activities				> \$
3	Total exempt function expenditures				
	line 17b				> \$
4	Did the filing organization file Form				
5	Enter the names, addresses and en				
	made payments. For each organiza contributions received that were pro-	•	0 0		•
	political action committee (PAC). If				barate segregated fand of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	m (e) Amount of political
	(a) Name	(b) Address	(C) LIN	filing organization's	1 ' '
				funds. If none, enter	-0 promptly and directly
					delivered to a separate political organization.
					If none, enter -0
			1	I	I

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

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form	n 990 or 990-EZ) 2017	Museu	m of S	cience and	Industry	36-2	2167797 Page 2	
Part II-A Co	omplete if the org	janizatio	on is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	lection under	
Se	ection 501(h)).							
A Check ► L	$oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{ol{ol}}}}}}}}}}}}}}}}}}}}$ if the fitten is the proposition of the proposition of the boldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{ol{oldsymbol{ol{ol}}}}}}}}}}}}}}}}}}}}}}}	tion belon	gs to an affi	liated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,	
_	expenses, and sha	re of exces	ss lobbying	expenditures).				
B Check ► L	if the filing organiza	tion check	red box A ar	nd "limited control" pro	ovisions apply.			
			bying Expe neans amou	nditures ınts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbyi	ing expenditures to infl	uence pub	olic opinion (grass roots lobbying)				
	ing expenditures to infl				ī			
	ing expenditures (add I							
	pt purpose expenditur				ī			
e Total exemp	ot purpose expenditure							
	ontaxable amount. Ent				ī			
	t on line 1e, column (a) c			bying nontaxable am	11			
Not over \$5	500,000		20% of	the amount on line 1e				
Over \$500,0	000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	cess over \$500,000.			
Over \$1,000	0,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exc	cess over \$1,000,000.			
Over \$1,500	0,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000.			
Over \$17,00	Over \$17,000,000 \$1,000,000.							
					•			
g Grassroots	nontaxable amount (er	nter 25% c	of line 1f)					
h Subtract lin	e 1g from line 1a. If zer	o or less, e	enter -0					
i Subtract lin	e 1f from line 1c. If zero	o or less, e	nter -0					
j If there is ar	n amount other than ze	ro on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720			
reporting se	ection 4911 tax for this	year?					Yes No	
(:	Some organizations t		a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns I	pelow.	
		Lobl	oying Expe	nditures During 4-Ye	ar Averaging Period		_	
	endar year ear beginning in)	(a)	2014	(b) 2015	(c) 2016	(d) 2017	(e) Total	
2a Lobbying no	ontaxable amount							
b Lobbying co	eiling amount							
(150% of lin	ne 2a, column(e))							
c Total lobbyi	ing expenditures							
	nontaxable amount							
	e Grassroots ceiling amount							
(150% of lin	ne 2d, column (e))							
f Grassroots	lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2017 Museum of Science and Industry 36-216779 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)).

For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b)	
of th	e lobbying activity.	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:				
а	Volunteers?		X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
	Media advertisements?		Х		
d	Mailings to members, legislators, or the public?		Х		
	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		Х		
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		24	1,249.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?		Х		0.40
	Total. Add lines 1c through 1i			24	1,249.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	FO4/-\	(F) an ac	. 4.1	
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or sec	ction	
				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?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t				
	t III-B Complete if the organization is exempt under section 501(c)(4), secti			ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total		1 - 1		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Pai	t IV Supplemental Information				
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list); Part I	I-A, lines 1 ar	nd 2 (see	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
Pa:	rt II-B, Line 1b:				
Mal	ke direct contact with covered federal and state of	ficial	ls as i	t rel	ates
+ -	the Museum's needs				
LO	the Museum's needs.				
Pa:	rt II-B, Line 1g:				
- 4.	/				

Schedule C (Form 990 or 990-EZ) 2017

Strategic counsel, government affairs and lobbying.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Museum of Science and Industry

Employer identification number 36-2167797

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	e conferring
_	impermissible private benefit?		
Pai	rt II Conservation Easements. Complete if the or		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а			
b	, , , , , , , , , , , , , , , , , , , ,		
С	Number of conservation easements on a certified historic st		
d	(/ 1		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, han	idling of violations, and enforcing conserv	ation easements during the year
•			0(1-)(4)(D)(2)
8	Does each conservation easement reported on line 2(d) about the section 4.70(h)(A)(D)(i)0		
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation by the described by the de	-	
	include, if applicable, the text of the footnote to the organiza	ation's imancial statements that describes	s the organization's accounting for
Pai	rt III Organizations Maintaining Collections of	of Art Historical Treasures or C	Other Similar Assets
ı u.	Complete if the organization answered "Yes" on Forr		The Chima Access.
12	If the organization elected, as permitted under SFAS 116 (A		ment and halance sheet works of art
ıa	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		ande of public service, provide, in rail XIII,
h	If the organization elected, as permitted under SFAS 116 (A		at and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition,		
	relating to these items:	saddation, or rescaron in farther and or pr	able service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		• •
2	If the organization received or held works of art, historical tre		
-	the following amounts required to be reported under SFAS		a. ga, provido
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

Par	t III Organizations Maintaining C	ollections of Ar	t, Histor	ical Tr	easures,	or Othe	er Simi	lar Ass	sets(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check ar	y of the	following tha	at are a s	ignifican	t use of it	ts collection	n iten	ns
	(check all that apply):										
а	Yublic exhibition	d	Loa	n or excl	hange progr	ams					
b	Scholarly research	е	U Oth	er							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how they	further th	he organizat	ion's exe	mpt pur	oose in P	art XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, histor	rical treas	sures, or oth	er similaı	r assets	_		_	_
_	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the org	ganizatio	n answered	"Yes" on	Form 99	90, Part I	V, line 9, o	r	
	reported an amount on Form 990, Pai										
1a	Is the organization an agent, trustee, custodi		-								٦
	on Form 990, Part X?							L	Yes		∐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing tabl	e:				1	•		
	Destination below a						4-		Amour	nt	
	Beginning balance							-			
	Additions during the year										
	Distributions during the year						1e				
	Ending balance								Yes	Т	No
	If "Yes," explain the arrangement in Part XIII.						•	∟	162	F	
Par											
		(a) Current year	(b) Prior		(c) Two yea			vears had	k (e) Fou	r vears	hack
1a	Beginning of year balance	18,883,483.	_ ` ,	8,470.	, ,	0,746.		661,559			,608.
	Contributions	6,471,518.		0,229.		5,679.		5,000			,000.
	Net investment earnings, gains, and losses	3,132,501.		1,831.		3,255.		107,782			,022.
	Grants or scholarships	, ,	•	,		,		,			
	Other expenditures for facilities										
	and programs	862,021.	40	7,047.	33	4,700.		273,595	5.	206	,071.
f	Administrative expenses	·						· ·			
	End of year balance	27,625,481.	18,88	3,483.	10,86	8,470.	6,	500,746	5. 6	,661	,559.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, c	olumn (a	a)) held as:	•			•		
а	Board designated or quasi-endowment	•	%								
b	Permanent endowment ► 87.70	%									
С	Temporarily restricted endowment ▶ 1	2.3 0 %									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	ssion of the organiza	ation that a	e held a	nd administe	ered for t	he orgar	ization			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		X
	(ii) related organizations										X
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of the		wment fund	ds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere										
	Description of property	(a) Cost or of		٠,	or other	٠,	ccumula		(d) Boo	ok valu	ie
		basis (investri	ient)	basis ((orner)	aer	preciatio	11			
	Land		7 7	<u>n a1</u>	5,375.	95 (047,0	111	75,86	<u>ρ</u> 2	61
	Buildings		'	U, JI	J,J/J•	95,0	υ 	/ ' ' ' '	13,00	0,3	01.
	Leasehold improvements		1	9 61	4,867.	13 (915 9	320	5,69	g n	47
	Equipment				9,653.				51,61		
	Other								$\frac{31,01}{33,17}$		
ıvıdı	i Add iilies Ta tiliougit Te. joolulliit ju <i>j illust</i> e	guari Omi 990, Fdil.	n, colullii (וווופן, וווו די	<i>oo.</i> /			,	ule D (For		

Part VII	Investments - Other Securities.

Complete if the organization answered "Yes"	on Form 990. Part IV. line	11b. See Form 990. Part X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Equity Funds	24,018,416.	End-of-Year Market Value
(B) Fixed Income Funds	5,216,151.	End-of-Year Market Value
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	29,234,567.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		

Part IX Other Assets.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

(6) (7) (8) (9)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Desc	ription of liability	(b) Book value
(1) Federal income taxes		
(2) Interest Rate		570,613.
(3) Asset Retireme	ent Obligation	1,015,669.
(4) Funds on Depos	sit	215,790.
(5) Purchase Agree	ement	1,334,852.
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form	990, Part X, col. (B) line 25.)	3,136,924.

^{2.} Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII X

202,648.

Part XIII Supplemental Information.

a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.)

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

c Add lines 4a and 4b

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

Part III, line 1a:

The Museum's permanent collections, which were acquired since the Museum's inception through purchases and contributions from benefactors, are not recognized as assets on the statements of financial position. Purchases of collection items are recorded as decreases in unrestricted net assets in the year in which the items are acquired or as decreases in temporarily restricted net assets if the assets used to purchase the items were restricted by donors.

The Museum's collections are made up of artifacts of historical significance, scientific specimens and art objects that are held for educational, research, scientific and curatorial purposes. Each of the

-37,082.

64,170,734.

Part XIII Supplemental Information (continued)

items is cataloged, preserved and cared for, and activities verifying the items' existence and assessing their condition are performed continuously.

The collections are subject to the Museum's policy that requires proceeds from their sales to be used to acquire other items for collections.

Part III, line 4:

The Museum's collection - with almost 40,000 objects that showcase advances in science, industry and technology - serves to create spectacular exhibits and experiences that excite and inspire Museum guests and further the Museum's mission and vision. Remarkable artifacts in the collection include the 700-ton U-505 submarine; a real United 727 airplane; the Pioneer Zephyr, the train that set the speed record in 1934; a British Spitfire WWII plane; a collection of carefully preserved human anatomical slices and fetuses; and much more. The Museum's collections are designed to spark scientific inquiry and creativity to motivate children to achieve their full potential in science, technology, medicine and engineering in furtherance of the Museum's exempt purpose.

Part V, line 4:

The organization's endowment funds are meant to serve as a source of financial support of the Museum's mission. A portion of annual endowment earnings are used to support museum general operations. Earnings are directed to specific elements of the Museum's operations as directed by donor restrictions on respective contributions to the endowment.

Part X, Line 2:

The Financial Accounting Standards Board (FASB) issued guidance that requires tax effects from uncertain tax positions to be recognized in the

Part XIII | Supplemental Information (continued)

financial statements only if the position is more likely than not to be sustained if the position were to be challenged by a taxing authority.

Management has determined that there are no material uncertain positions that require recognition in the financial statements. There are no tax positions for which a material change in any unrecognized tax benefit or liability is reasonably possible in the next twelve months.

The Museum has federal net operating loss carryforwards available to offset future unrelated business taxable income. The net operating loss carryforwards expire through 2035 and total approximately \$4,100,000 and \$4,200,000 at December 31, 2017 and 2016, respectively. As of December 31, 2017 and 2016, management has determined the likelihood of realizing the benefit from a future reversal of the net operating loss carryforwards is uncertain. Therefore, a 100% allowance has been applied to the deferred tax assets associated with the net operating loss carryforwards of \$1,100,000 and \$1,600,000 at December 31, 2017 and 2016, respectively.

The Museum files Forms 990 in the U.S. federal jurisdiction and the State of Illinois. Tax years before 2014 are generally no longer subject to examination by the Internal Revenue Service.

Part XI, Line 2d - Other Adjustment	ts	:
-------------------------------------	----	---

Gaming Expenses	10,819.
Rental Expenses	820,763.
Cost of Goods Sold	269,282.
Fundraising Expenses	493,214.
Total to Schedule D, Part XI, Line 2d	1,594,078.

Schedule D (Form 990) 2017 Museum of Science and Industry	36-2167797 Page 5
Part XIII Supplemental Information (continued)	
Part XI, Line 4b - Other Adjustments:	
Change in Value of Interest Rate Swap	-239,730.
Part XII, Line 2d - Other Adjustments:	
Gaming Eypenses	10,819.
Rental Expenses	820 763.
Cost of Goods Sold	
	269,282.
Fundraising Expenses	493,214.
Total to Schedule D, Part XII, Line 2d	1,594,078.
Part XII, Line 4b - Other Adjustments:	
Change in Value of Interest Rate Swap	-239,730.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

Museum of Science and Industry

Employer identification number 36-2167797

Schedule G (Form 990 or 990-EZ) 2017

Part I Fundraising Activities required to complete this par	Complete if the organization answe	red "Y	es" o	n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not
 Indicate whether the organization rais a Mail solicitations Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, P If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includerofess	non-g gover ising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con or con contrib	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
List all states in which the organization or licensing.	on is registered or licensed to solicit (contrib	outions	s or has been notified	d it is exempt from re	egistration

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

Fundraising Events. Complete if the organization answered "Yes" on 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 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events Black Columbian None (add col. (a) through Ba11 Creativity col. (c)) (event type) (event type) (total number) Revenue 384,565. 1,700,555. 2,085,120. 1 Gross receipts 1,647,455. 326,565. 1,974,020. 2 Less: Contributions 111,100.58,000. 53,100. 3 Gross income (line 1 minus line 2) 4 Cash prizes 10,819. 20,300. 31,119. 5 Noncash prizes Direct Expenses 6 Rent/facility costs 133,866. 127,890. 261,756. 7 Food and beverages <u>52,</u>750. 9,400. 43,350. 8 Entertainment 52,069. 147,589. 95,520. 9 Other direct expenses 493,214. **10** Direct expense summary. Add lines 4 through 9 in column (d) -382,114. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? 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:

Sch	nedule G (Form 990 or 990-EZ) 2017 Museum of Science and Industry 36-2	<u> 167</u>	191	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	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
12	Indicate the percentage of gaming activity conducted in:			
		۔مد ا	I	0/
	a The organization's facility	13a		%
	o An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🔲	Yes	☐ No
ŀ	o If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount			
	of gaming revenue retained by the third party >\$			
	If "Yes," enter name and address of the third party:			
	- · · · · · · · · · · · · · · · · · · ·			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	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			
•			Yes	☐ No
	retain the state gaming license?	. —	163	NO
t	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 ▶ \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, li	nes 9,	9b, 10)b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	i (Form 990 or 990-EZ)	Museum of	Science	<u>a</u> nd	Industry	36-2167797	Page 4
Part IV	i (Form 990 or 990-EZ) Supplemental Info	rmation (continued)					
					·		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047 **2017**Open to Public

Inspection

Name of the organization **Employer identification number** Museum of Science and Industry 36-2167797 General Information on Grants and Assistance Part I 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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2017)

(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 noncash assistance
ence Achievers - Welcome to Science Initiative					
Lebration	27	0.	6,000.	FMV	Chromebook laptops
N O D D D D D D D D D D D D D D D D D D	unional in Dark I. lin	- O. Davidilla adversa	(1-)	deliki an al information	
rt IV Supplemental Information. Provide the information rec	quired in Part I, iin	e 2; Part III, column	i (b); and any other a	aditional information.	
rt I, Line 2:					
ptop computers are provided to h	niah saho	ol student	s enrolled	in the	
prop computers are provided to r	ilgii scho	or scudent	s emorieu	III CIIE	
seum's Science Achievers program	n. The st	udents ele	cted to re	ceive the	
mputers were graduating from hig	th school	and nrena	ring to at	tend college	
imputers were graduating from inte	JII SCHOOL	and prepa	iring co ac	cena correge.	

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Museum of Science and Industry

Employer identification number 36-2167797

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on 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	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2017

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 on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	N-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) David R. Mosena	(i)	540,513.	100,000.	26,159.	13,559.	13,455.	693,686.	0.
President/Trustee	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Kurt E. Haunfelner	(i)	270,643.	0.	2,355.	1,360.	8,590.	282,948.	0.
VP - Exhibits and Collections	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Matthew C. Simpson	(i)	230,872.	0.	0.	8,388.	20,307.	259,567.	0.
VP - Marketing/Public Relations	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Yolanda Stephens	(i)	185,769.	0.	0.	5,939.	20,307.	212,015.	0.
VP - Human Resources	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Andrea J. Ingram	(i)	228,443.	0.	820.	6,864.	8,321.	244,448.	0.
VP - Education and Guest Services	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Sheila M. Cawley	(i)	251,316.	0.	608.	7,956.	20,307.	280,187.	0.
VP - External Affairs	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Rose B. Fealy	(i)	242,608.	0.	0.	5,888.	4,001.	252,497.	0.
VP - Finance & Administration	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) Mary Krinock	(i)	199,768.	0.	0.	7,081.	8,321.	215,170.	0.
Chief of Staff	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) Edward McDonald	(i)	142,517.	0.	2,680.	5,269.	13,351.	163,817.	0.
Director of Facilities	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) Anne Rashford	(i)	150,125.	0.	900.	4,943.	8,504.	164,472.	0.
Director of Temporary Exhibits	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) Bryan Wunar	(i)	132,041.	0.	290.	4,735.	20,250.	157,316.	0.
Director of Community Initiatives	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) Christopher Wilson	(i)	133,467.	0.	0.	0.	20,254.	153,721.	0.
Director of Exhibit Projects & Ops.	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

36-2167797

Part III Supplemental Information								
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.								
Part I, Line 7:								
The compensation committee reviewed and approved variable compensation for								
certain employees due to outstanding performance.								

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information on Tax-Exempt Bonds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Name of the organization

Museum of Science and Industry

Employer identification number 36-2167797

Hubeum of bei	.ciicc aiia	<u> </u>							0 2		, , ,		—
Part I Bond Issues		<u>, </u>								1			
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description of purpose		(g) Defeased (h) On beha of issuer					
										_	-	finar	_
						~ ' -	0000	Yes	No	Yes	No	Yes	Ļ
TER G	1001067		05/20/15	,			2009 Bon	²	١,,		,,		l
AIFA Series 2017A-B 86	-1091967	NoneAvail	05/30/1	60,0	000,000.	Redempti	.on		X		Х		ļ
_											i		
В									┼		$\vdash\vdash\vdash$		╀
											i		l
С								-	+-		\vdash		ł
D											, ,		l
Part II Proceeds													L
raitii Fioceeus			1			В	С		\neg		D		-
1 Amount of bonds retired			-				<u> </u>		+		<u> </u>		-
2 Amount of bonds legally defeased									+				-
3 Total proceeds of issue				0,000.					+				_
4 Gross proceeds in reserve funds				•					+				-
5 Capitalized interest from proceeds									\top				_
6 Proceeds in refunding escrows				0,000.					\top				_
7 Issuance costs from proceeds				0,000.									
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceeds													
O Capital expenditures from proceeds													
11 Other spent proceeds													
2 Other unspent proceeds													
13 Year of substantial completion													
			Yes	No	Yes	No	Yes	No		Yes	\bot	No	
4 Were the bonds issued as part of a current refund													_
Were the bonds issued as part of an advance refu				X					\bot		+		_
6 Has the final allocation of proceeds been made?									\bot		\bot		_
7 Does the organization maintain adequate books and records to sup	port the final allocatio	n of proceeds?	Х										_
Part III Private Business Use			1				1						_
			<i></i>			<u>B</u>	Ç		+		D		_
1 Was the organization a partner in a partnership, or			Yes	No X	Yes	No	Yes	No	+	Yes	+	No	_
which owned property financed by tax-exempt bo				Λ					+		+		_
2 Are there any lease arrangements that may result				х									
bond-financed property?				^						-1114			_

Par	t III Private Business Use (Continued)								
			A	I	В	(?	[)
3a	Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
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		%		%		%		%
_6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		<u>%</u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
_	Regulations sections 1.141-12 and 1.145-2?		X						
Par	t IV Arbitrage			1					
			A		В	(<u> </u>	[)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
_2	If "No" to line 1, did the following apply?								
	Rebate not due yet?	Х							
	Exception to rebate?		X						
c	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed								
	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified								
	hedge with respect to the bond issue?		X		L				
	Name of provider								
	Term of hedge						1		1
d	Was the hedge superintegrated?								
<u>e</u>	Was the hedge terminated?								

	_							
Part IV Arbitrage (Continued)					_			
		A	В		Ç		1	D
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of								
section 148?		X						
Part V Procedures To Undertake Corrective Action								
		Ą		3		Ç		D
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedu	le K. See inst	ructions					
Part IV, Line 2c:								
Bond Counsel performed the rebate calculation for	r the	period	Decemb	er				
17, 2009 through December 17, 2014.								
Part V, Procedures to Undertake Corrective Action	n:							
The Museum has not violated any applicable requir				mpt				
bonds benefiting the Museum. The Museum has not o								
procedures to ensure timely identification of vic	olatio:	ns of f	ederal	tax				
requirements or timely correction of any identif:		olation	ıs, but	the				
Museum will develop procedures in the near future	e.							

36-2167797

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization Museum of Science and Industry Employer identification number 36-2167797

2 3	t I Types of Property	(a) Check if	(b)	(c)			(d)		
2 3			(b)	(c)			(4)		
2 3		applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1	r g	Method noncash co	d of detern	•	ts
3	Art - Works of art								
	Art - Historical treasures								
	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	22	215,767	\mathbf{FMV}	<u> </u>			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
	Qualified conservation contribution - Historic structures								
	Qualified conservation contribution - Other								
	Real estate - Residential								
	Real estate - Commercial								
	Real estate - Other								
	Collectibles								
	Food inventory								
	Drugs and medical supplies								
	Taxidermy								
	Historical artifacts								
	Scientific specimens								
	Archeological artifacts								
	Other (Software (Mic)	X	15	450,000	Cos	t/Sel	ling	Pric	
	Other (United Airlin)	X	122	80,438					
	Other (United Airlin)	X	1	40,000					
	Other (Columbian Bal)	X	8						
	Number of Forms 8283 received by the organi		l	<u>'</u>	7 7 0 0 2	0, 502			<u> </u>
	for which the organization completed Form 82		•					0	ļ
	To which the organization completed form oz	.00, 1 ait 10, 1	Donee Acknowled	gement <u>23 </u>				Yes	
302	During the year, did the organization receive b	v contributio	n any property rea	norted in Part I lines 1 thr	ough 28	that it		163	NO
	must hold for at least three years from the date								
				·			20	_	х
	exempt purposes for the entire holding period	·					30	a	<u> </u>
	If "Yes," describe the arrangement in Part II.	nalicy that =	aguiros tha ravia	of any ponetandard contr	ibutions	2	0.	X	
	Does the organization have a gift acceptance					·	31	 ^	_
	Does the organization hire or use third parties contributions?		•				32	а	Х
	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in o	column (c) fo	r a type of propert	y for which column (a) is o	hecked,				
-	describe in Part II.								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Part I, Other Types of Property:
Black Creativity Special Event Donations
(a) Check if applicable = X
(b) Number of Contributions = 5
(c) Revenue Reported on Form 990, Part VIII \$ 10819.
(d) Method of determining revenue: Cost/Selling Price
Chromebooks
(a) Check if applicable = X
(b) Number of Contributions = 27
(c) Revenue Reported on Form 990, Part VIII \$ 6000.
(d) Method of determining revenue: Cost/Selling Price
Schedule M, Part I, Column (b):
is the number of contributions.

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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.

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

2017
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Museum of Science and Industry

Employer identification number 36-2167797

Form 990, Part I, Line 1, Description of Organization Mission:
industry by providing visitors with integrated learning experiences.

Form 990, Part III, Line 1, Description of Organization Mission:

the inventive genius in everyone, and its vision is to inspire and

motivate children to achieve their full potential in science,

technology, medicine and engineering. Approximately 365,000 students

are among the nearly 1.5 million guests that visit each year. Through

its Welcome to Science Initiative, the Museum reaches thousands of

students and teachers through special programs, learning labs and

educator workshops.

Form 990, Part III, Line 4a, Program Service Accomplishments:

guests work together to develop a greener city; The Great Train Story,

a dynamic model display that illustrates modern rail operation; and the

Giant Dome Theater, which features educational films, rich in content

and presented on Chicago's only five-story, domed wrap-around movie

screen.

Form 990, Part III, Line 4d, Other Program Services:

Retail and supporting services represent various program offerings that
enhance the guest experience. These include the museum store, food
services, and parking services.

Expenses \$ 2,588,548. including grants of \$ 0. Revenue \$ 1,392,434.

Form 990, Part VI, Section A, line 2:

Name of the organization **Employer identification number** Museum of Science and Industry 36-2167797 James S. Crown and Lester Crown have a family relationship. Jason Pritzker and Cindy Pritzker have a family relationship. Barry L. MacLean and Duncan A. L. MacLean have a family relationship. James S. Crown and Lester Crown have a business relationship outside of the Museum. Douglas C. Grissom and John A. Canning, Jr. have a business relationship outside of the Museum. Avis LaVelle, Jesse H. Ruiz and Juan Salgado have a business relationship outside of the Museum. Kent P. Dauten and Larry D. Richman have a business relationship outside of the Museum. J. Christopher Reyes, Michael W. Ferro, Jr., and Andrew J. McKenna, and John F. Sander serve on a board outside of the Museum. James A. Gray and David A. Fisher serve on a board outside of the Museum. Edward M. Liddy, William A. Osborn and W. James Farrell serve on a board outside of the Museum. Jay L. Henderson and William L. Morrison serve on a board outside of the Museum.

Name of the organization

Museum of Science and Industry

Employer identification number 36-2167797

Douglas C. Grissom, Kent P. Dauten and John A. Canning, Jr. serve on a board outside of the Museum.

J. Christopher Reyes and Andrew J. McKenna serve on a board outside of the Museum.

Form 990, Part VI, Section B, line 11b:

The Museum's Form 990 is prepared by an external public accounting firm who provides drafts for internal review. After the internal review, these drafts are updated, and a final draft is reviewed by the Chairman of the Audit Committee and is made available to the Trustees electronically for their review, prior to electronically filing with the Internal Revenue Service.

Form 990, Part VI, Section B, Line 12c:

The Museum formally sends a conflict of interest questionnaire annually to trustees, officers and employees. The Museum's compliance officer reviews the results of the questionnaires and investigates any reported potential conflicts for resolution as necessary.

From time to time, the Museum conducts business with publicly traded companies at which certain Museum board members have an employment or board relationship. Business with these companies is entered into at arms-length and through the Museum's standard procurement process without influence from the interested board member(s). Any conflicts are resolved when interested board members excuse themselves when voting on matters related to the public company in which they serve.

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization **Employer identification number** Museum of Science and Industry 36-2167797 Form 990, Part VI, Section B, Line 15: The Compensation Committee of the Board of Directors oversees and approves the compensation for the executive staff of the Museum. Individual performance is evaluated by established goals and objectives which support MSI's mission and priorities. These goals and objectives are reviewed annually as part of the Museum's performance management process. The process consists of: 1. The Compensation Committee meets annually at the end of Q1 to review and make decisions on all executive (CEO and VP's) compensation. 2. Individual performance is evaluated against goals and objectives that support MSI's mission and strategic priorities. 3. From time to time, HR prepares a compensation benchmark analysis consisting of peer institutions to ensure executive compensation remains competitive within industry and reasonable. 4. Each year, MSI leadership team determines if merit increases will be awarded to Museum staff. The VP of HR facilitates and drives this process to ensure consistency and fairness across the Museum. 5. The process is contemporaneously documented. Form 990, Part VI, Section C, Line 18:

The Museum posted a copy of its 2016 Form 990 on its website and made

copies of 2014, 2015, 2016 Form 990 and 990-T publicly available upon

Name of the organization Museum of Science and Industry	Employer identification number 36-2167797
request. As the Museum filed the application for recognit	ion of exemption,
Form 1023 before July 15, 1987, it need not be made publi	cly available.
Form 990, Part VI, Section C, Line 19:	
The Museum's annual report and the financial statements a	re made available
to the public via the Museum's website and upon request,	respectively.
Governing documents and conflict of interest policy are a	vailable to the
public upon request for the same period of disclosure as	set forth in IRC
section 6104(d).	
Form 990, Part XI, line 9, Changes in Net Assets:	
Change in Value of Life Insurance Policy	22,176.
Loss on Film Consortium Investment	-2,085.
Change in Value of Asset Retirement Obligation	-48,889.
Minimum Pension Liability	217,720.
Loss on Extinguishment of Bonds Payable	-666,894.
Total to Form 990, Part XI, Line 9	-477,972.