

FORM 990

PUBLIC DISCLOSURE

COPY

Form **990**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **Museum of Science and Industry**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
5700 S. Lake Shore Drive
 City or town, state or province, country, and ZIP or foreign postal code
Chicago, IL 60637-2093

D Employer identification number: **36-2167797**

E Telephone number: **773-584-9844**

G Gross receipts \$: **60,058,546.**

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

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

J Website: **www.msichicago.org**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1933** **M** State of legal domicile: **IL**

H(c) Group exemption number

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: Museum of Science and Industry seeks to further public understanding of science, technology and		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	114	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	111	
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	444	
	6	Total number of volunteers (estimate if necessary)	535	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	1,458,785.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	-182,295.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 22,351,961. Current Year: 26,262,579.	
	9	Program service revenue (Part VIII, line 2g)	18,706,623. 20,203,532.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,942,718. 3,694,001.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,540,706. 4,611,280.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	48,542,008. 54,771,392.	
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,000. 8,250.
		14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	25,611,635. 24,950,342.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)	44,784. 5,001.
		16b	Total fundraising expenses (Part IX, column (D), line 25)	4,172,314.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	35,904,204. 34,655,892.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	61,568,623. 59,619,485.		
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-13,026,615. -4,848,093.	
	20	Total assets (Part X, line 16)	Beginning of Current Year: 268,037,474. End of Year: 262,854,342.	
	21	Total liabilities (Part X, line 26)	73,466,138. 74,835,916.	
	22	Net assets or fund balances. Subtract line 21 from line 20	194,571,336. 188,018,426.	

Part II Signature Block

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

Sign Here: *Rose Fealy* Signature of officer Date: **18-14-15**
Rose Fealy, VP Finance & Admin/CFO
 Type or print name and title

Paid Preparer's name: **Zack Fortsch** Preparer's signature: _____ Date: _____ Check if self-employed: PTIN: **P00052725**

Preparer Use Only Firm's name: **MCGLADREY LLP** Firm's EIN: **42-0714325**
 Firm's address: **1 S. WACKER DRIVE, STE 800 CHICAGO, IL 60606** Phone no. **312-634-3400**

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

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? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [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 \$ 23,757,865. including grants of \$) (Revenue \$ 9,614,316.) Museum and Operations, which include program support services and exhibit maintenance. 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.

4b (Code:) (Expenses \$ 6,050,221. including grants of \$) (Revenue \$ 5,421,973.) 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; 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 that 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 guests work together to develop a greener city; and The Great Train Story, a dynamic model display that illustrates modern rail operation.

4c (Code:) (Expenses \$ 6,138,527. including grants of \$ 8,250.) (Revenue \$ 914,829.) Educational Programs and Activities, which include the Museum's Center for the Advancement of Science Education (CASE) 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.

4d Other program services (Describe in Schedule O.) (Expenses \$ 2,528,451. including grants of \$) (Revenue \$ 4,632,177.)

4e Total program service expenses 38,475,064.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes sub-questions for various IRS forms and financial reporting requirements.

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

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA, FL, IL, MI, NY, OH, WI**
- 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) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **Katherine Garant - 773-947-3748**
5700 S. Lake Shore Drive, Chicago, IL 60637-2093

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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) John A. Canning, Jr. Chairman/Trustee	1.00	X						0.	0.	0.
(2) Allan E. Bulley, Jr. Vice Chairman/Trustee	1.00	X						0.	0.	0.
(3) Alison L. Chung Vice Chairman/Trustee	1.00	X						0.	0.	0.
(4) Frank M. Clark Vice Chairman/Trustee	1.00	X						0.	0.	0.
(5) Kent P. Dauten Vice Chairman/Trustee	1.00	X						0.	0.	0.
(6) Michael W. Ferro, Jr. Vice Chairman/Trustee	1.00	X						0.	0.	0.
(7) Jay L. Henderson Vice Chairman/Trustee	1.00	X						0.	0.	0.
(8) Barry L. MacLean Vice Chairman/Trustee	1.00	X						0.	0.	0.
(9) Sheila A. Penrose Vice Chairman/Trustee	1.00	X						0.	0.	0.
(10) Jeffrey S. Aronin Trustee	1.00	X						0.	0.	0.
(11) William C. Bartholomay Trustee	1.00	X						0.	0.	0.
(12) Christopher B. Begy Trustee	1.00	X						0.	0.	0.
(13) Charles K. Bobrinsky Trustee	1.00	X						0.	0.	0.
(14) Matthew J. Boler Trustee	1.00	X						0.	0.	0.
(15) Barbara L. Bowles Trustee	1.00	X						0.	0.	0.
(16) Byron T. Brazier, D.Min. Trustee	1.00	X						0.	0.	0.
(17) Martin Cabrera, Jr. Trustee	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Michelle L. Collins Trustee	1.00	X						0.	0.	0.
(19) Christopher M. Crane Trustee	1.00	X						0.	0.	0.
(20) James S. Crown Trustee	1.00	X						0.	0.	0.
(21) Deborah L. DeHaas Trustee	1.00	X						0.	0.	0.
(22) William J. Devers, Jr. Trustee	1.00	X						0.	0.	0.
(23) David E. Donovan Trustee	1.00	X						0.	0.	0.
(24) Kenneth K. Dort Trustee	1.00	X						0.	0.	0.
(25) James J. Drury III Trustee	1.00	X						0.	0.	0.
(26) Adrienne Elsner Trustee	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,775,210.	0.	217,286.
d Total (add lines 1b and 1c)								2,775,210.	0.	217,286.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **31**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Hoffman York Connect, 142 E. Ontario Street, Suite 13, Chicago, IL 60611	Advertising	1,977,504.
Midway Building Services 1915 W. Hubbard Street, Chicago, IL 60622	Janitorial	1,524,659.
AlliedBarton Security Services LLC PO Box 828854, Philadelphia, PA 19182	Security	1,187,559.
Sodexo America LLC, 9801 Washingtonian Boulevard, Gaithersburg, MA 20878	Catering	869,018.
41 North Contractors LLC 4906 Main Street, Ste 102, Lisle, IL 60532	Construction	556,752.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **10**

See Part VII, Section A Continuation sheets

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) W. James Farrell Trustee	1.00	X					0.	0.	0.	
(28) Dennis J. FitzSimons Trustee	1.00	X					0.	0.	0.	
(29) Jeffrey T. Foland Trustee	1.00	X					0.	0.	0.	
(30) James J. Fuentes Trustee	1.00	X					0.	0.	0.	
(31) Mark Furlong-Thru Apr 2014 Trustee	1.00	X					0.	0.	0.	
(32) Matthew R. Gibson Trustee	1.00	X					0.	0.	0.	
(33) Ronald J. Gidwitz Trustee	1.00	X					0.	0.	0.	
(34) James T. Glerum, Jr. Trustee	1.00	X					0.	0.	0.	
(35) William M. Goodyear Trustee	1.00	X					0.	0.	0.	
(36) James A. Gordon Trustee	1.00	X					0.	0.	0.	
(37) James A. Gray Trustee	1.00	X					0.	0.	0.	
(38) Catherine P. Greenspon Trustee	1.00	X					0.	0.	0.	
(39) Richard P. Grimley Trustee	1.00	X					0.	0.	0.	
(40) Roberto R. Herencia Trustee	1.00	X					0.	0.	0.	
(41) Betsy D. Holden Trustee	1.00	X					0.	0.	0.	
(42) Edward L. Kaplan Trustee	1.00	X					0.	0.	0.	
(43) John P. Keller Trustee	1.00	X					0.	0.	0.	
(44) Michael P. Krasny Trustee	1.00	X					0.	0.	0.	
(45) Frederick A. Krehbiel Trustee	1.00	X					0.	0.	0.	
(46) Avis LaVelle Trustee	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) Eric P. Lefkofsky Trustee	1.00	X					0.	0.	0.	
(48) Richard H. Lenny Trustee	1.00	X					0.	0.	0.	
(49) Charles A. Lewis Trustee	1.00	X					0.	0.	0.	
(50) H. John Livingston Trustee	1.00	X					0.	0.	0.	
(51) Robert A. Livingston Trustee	1.00	X					0.	0.	0.	
(52) Duncan A. L. MacLean Trustee	1.00	X					0.	0.	0.	
(53) Matthew M. Maloney Trustee	1.00	X					0.	0.	0.	
(54) Walter E. Massey, Ph.D. Trustee	1.00	X					0.	0.	0.	
(55) Andrew J. McKenna Trustee	1.00	X					0.	0.	0.	
(56) Robert S. Morrison Trustee	1.00	X					0.	0.	0.	
(57) William L. Morrison Trustee	1.00	X					0.	0.	0.	
(58) Robert S. Murley Trustee	1.00	X					0.	0.	0.	
(59) Terry E. Newman Trustee	1.00	X					0.	0.	0.	
(60) William A. Osborn Trustee	1.00	X					0.	0.	0.	
(61) Jason Pritzker Trustee	1.00	X					0.	0.	0.	
(62) Scott A. Rafferty Trustee	1.00	X					0.	0.	0.	
(63) Matthias E. Rebellius-Thru Dec Trustee	1.00	X					0.	0.	0.	
(64) J. Christopher Reyes Trustee	1.00	X					0.	0.	0.	
(65) Larry D. Richman Trustee	1.00	X					0.	0.	0.	
(66) Desiree Rogers Trustee	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) Jesse H. Ruiz Trustee	1.00	X					0.	0.	0.	
(68) James T. Ryan Trustee	1.00	X					0.	0.	0.	
(69) Michael J. Sacks Trustee	1.00	X					0.	0.	0.	
(70) Juan Salgado Trustee	1.00	X					0.	0.	0.	
(71) John F. Sandner Trustee	1.00	X					0.	0.	0.	
(72) E. Scott Santi Trustee	1.00	X					0.	0.	0.	
(73) Ronald M. Saslow Trustee	1.00	X					0.	0.	0.	
(74) Rouhy J. Shalabi-Thru Jan 2014 Trustee	1.00	X					0.	0.	0.	
(75) James A. Skinner Trustee	1.00	X					0.	0.	0.	
(76) Gregory D. Smith Trustee	1.00	X					0.	0.	0.	
(77) Melody A. Spann-Cooper Trustee	1.00	X					0.	0.	0.	
(78) J. Douglas Sparkman Trustee	1.00	X					0.	0.	0.	
(79) Robert J. Sperling-Thru Jun 20 Trustee	1.00	X					0.	0.	0.	
(80) Byron O. Spruell Trustee	1.00	X					0.	0.	0.	
(81) Michael Tang Trustee	1.00	X					0.	0.	0.	
(82) Mark Thierer Trustee	1.00	X					0.	0.	0.	
(83) Cedric Thurman-Thru Jun 2014 Trustee	1.00	X					0.	0.	0.	
(84) Elizabeth M. Thompson Trustee	1.00	X					0.	0.	0.	
(85) Arthur R. Velasquez Trustee	1.00	X					0.	0.	0.	
(86) Ralph Wanger Trustee	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(87) Gregory D. Wasson Trustee	1.00	X						0.	0.	0.
(88) Ann C. Williams Trustee	1.00	X						0.	0.	0.
(89) Thomas J. Wilson Trustee	1.00	X						0.	0.	0.
(90) David F. Zucker Trustee	1.00	X						0.	0.	0.
(91) Neal S. Zucker Trustee	1.00	X						0.	0.	0.
(92) Michael J. Birck Life Trustee	1.00	X						0.	0.	0.
(93) Rhett W. Butler Life Trustee	1.00	X						0.	0.	0.
(94) Peter R. Carney Life Trustee	1.00	X						0.	0.	0.
(95) Frank W. Considine Life Trustee	1.00	X						0.	0.	0.
(96) Stanton R. Cook Life Trustee	1.00	X						0.	0.	0.
(97) Lester Crown Life Trustee	1.00	X						0.	0.	0.
(98) Victor J. Danilov, Ed.D. Life Trustee	1.00	X						0.	0.	0.
(99) Robert J. Darnall Life Trustee	1.00	X						0.	0.	0.
(100) James C. Dowdle-Thru Feb 2014 Life Trustee	1.00	X						0.	0.	0.
(101) Jere D. Fluno Life Trustee	1.00	X						0.	0.	0.
(102) David W. Grainger Life Trustee	1.00	X						0.	0.	0.
(103) J. Ira Harris Life Trustee	1.00	X						0.	0.	0.
(104) Richard M. Jaffee Life Trustee	1.00	X						0.	0.	0.
(105) James R. Kackley Life Trustee	1.00	X						0.	0.	0.
(106) Leon M. Lederman, Ph.D. Life Trustee	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(107) Edward M. Liddy Life Trustee	1.00	X					0.	0.	0.	
(108) Charles S. Locke Life Trustee	1.00	X					0.	0.	0.	
(109) Thomas L. Martin, Jr., Ph.D. Life Trustee	1.00	X					0.	0.	0.	
(110) John D. Nichols Life Trustee	1.00	X					0.	0.	0.	
(111) James J. O'Connor Life Trustee	1.00	X					0.	0.	0.	
(112) Walter R. Peirson Life Trustee	1.00	X					0.	0.	0.	
(113) Cindy Pritzker Life Trustee	1.00	X					0.	0.	0.	
(114) Louis A. Simpson Life Trustee	1.00	X					0.	0.	0.	
(115) S. Jay Stewart Life Trustee	1.00	X					0.	0.	0.	
(116) Eugene A. Tracy Life Trustee	1.00	X					0.	0.	0.	
(117) Arnold R. Weber, Ph.D. Life Trustee	1.00	X					0.	0.	0.	
(118) William L. Weiss Life Trustee	1.00	X					0.	0.	0.	
(119) David R. Mosena President/Trustee	35.00	X	X				493,607.	0.	20,599.	
(120) David J. Vitale Treasurer/Trustee	1.00	X					0.	0.	0.	
(121) Eileen M. Cabrera Secretary/Trustee/Asst. to President	35.00			X			89,029.	0.	13,191.	
(122) Kurt Haunfelner VP - Exhibits and Collections	35.00			X			238,304.	0.	12,715.	
(123) Robert J. Gallas, Jr. VP - Marketing/Public Relations	35.00			X			213,909.	0.	4,982.	
(124) Andrea Ingram VP - Education and Guest Services	35.00			X			214,759.	0.	14,247.	
(125) Sheila Cawley VP - External Affairs	35.00			X			230,506.	0.	26,261.	
(126) Allyson Laackman VP - Finance & Administration	35.00			X			223,924.	0.	26,578.	
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	2,435,873.				
	c Fundraising events	1c	2,451,325.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	7,206,532.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	14,168,849.				
	g Noncash contributions included in lines 1a-1f: \$		1,821,128.				
	h Total. Add lines 1a-1f		26,262,579.				
Program Service Revenue			Business Code				
	2 a General Admissions		900099	9,614,316.	9,614,316.		
	b Special Exhibits		900099	2,260,256.	2,260,256.		
	c Membership Fees		900099	1,825,776.	1,825,776.		
	d Omnimax Theater		900099	1,504,995.	1,504,995.		
	e U-505 Permanent Exhibits		900099	1,327,670.	1,327,670.		
	f All other program service revenue		900099	3,670,519.	3,670,519.		
	g Total. Add lines 2a-2f			20,203,532.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,790,540.		3,790,540.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			1,849.		1,849.	
	6 a Gross rents	(i) Real	998,638.				
		(ii) Personal					
		b Less: rental expenses	730,549.				
	c Rental income or (loss)	268,089.					
	d Net rental income or (loss)			268,089.		268,089.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	3,360,981.				
		(ii) Other	118,350.				
		b Less: cost or other basis and sales expenses	3,575,870.	0.			
		c Gain or (loss)	-214,889.	118,350.			
	d Net gain or (loss)			-96,539.		-96,539.	
	8 a Gross income from fundraising events (not including \$ 2,451,325. of contributions reported on line 1c). See Part IV, line 18	a	129,441.				
		b Less: direct expenses	631,819.				
c Net income or (loss) from fundraising events				-502,378.		-502,378.	
9 a Gross income from gaming activities. See Part IV, line 19	a	5,950.					
	b Less: direct expenses	27,375.					
	c Net income or (loss) from gaming activities			-21,425.	-21,425.		
10 a Gross sales of inventory, less returns and allowances	a	857,340.					
	b Less: cost of goods sold	321,541.					
	c Net income or (loss) from sales of inventory			535,799.	483,901.	51,898.	
Miscellaneous Revenue			Business Code				
11 a Parking and Other Guest Services		900099	2,022,752.			2,022,752.	
b Food Court		722514	976,195.			976,195.	
c Sponsorship Revenues		900099	240,000.			240,000.	
d All other revenue		900099	1,090,399.	401,188.	706,795.	-17,584.	
e Total. Add lines 11a-11d			4,329,346.				
12 Total revenue. See instructions.			54,771,392.	20,583,295.	1,458,785.	6,466,733.	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	8,250.	8,250.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,809,894.	453,063.	1,126,325.	230,506.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	18,169,952.	11,567,434.	4,636,526.	1,965,992.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	231,447.	139,090.	66,747.	25,610.
9 Other employee benefits	3,355,677.	1,647,448.	1,336,916.	371,313.
10 Payroll taxes	1,383,372.	691,675.	538,624.	153,073.
11 Fees for services (non-employees):				
a Management	374,297.	358,297.		16,000.
b Legal	175,682.		175,682.	
c Accounting	169,231.		169,231.	
d Lobbying	6,000.			6,000.
e Professional fundraising services. See Part IV, line 17	5,001.			5,001.
f Investment management fees	153,441.		153,441.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	3,500,804.	2,320,600.	979,956.	200,248.
12 Advertising and promotion	3,228,928.	94,606.	3,102,776.	31,546.
13 Office expenses	1,774,883.	871,926.	392,558.	510,399.
14 Information technology	380,526.	48,216.	303,255.	29,055.
15 Royalties				
16 Occupancy	1,702,199.	1,333,192.	369,007.	
17 Travel	351,181.	246,514.	71,228.	33,439.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	852,922.	77,897.	775,025.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,148,498.	15,148,498.		
23 Insurance	337,367.		337,367.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Bank & Credit Card Fees	1,270,656.		1,270,656.	
b Program Development	627,813.	306,358.	47,105.	274,350.
c Training/Recruitment	519,405.	241,768.	224,508.	53,129.
d Exhibit Rental Expense	484,098.	484,098.		
e All other expenses	3,597,961.	2,436,134.	895,174.	266,653.
25 Total functional expenses. Add lines 1 through 24e	59,619,485.	38,475,064.	16,972,107.	4,172,314.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	2,945,809.	1	4,943,946.
	2	Savings and temporary cash investments	30,813,857.	2	2,775,267.
	3	Pledges and grants receivable, net	13,346,283.	3	16,150,813.
	4	Accounts receivable, net	1,117,229.	4	1,660,458.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	414,120.	8	398,219.
	9	Prepaid expenses and deferred charges	720,892.	9	651,844.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 356,236,126.		
	b	Less: accumulated depreciation	10b 204,301,660.	10c	151,934,466.
	11	Investments - publicly traded securities	45,081,711.	11	70,009,302.
	12	Investments - other securities. See Part IV, line 11	13,317,607.	12	12,646,871.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,906,106.	15	1,683,156.
16	Total assets. Add lines 1 through 15 (must equal line 34)	268,037,474.	16	262,854,342.	
Liabilities	17	Accounts payable and accrued expenses	4,140,414.	17	5,183,425.
	18	Grants payable		18	
	19	Deferred revenue	1,771,354.	19	969,828.
	20	Tax-exempt bond liabilities	62,000,000.	20	62,000,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	3,350,000.	23	3,155,000.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,204,370.	25	3,527,663.
	26	Total liabilities. Add lines 17 through 25	73,466,138.	26	74,835,916.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	164,785,375.	27	158,876,068.
	28	Temporarily restricted net assets	24,250,961.	28	23,602,358.
	29	Permanently restricted net assets	5,535,000.	29	5,540,000.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	194,571,336.	33	188,018,426.	
34	Total liabilities and net assets/fund balances	268,037,474.	34	262,854,342.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	54,771,392.
2	Total expenses (must equal Part IX, column (A), line 25)	2	59,619,485.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,848,093.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	194,571,336.
5	Net unrealized gains (losses) on investments	5	-1,724,624.
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	19,807.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	188,018,426.

Part XII Financial Statements and Reporting

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

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

Form 990 (2014)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,691,579.	24,941,604.	25,825,598.	22,351,961.	26,262,579.	132,073,321.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	32,691,579.	24,941,604.	25,825,598.	22,351,961.	26,262,579.	132,073,321.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						132,073,321.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	32,691,579.	24,941,604.	25,825,598.	22,351,961.	26,262,579.	132,073,321.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	2,405,226.	2,115,097.	2,470,874.	2,679,136.	3,792,389.	13,462,722.
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.)	3,768,020.	4,216,928.	4,206,625.	3,777,930.	3,374,868.	19,344,371.
11 Total support. Add lines 7 through 10						164,880,414.
12 Gross receipts from related activities, etc. (see instructions)					12	91,346,331.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	80.10 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	69.49 %
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
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 11a or 11b 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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
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).		
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 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) 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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section 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.		
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.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section 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 year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
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.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	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	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

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

2010 Amount: \$ 50,383.

2011 Amount: \$ 59,877.

2012 Amount: \$ 38,580.

2013 Amount: \$ 77,625.

Film Product Revenue

2010 Amount: \$ 1,381.

2011 Amount: \$ 47,250.

2012 Amount: \$ 39,525.

2013 Amount: \$ 11,350.

2014 Amount: \$ 530.

Food Court Revenue

2010 Amount: \$ 969,048.

2011 Amount: \$ 1,067,548.

2012 Amount: \$ 1,026,742.

2013 Amount: \$ 924,689.

2014 Amount: \$ 976,195.

Parking and Other Services

2010 Amount: \$ 2,078,575.

2011 Amount: \$ 2,494,694.

2012 Amount: \$ 2,289,315.

2013 Amount: \$ 2,373,924.

2014 Amount: \$ 2,022,752.

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Sponsorship Revenues

2010 Amount: \$ 451,000.

2011 Amount: \$ 430,000.

2012 Amount: \$ 687,000.

2013 Amount: \$ 225,000.

2014 Amount: \$ 240,000.

Fundraising Revenues

2010 Amount: \$ 174,224.

2011 Amount: \$ 108,459.

2012 Amount: \$ 116,713.

2013 Amount: \$ 156,742.

2014 Amount: \$ 129,441.

Gaming Revenues

2010 Amount: \$ 43,409.

2011 Amount: \$ 9,100.

2012 Amount: \$ 8,750.

2013 Amount: \$ 8,600.

2014 Amount: \$ 5,950.

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special 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. Do not 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 ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on 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 certify that it does not meet the 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) (2014)

Name of organization Museum of Science and Industry	Employer identification number 36-2167797
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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	<hr/> <hr/> <hr/> <hr/>	\$ 600,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Museum of Science and Industry	Employer identification number 36-2167797
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part 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
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization Museum of Science and Industry	Employer identification number 36-2167797
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for 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 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 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 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	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

Open to Public Inspection

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

Name of organization Museum of Science and Industry	Employer identification number 36-2167797
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2014

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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 each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		58,248.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			58,248.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part II-B, Line 1, Lobbying Activities:

Make direct contact with covered federal and state officials as it relates to the Museum's needs.

Part II-B, Line 1g:

Strategic counsel, government affairs and lobbying.

Part IV Supplemental Information *(continued)*

Part II-B:

Fletcher, O'Brian, Kasper & Nottage, PC provides the Museum of Science and Industry with lobbying services.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,661,559.	6,071,608.	5,661,624.	5,845,132.	5,514,447.
b Contributions	5,000.	50,000.			
c Net investment earnings, gains, and losses	107,783.	746,022.	640,276.	-298,249.	599,415.
d Grants or scholarships					
e Other expenditures for facilities and programs	273,595.	206,071.	230,292.	208,884.	268,730.
f Administrative expenses					
g End of year balance	6,500,747.	6,661,559.	6,071,608.	5,337,999.	5,845,132.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment 85.22 %
- c Temporarily restricted endowment 14.78 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		130,873,975.	57,826,262.	73,047,713.
c Leasehold improvements				
d Equipment		14,471,644.	8,770,543.	5,701,101.
e Other		210,890,507.	137,704,855.	73,185,652.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				151,934,466.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to 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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to 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)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Interest Rate Swap	1,107,366.
(3) Pension Liability	781,926.
(4) Asset Retirement Obligation	991,128.
(5) Other Liabilities	647,243.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	53,617,844.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-1,724,624.	
	b Donated services and use of facilities	2b	1,950.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	1,906,737.	
	e Add lines 2a through 2d	2e		184,063.
3	Subtract line 2e from line 1		3	53,433,781.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	261,222.	
	b Other (Describe in Part XIII.)	4b	1,076,389.	
	c Add lines 4a and 4b	4c		1,337,611.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	54,771,392.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	60,170,754.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	1,950.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	1,886,930.	
	e Add lines 2a through 2d	2e		1,888,880.
3	Subtract line 2e from line 1		3	58,281,874.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	261,222.	
	b Other (Describe in Part XIII.)	4b	1,076,389.	
	c Add lines 4a and 4b	4c		1,337,611.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	59,619,485.

Part XIII Supplemental Information.

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 a temporarily or permanently restricted net asset if the assets used to purchase the items are restricted by donors. Contributed collection items are not reflected in the financial statements. Proceeds from deaccessions or insurance recoveries are reflected as increases in the appropriate net asset classes.

Part XIII Supplemental Information (continued)

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

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

Part XIII Supplemental Information (continued)

requires tax effects from uncertain tax positions to be recognized in the 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. Additionally, no provision for income taxes is reflected in these financial statements as the Museum's unrelated business taxable income was offset by unrelated business loss carryovers in prior years. 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 files forms 990 in the U.S. federal jurisdiction and the State of Illinois. Tax years before 2011 are generally no longer subject to examination by the Internal Revenue Service.

Part XI, Line 2d - Other Adjustments:

Gaming Expenses	27,375.
Rental Expenses	730,549.
Insurance Policy	19,807.
Cost of Goods Sold	321,541.
Fundraising Expenses	631,819.
Recovery of Bad Debt	175,646.
Total to Schedule D, Part XI, Line 2d	1,906,737.

Part XI, Line 4b - Other Adjustments:

Change in Value of Interest Rate Swap	277,767.
Minimum Pension Liability	376,262.
Change in Value of Asset Retirement Obligation	422,360.

Part XIII Supplemental Information (continued)

Total to Schedule D, Part XI, Line 4b 1,076,389.

Part XII, Line 2d - Other Adjustments:

Fundraising Expenses 631,819.

Rental Expenses 730,549.

Cost of Goods Sold 321,541.

Gaming Expenses 27,375.

Recovery of Bad Debt 175,646.

Total to Schedule D, Part XII, Line 2d 1,886,930.

Part XII, Line 4b - Other Adjustments:

Change in Value of Interest Rate Swap 277,767.

Minimum Pension Liability 376,262.

Change in Value of Asset Retirement Obligation 422,360.

Total to Schedule D, Part XII, Line 4b 1,076,389.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		Black Creativity (event type)	Columbian Ball (event type)	None (total number)		
Revenue	1	Gross receipts	567,890.	2,012,876.		2,580,766.
	2	Less: Contributions	494,715.	1,956,610.		2,451,325.
	3	Gross income (line 1 minus line 2)	73,175.	56,266.		129,441.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	4,548.	106,441.		110,989.
	6	Rent/facility costs				
	7	Food and beverages	144,097.	94,608.		238,705.
	8	Entertainment	11,258.	22,150.		33,408.
	9	Other direct expenses	44,321.	204,396.		248,717.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				631,819.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-502,378.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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? Yes No

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b 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 Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Science Achievers - CASE Celebration	30	0.	8,250. FMV		Chromebook laptops

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

Part I, Line 2:
 Laptop computers are provided to high school students enrolled in the Museum's Science Achievers program. The students elected to receive the computers were graduating from high school and preparing to attend college.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
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 in line 1a?	2									
<p>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.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a	X								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X								
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 in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	X								
b Any related organization?	5b	X								
If "Yes" to line 5a or 5b, describe in Part III.										
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	X								
b Any related organization?	6b	X								
If "Yes" to line 6a or 6b, describe in Part III.										
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X								
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X								
9 If "Yes" to 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) 2014

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 4a:

Robert Gallas received a severance payment of 23,370 in 2014.

Part I, Line 7:

The compensation committee reviewed and approved bonuses for three highly compensated employees due to an assumption of increased responsibilities.

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
(Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

Museum of Science and Industry

Employer identification number
36-2167797

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A IFA Series 2009A-D	85-1091967	45200FJ91	12/17/09	64,000,000	Construction, Exhibits		X		X		X
B											
C											
D											

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	2,000,000.			
2 Amount of bonds legally defeased				
3 Total proceeds of issue	64,000,000.			
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows	62,937,702.			
7 Issuance costs from proceeds	429,298.			
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds	633,000.			
10 Capital expenditures from proceeds				
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion				

	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X					
15 Were the bonds issued as part of an advance refunding issue?		X				
16 Has the final allocation of proceeds been made?	X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

Part III Private Business Use

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

432121
10-15-14

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		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		%		%		%		%
c 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						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b 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								
3 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						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		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

	A		B		C		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 is not available under applicable regulations?		X						

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

Part IV, Line 2c:

Bond Counsel performed the rebate calculation for the period December 17, 2009 through December 17, 2014.

Part V, Procedures to Undertake Corrective Action:

The Museum has not violated any applicable requirements for tax exempt bonds benefitting the Museum. The Museum has not established written procedures to ensure timely identification of violations of federal tax requirements or timely correction of any identified violations, but the Museum will develop procedures in the near future.

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
David E. Donovan	Trustee	645,596.	Bond/Loc In		X
David E. Donovan	Trustee	681,869.	Corporate C		X
William L. Morrison	Trustee	173,836.	Bond/Bank f		X

Part V Supplemental Information

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

Sch L, Part IV, Business Transactions Involving Interested Persons:

(a) Name of Person: David E. Donovan

(d) Description of Transaction: Bond/Loc Interest/Fees; David E.

Donovan, a Trustee of MSI, is a co-CEO of Chase Capital Corporation.

MSI's transactions with JP Morgan are done in terms similar to those given to the general public. The conflict exists in that Mr. Donovan is a member of the finance committee, which approves all financial matters of MSI including banking. To resolve this conflict Mr. Donovan does not participate in discussions regarding the relationship with JP Morgan Chase and excuses himself when the finance committee is voting on financial matters related to MSI and JP Morgan Chase.

(a) Name of Person: David E. Donovan

(d) Description of Transaction: Corporate Credit Card Payments

(a) Name of Person: William L. Morrison

(d) Description of Transaction: Bond/Bank fees; William L. Morrison, a Trustee of MSI, is President and COO of Northern Trust Bank. Northern Trust Bank provides banking, asset/treasury management, and commercial lending for MSI. These services are provided in the same terms as those

Part V Supplemental Information

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

given to the general public. The conflict exists in that Mr. Morrison is a member of the finance committee, which approves all financial matters of MSI including banking. To resolve this conflict Mr. Morrison does not participate in discussions regarding the relationship with Northern Trust Bank and excuses himself when the finance committee is voting on financial matters related to MSI and Northern Trust Bank.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

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.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 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	28	1,632,914.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Columbian Bal)	X	610	100,040.	Cost/Selling Price
26 Other ▶ (United Airlin)	X	138	74,947.	Cost/Selling Price
27 Other ▶ (Black Creativ)	X	61	31,923.	Cost/Selling Price
28 Other ▶ (Facilities &)	X	30	8,250.	Cost/Selling Price

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

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

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

Schedule M (Form 990) (2014)

Part II **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.

Schedule M, Part I, Column (b):

is the number of contributions.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2014

Open to Public
Inspection

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 340,000 students

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

its Center for the Advancement of Science Education, the Museum reaches

thousands of students and teachers through special programs, learning

labs and educator workshops.

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

Ancillary Services represent various guest services that enhance the

guest experience. These include the Omnimax theater, museum store, food

services, and parking services.

Expenses \$ 2,528,451. including grants of \$ 0. Revenue \$ 4,632,177.

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

James Crown and Lester Crown have a family relationship.

Deborah L. DeHass and Betsy D. Holden have a family relationship.

Jason Pritzker and Cindy Pritzker have a family relationship.

Barry MacLean and Duncan MacLean have a family relationship.

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

Cedric Thurman and Sheila Penrose have a business relationship outside of the Museum.

James Crown and Lester Crown have a business relationship outside of the Museum.

Betsy Holden and H. John Livingston have a business relationship outside of the Museum.

James T. Ryan and David Grainger have a business relationship outside of the Museum.

Charles K. Bobrinsky and David J. Vitale have a business relationship outside of the Museum.

Deborah DeHaas and Byron Spruell have a business relationship outside of the Museum.

James Crown and David Donovan have a business relationship outside of the Museum.

Kenneth Dort and Jesse Ruiz have a business relationship outside of the Museum.

Deborah DeHaas and Michael P. Krasny have a business relationship outside of the Museum.

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

John Canning and Michael P. Krasny have a business relationship outside of the Museum.

Deborah DeHaas and Thomas Wilson have a business relationship outside of the Museum.

Matthew R. Gibson and Thomas Wilson have a business relationship outside of the Museum.

Michael Ferro, Jr., John Canning, and Michael J. Sacks have a business relationship outside of the Museum.

Charles Bobrinskoy and Eric Lefkofsky serve on a board outside of the Museum.

Edward Liddy, James Farrell and Robert Morrison serve on a board outside of the Museum.

James T. Ryan, Scott Santi and David Grainger serve on a board outside of the Museum.

James Gray, William Devers, Andrew J. McKenna and Michael Ferro serve on a board outside of the Museum.

James Farrell, Edward Liddy and William Osborn serve on a board outside of the Museum.

Richard Lenny, William Massey, Andrew McKenna, Sheila Penrose and James

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

Skinner serve on a board outside of the Museum.

David Donovan and James Crown serve on a board outside of the Museum.

Michelle Collins, Frederick Krehbiel and Michael J. Birck serve on a board outside of the Museum.

Christopher Crane, John Canning, and Jesse Ruiz serve on a board outside of the Museum.

David Vitale and Gregory D. Smith serve on a board outside of the Museum.

David Vitale, Charles Bobrinsky and John Canning are members of limited partner committees governing the same business entity.

Frank M. Clark: indicated he serves on a board outside the Museum with another trustee but did not provide trustee name.

Michael Ferro, Jr., William Devers, Jr., and Matthew Maloney serve on a board outside of the Museum.

James Gray and William Goodyear serve on a board outside of the Museum.

David Vitale: indicated he serves on a board outside the Museum with other trustees but did not provide the trustees name.

Andrew J. McKenna: indicated he serves on a board outside the Museum with another trustee but did not provide trustee name.

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

John Canning: indicated he is on the board of Sage Products, LLC.

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

The Museum's 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.

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.

Name of the organization

Museum of Science and Industry

Employer identification number

36-2167797

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 2013 Form 990 on its website and made copies of 2011, 2012, 2013 Form 990 and 990-T publicly available upon request. As the Museum filed the application for recognition of exemption, Form 1023 before July 15, 1987, it need not be made publicly available.

Form 990, Part VI, Section C, Line 19:

The Museum's annual report and the financial statements are made available to the public via the Museum's website and upon request, respectively. Governing documents and conflict of interest policy are available 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

19,807.