** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.



Depa	rtment	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Open to Public Inspection
			ar year, or tax year beginning and ending		• •
B c a	heck if pplicat Addro chan	ntificati	ion number		
X	Name	797			
	Initia	mber			
	Final	414			
	termi ated	City or to	own, state or province, country, and ZIP or foreign postal code G Gross receipts \$		228,683,557.
	Amer	n Chicago	o,IL 60637-2093 H(a) Is this a gro	up retur	
	Appli tion pend	ing F Name ar	nd address of principal officer: A. Chevy Humphrey for subordin	ates?	Yes X No
		same as		ates includ	led? Yes No
		empt status:			. See instructions
_	Vebs		ichicago.org H(c) Group exerr		
	orm o I rt I	of organization:	X Corporation Trust Association Other L Year of formation: 1933	M St	tate of legal domicile: IL
Fd		-	We want the second s		
e	1		e the organization's mission or most significant activities: The Kenneth C. Griffin Museu I Industry's mission is to inspire the inventive genius in		
Governance	2	Check this box		t accete	
verr	2		ing members of the governing body (Part VI, line 1a)		s. 95
ĝ	4	Number of ind	4	94	
Activities &	5	Total number of	5	412	
itie	6	Total number of	6	141	
ctiv	7 a		d business revenue from Part VIII, column (C), line 12	7a	1,619,711.
_ ◄			business taxable income from Form 990-T, Part I, line 11	7b	0.
			Prior Year		Current Year
e	8	Contributions a	and grants (Part VIII, line 1h)	55.	28,557,784.
nuə	9	•	ce revenue (Part VIII, line 2g) 17,111,1		21,060,481.
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d) 3, 213, 7		2,577,282.
ш.	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,636,2		6,219,322.
	12		add lines 8 through 11 (must equal Part VIII, column (A), line 12) 64, 412, 3		58,414,869.
			nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14		o or for members (Part IX, column (A), line 4)	0.	0.
ses	15		compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	23,573,609.
Expenses			Indraising fees (Part IX, column (A), line 11e)3,116,506.	•.	102,000.
ЦХр				36	33,194,910.
_		•	es (Part IX, column (A), lines 11a-11d, 11f-24e) 29,680,2 s. Add lines 13-17 (must equal Part IX, column (A), line 25) 52,060,5		56,870,519.
	19		expenses. Subtract line 18 from line 12		1,544,350.
SC SC			Beginning of Current Y		End of Year
Net Assets or -und Balances	20	Total assets (P			422,200,833.
Ass Bai	21		(Part X, line 26) 72,134,7		52,466,054.
Net -	22	Net assets or f	iund balances. Subtract line 21 from line 20		369,734,779.
	rt II				

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	Signature of off	icer	Date					
Here	A. Chevy Hu							
	Type or print na	me and title						
Print/Type preparer's name			Preparer's signature		Date	Check	PTIN	
Paid	Rebekuh Ele	У	Rebekuh Eley		1 self-employ	ed P01247672		
Preparer	Firm's name	RSM US LLP				Firm's EIN	42-0714325	
Use Only	Firm's address	30 South Wacker Dr, Suite	3300					
		Chicago, IL 60606-3392		Phone no.312-634-3400				
May the I	RS discuss this	return with the preparer shown abo	ve? See instructions				X Yes	No
LHA For	Paperwork Re	duction Act Notice, see the separ	rate instructions.	332001 12-21-23			Form 99	0 (2023)

See Schedule O for Organization Mission Statement Continuation

	Kenneth C. Griffin Museum of Science and		
Form	1990 (2023) Industry	36-2167797	Page 2
	rt III Statement of Program Service Accomplishments		9
	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 Kenneth C. Griffin Museum of Science and Industry (the Museum), a		
	501(c)(3) corporation, is the largest science museum in the Western		
	hemisphere and home to thousands of artifacts. For 90 years, the		
	Museum has been a premier destination in Chicago, Illinois. The		
	· ·		
2	Did the organization undertake any significant program services during the year which were not listed on the		v
	prior Form 990 or 990-EZ?	Y	es 🛛 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?	Yo	es 🛛 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 m	easured by expense	es.
	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 \$ 30,054,164. including grants of \$ 0.) (Revenue	.\$16,0	050,549.)
	World-class permanent exhibitions 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 than 30,000 square feet of artifacts and interactive		
	activities; the Coal Mine, a reproduction of an Illinois coal mine that		
	takes guest down 50 feet in a real hoist to the bottom of a mineshaft;		
	The Great Train Story, a dynamic model display that illustrates modern		
	rail operation; and the Giant Dome Theater, which features educational		
	films, rich in content and presented on Chicago's only five-story,		
4b	(Code:) (Expenses \$8, 508, 267. including grants of \$) (Revenue	•\$	714,450.)
	Educational Programs and Activities. Education at the museum occurs		
	both inside the museum walls, and the community and schools surrounding		
	the museum and beyond. Hands-on student programming such as labs, STEAM		
	clubs, Girls in STEM events, career showcases, teacher professional		
	development, maker space training, and camps are some of the ways the		
	museum approaches reaching students and their ecosystem to ensure STEAM		
	opportunities and exposure is at the forefront of what the museum does		
	to prepare them for skills needed beyond school.		
	bo proparo chem ior parris hocada segona sonoor.		
4c	(Code:) (Expenses \$6,896,818. including grants of \$) (Revenue	\$3,0	095,358.)
	Museum and Operations, which include Program Support Services and		
	Exhibit Maintenance. These expenses support the Museum's mission of		
	inspiring the inventive genius in everyone 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.		
ام <i>ا</i> ر	Other program convices (Describe on Schedule O)		
4d		1,849,513.)	
A .	12,250,044	<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
4e	Total program service expenses 47, 352, 941.		000 (0000)
		⊢orn	n 990 (2023)

	990 (2023) Industry 36-216779	7	P	age 3
Fai			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	
-	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or cimilar amounts as defined in Roy. Proc. 98 102. (51) or 501(c)(6) organization that receives membership dues, assessments, or	5		х
6	similar amounts as defined in Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	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?			v
10	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
11	or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	х	X
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	_ i ie		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u>x</u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	X	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	77	X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
<u>.</u>	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
05 -	Part V, line 1	34		x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
d	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
07	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u>~</u>		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		x	
Pa	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	А	I
	Check if Schedule O contains a response of note to any line in this Part V		V	
1.0	Enter the number reported in box 3 of Form 1096 Enter -0- if not applicable	1	Yes	No
		0		
a	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 412							
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?							
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	х					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	х					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
_	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		v				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X				
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8								
9	sponsoring organization have excess business holdings at any time during the year?	8						
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a						
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
ь 10	Section 501(c)(7) organizations. Enter:	50						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
 а	Gross income from members or shareholders 11a							
	Gross income from other sources. (Do not net amounts due or paid to other sources against							
-	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
с	Enter the amount of reserves on hand 13c							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		x				
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17						
	If "Yes," complete Form 6069.							

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Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a95			
	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 on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 94	•		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	•	х	
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		
3		3		x
4	of officers, directors, trustees, or key employees to a management company or other person?	4	x	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6		х
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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 on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	x	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	exempt status with respect to such arrangements?			
17	List the states with which a copy of this Form 990 is required to be filedCA,FL,IL,MI,NY,PA,UT,WI,MN,OH,VA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990-T (section 501(c)(3))	onlv)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			-
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Shauna Lindsey - 773-684-1414			

5700 S. DuSable Lake Shore Drive, Chicago, IL 60637-2093

Form 990 (36-2167797	Page
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, H	ghest Compensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		🗌
Contine A	Officers Directors Trustees Key Employees and Highest Componented Employ		

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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.

See the instructions for the order in which to list the persons above.

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

(A)	(B) (C)							(D)	(E)	(F)		
Name and title	Average	Position (do not check more than one					ane	Reportable				
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of		
	week		cer ar I	id a d	irecto	r/trus I	tee)	from	from related	other		
	(list any	rector						the	organizations	compensation		
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the		
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related		
	below	lual tr	tional		nploy	st con	_	1099-1120)		organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) A. Chevy Humphrey	35.00											
President & CEO/Trustee		х		х				765,991.	0.	107,647.		
(2) David Woody	35.00											
VP - Exhibitions, Collections, CCO					х			323,179.	0.	24,924.		
(3) Jonathan Assell	35.00											
VP - Chief Financial Officer					Х			298,404.	0.	44,195.		
(4) Syeda Soofia	35.00											
VP - Chief of People and Culture						x		254,266.	0.	46,822.		
(5) Sheila M. Cawley	35.00											
SVP - Chief Rev Strategy (until 8/23					х			233,421.	0.	38,685.		
(6) Hsinghua Chen	35.00											
VP - Chief Administrative Officer					х			237,150.	0.	11,210.		
(7) Robert Dipasquantonio	35.00											
AVP - Information Technology						X		191,346.	0.	28,291.		
(8) Anne Rashford	35.00											
VP - Govt Affairs/Chief Bus Officer						x		198,911.	0.	20,102.		
(9) Jessica Chavez	35.00											
Ruth D. & Ken M. Davee VP, Education					х			180,623.	0.	31,535.		
(10) Curt Gruber	35.00											
AVP - Marketing & Sales (until 3/24)						X		195,892.	0.	6,943.		
(11) Patricia Ward	35.00											
AVP - Exhibitions & Partnerships						X		181,370.	0.	18,067.		
(12) David J. Vitale	1.00											
Chairman/Trustee		Х		Х				0.	0.	0.		
(13) David A. Fisher	1.00											
Treasurer/Trustee		Х		Х				0.	0.	0.		
(14) Michelle L. Collins	1.00											
Secretary/Trustee		Х		х				0.	0.	0.		
(15) Matthew J. Boler	1.00											
Vice Chairman/Trustee		Х		х				0.	0.	0.		
(16) Allan E. Bulley, Jr.	1.00											
Vice Chairman/Trustee		Х		х				0.	0.	0.		
(17) Frank M. Clark	1.00											
Vice Chairman/Trustee		Х		Х				0.	0.	0.		

Kenneth C. G	riffin Muse	um	of	Sci	enc	e a	nd					
Form 990 (2023) Industry									36-216779	7	P	age 8
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees,	anc	l Hig	ghes	st Co	ompensated Employee	s (continued)			
(A)	(B)			_ (0				(D)	(E)		(F)	
Name and title	Average	(do		Pos heck		l than d	one	Reportable	Reportable	E	stimate	ed
	hours per	box	, unle	ss per	son i	s both r/trus	n an	compensation	compensation	a	mount	of
	week (list any					1/ 11 43		from	from related		other	
	hours for	lirecto						the organization	organizations (W-2/1099-MISC/		npensa rom th	
	related	e or c	stee			Isatec		(W-2/1099-MISC/	1099-NEC)		ganizat	
	organizations	truste	al tru:		yee	nper		1099-NEC)			d relat	
	below	Individual trustee or director	Institutional trustee	er	key employee	Highest compensated employee	Ter			org	anizati	ons
	line)	Indiv	Insti	Officer	Key (High	Former					
(18) Douglas M. Cook	1.00											
Vice Chairman/Trustee		Х		Х				٥.	0.			0.
(19) Christopher M. Crane	1.00											
Vice Chairman/Trustee		Х		х				0.	0.			0.
(20) Anthony B. Davis	1.00											
Vice Chairman/Trustee		х		х				0.	0.			0.
(21) Kent P. Dauten	1.00											
Vice Chairman/Trustee		Х		х				0.	0.			0.
(22) Pedro DeJesus, Jr.	1.00											
Vice Chairman/Trustee		х		х				0.	0.			0.
(23) Ann M. Drake	1.00											_
Vice Chairman/Trustee		х		х				0.	0.			0.
(24) Joseph M. Erlinger	1.00											
Vice Chairman/Trustee	1.00	х		х				0.	0.			0.
(25) William M. Goodyear	1.00											•
Vice Chairman/Trustee (until 6/23/23		х		х				0.	0.			0.
(26) James A. Gordon	1.00								0			•
Vice Chairman/Trustee (until 6/23/23		Х		X				0. 3,060,553.	0.		378,	0.
1b Subtotal								3,000,553.	0.		370,	⁴²¹ .
c Total from continuation sheets to Part V								3,060,553.	0.		378,	-
d Total (add lines 1b and 1c)								, ,	-		570,	421.
2 Total number of individuals (including but i	not infilted to th	ose	iiste	u ac	ove) wn	ore	ceived more than \$100,	000 of reportable			40
compensation from the organization											Yes	No
3 Did the organization list any former officer	diractor truct			mol	~~~~		hia	host componented omp			100	NO
c ,				•	•		•	• •		3		х
line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> . 4 For any individual listed on line 1a, is the s										3		
and related organizations greater than \$15								•	•	4	х	
5 Did any person listed on line 1a receive or										Ŧ		

 5
 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services
 Image: Complete Schedule J for such person

 5
 Section B. Independent Contractors
 5

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
Berglund Construction Company		
8410 S. Chicago Avenue, Chicago, IL 60617	Construction	6,219,977.
Bridgewater Studio		
125 S. Racine Avenue, Chicago, IL 60607	Exhibit Design & Manufacturing	2,734,108.
Creative Technology Group, 1455 Estes		
Avenue, Elk Grove Village, IL 60007	Exhibit Teleproduction	2,310,261.
Canino Electric Company	Electrical Wiring &	
41 Plaza Drive, Unit A, Westmont, IL 60559	Installation	1,884,571.
Midway Building Services		
1915 W. Hubbard Street, Chicago, IL 60622	Janitorial	1,777,219.
2 Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization 56		

See Part VII, Section A Continuation sheets

Х

Dout VII	36-2167797									
Part VII Section A. Officers, Directors, Tru		```	(=)							
(A) Name and title	(B) Average hours	(cl		Pos	C) ition that		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) Robert A. Livingston	1.00									
Vice Chairman/Trustee		Х		Х				0.	0.	0
(28) Barry L. MacLean	1.00									
Vice Chairman/Trustee		Х		Х				0.	0.	0
(29) Duncan A. MacLean	1.00									
Vice Chairman/Trustee		Х		Х				0.	0.	0
(30) DG Macpherson	1.00									
Vice Chairman/Trustee		Х		Х				0.	0.	0
(31) Andrew J. McKenna	1.00									
Vice Chairman/Trustee (until 2/7/23)		Х		Х				0.	0.	0
(32) Robert F. Pasin	1.00									
Vice Chairman/Trustee		Х		Х				0.	0.	0
(33) Sheila A. Penrose	1.00									
Vice Chairman/Trustee		х		х				0.	0.	0
(34) E. Scott Santi	1.00									
Vice Chairman/Trustee		х		х				0.	Ο.	0
(35) Uma M. Amuluru	1.00									
Irustee		х						0.	0.	0
(36) Jeffrey R. Applebaum	1.00									
Irustee		х						0.	Ο.	0
(37) Pat A. Basu	1.00									
Irustee		х						0.	0.	0
(38) Cathy Birkeland	1.00									
Irustee		х						0.	0.	0
(39) Doug Boersma	1.00									
Irustee		х						٥.	0.	0
(40) Barbara L. Bowles	1.00									
Irustee		х						0.	0.	0
(41) Stephanie Braming, CFA	1.00									
Irustee		х						0.	0.	0
(42) Byron T. Brazier, D.Min.	1.00									
Irustee		х						0.	0.	0
(43) Chris Cartwright	1.00									
Irustee		х						0.	0.	0
(44) Piyush Chaudhari	1.00									
Irustee		х						0.	0.	0
(45) Andrew Clarke	1.00									
Irustee		х						0.	0.	0
(46) Kelley Conway	1.00									
Irustee		х						0.	0.	0

Form 990 Industry		36-2167797								
Part VII Section A. Officers, Directors, T			, ,							
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	5			Reportable	Reportable	Estimated				
	hours per	(CI	теск		Inat	app I	iy)	compensation from	compensation from related organizations	amount of other
	week					/ee		the		compensation
	(list any	ector				m plo		organization	(W-2/1099-MISC)	from the
	hours for	or dir	e			ated e		(W-2/1099-MISC)		organization
	related	ustee	truste		e	bens				and related
	organizations below	ual tru	tional		i ploye	t com				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(47) Rita Sola Cook	1.00	=	-	0	×		ш			
Trustee		х						٥.	0.	0.
(48) Richard H. Copans	1.00									
Trustee		х						٥.	0.	0.
(49) Kevin Cross	1.00									
Trustee		х						0.	0.	0.
(50) James S. Crown	1.00									
Trustee		х						0.	0.	0.
(51) Katherine C. Doyle	1.00									
Trustee		X						0.	0.	0.
(52) James J. Drury III	1.00									
Trustee		Х						0.	0.	0
(53) Richard Edelman	1.00								_	_
Trustee		х						0.	0.	0.
(54) Joshua Earnest	1.00									0
Trustee	1.00	х						0.	0.	0.
(55) Opella Ernest Trustee	1.00	x						0.	0.	0.
(56) W. James Farrell	1.00	л						0.	••	0.
Trustee		x						0.	0.	0.
(57) James J. Fuentes	1.00								·	
Trustee (until 6/23/23)	-	х						٥.	0.	0.
(58) Greg Franks	1.00									
Trustee		х						٥.	0.	0
(59) James T. Glerum, Jr.	1.00									
Trustee		х						٥.	0.	0
(60) Benjamin S. Graham	1.00									
Trustee (until 6/23/23)		Х						٥.	0.	0
(61) Catherine P. Greenspon	1.00									
Trustee		Х						0.	0.	0
(62) Myetie Hamilton	1.00									
Trustee		Х						0.	0.	0
(63) Stephanie J. Hickman	1.00									_
Trustee	1.00	х						0.	0.	0
(64) Steven Hunter	1.00	v						_	_	_
Trustee	1 00	X						0.	0.	0
(65) Justin Ishbia Trustee	1.00	x						0.	0.	0
(66) Rashad R. Johnson, P.E.	1.00	^						U.	0.	0
Trustee	1.00	x						0.	0.	0
						L		· · ·	۰.	0

Form 990 Industry	36-2167797									
Part VII Section A. Officers, Directors, Tr	ees (continued)									
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	AveragePositionhours(check all that apply)				Reportable	Reportable	Estimated			
	hours per	(Cl	neck I	all 1	that	app I	ly)	compensation from	compensation from related	amount of other
	week					ee		the	organizations	compensation
	(list any	ctor				l ploy		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ted er		(W-2/1099-MISC)		organization
	related	stee c	ruste		a.	pensa				and related
	organizations	lal tru	onal t		plo ye	com				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(67) Edward L. Kaplan	1.00	=	=	ò	ž	- -	F			
Trustee		x						٥.	٥.	0
(68) Vikram Karnani	1.00									
Trustee		х						0.	0.	0.
(69) Michael P. Krasny	1.00									
Trustee		х						0.	0.	0.
(70) Eric P. Lefkofsky	1.00									
Trustee (until 6/23/23)		х						٥.	٥.	0
(71) Charles A. Lewis	1.00									
Trustee (until 6/23/23)		х						0.	0.	0
(72) H. John Livingston	1.00									
Trustee		Х						٥.	٥.	0
(73) Matthew M. Maloney	1.00									
Trustee		Х						0.	0.	0
(74) Tom McGuinness	1.00									
Trustee		Х						0.	0.	0
(75) Robert S. Murley	1.00									
Trustee		х						0.	0.	0
(76) Daniela O'Leary-Gill	1.00							0	0	0
Trustee (77) Louis V. Pinkham	1.00	X						0.	0.	0
Trustee	1.00	x						0.	0.	0
(78) John F. Podjasek III	1.00	Δ						0.	0.	0
Trustee	1.00	x						0.	0.	0
(79) Jason Pritzker	1.00							°.		
Trustee		x						٥.	0.	0
(80) Michael A. Reinsdorf	1.00									
Trustee		x						٥.	0.	0
(81) Michelle Russell	1.00									
Trustee		х						0.	0.	0
(82) Manuel Sanchez	1.00									
Trustee		х						٥.	0.	0
(83) Smita N. Shah	1.00									
Trustee		х						٥.	0.	0
(84) Virginia K. Simmons	1.00									
Trustee		х						٥.	0.	0
(85) Melody A. Spann-Cooper	1.00									
Trustee		Х						0.	0.	0
(86) Byron O. Spruell	1.00									
Trustee (until 6/23/23)		Х						0.	0.	0

Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	ees (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	tor				ploye		the organization	organizations (W-2/1099-MISC)	compensatior from the
	hours for	direc				ed em		(W-2/1099-MISC)	(11 2) 1000 11100)	organization
	related	tee or	ustee			ensate		(and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest com pen sated em ployee				organizations
	below	ividua	itutio	Officer	em p	hest c	Former			
	line)	Ind	Inst	Offi	Key	Hig	For			
87) Kristofer K. Swanson	1.00								_	
	1.00	х						0.	0.	
(88) Shundrawn A. Thomas	1.00							0	0	
Trustee (89) Leonard Wanger	1.00	X						0.	0.	
Trustee	1.00	x						0.	0.	(
(90) Ralph Wanger	1.00		-					0.	0.	
Trustee		x						0.	0.	(
(91) Ann C. Williams	1.00									
rustee		х						0.	0.	
(92) Peng Zhao	1.00									
Trustee (until 6/23/23)		х						٥.	0.	
(93) Elizabeth Ziegler	1.00									
Irustee		х						0.	0.	(
(94) Charles K. Bobrinskoy	1.00									
Life Trustee		Х						٥.	0.	(
(95) John A. Canning, Jr.	1.00									
life Trustee		Х						0.	0.	
(96) Lester Crown	1.00									
Life Trustee		Х						0.	0.	
(97) William J. Devers, Jr.	1.00									
Life Trustee	1.00	х						0.	0.	
(98) Dennis J. FitzSimons Life Trustee	1.00							0	0.	
(99) Jere D. Fluno	1.00	Х						0.	U.	
Life Trustee	1.00	x						0.	0.	
(100) J. Ira Harris	1.00	~						0.	0.	
Life Trustee	1.00	x						٥.	0.	
(101) James R. Kackley	1.00								`` .	
Life Trustee		x						٥.	0.	
(102) John P. Keller	1.00									
Life Trustee		х						0.	0.	
(103) Richard H. Lenny	1.00									
life Trustee		х						0.	0.	
(104) Edward M. Liddy	1.00									
Life Trustee		х						0.	0.	
(105) Walter E. Massey, Ph.D.	1.00									
Life Trustee		х						٥.	0.	
(106) Robert S. Morrison	1.00									
ife Trustee		Х						٥.	0.	

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Form 990 Industry			36-21677	97							
Part VII Section A. Officers, Directors, T		nplo	yee			ligh	est				
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average	(-		Pos			1.3	Reportable	Reportable	Estimated	
	hours	(C	heck T	(all 1	all that apply)			compensation	compensation from related	amount of other	
	per week					9		from the	organizations	compensation	
	(list any	tor				ploye		organization	(W-2/1099-MISC)	from the	
	hours for	r direc				ed em		(W-2/1099-MISC)	(organization	
	related	tee or	ustee			ensat				and related	
	organizations	ul trus	nal tr		loyee	dwo				organizations	
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former				
	line)	Ind	lns	15	Key	Hig	For				
(107) Terry E. Newman Life Trustee	1.00	x							0	0	
(108) James J. O'Connor	1.00	~						0.	0.	0	
	1.00	x						0	0	0	
Life Trustee (109) William A. Osborn	1.00	~				-		0.	0.	0	
Life Trustee	1.00	x						0.	0.	0	
(110) Cindy Pritzker	1.00	<u></u>			-					0	
Life Trustee		x						0.	0.	0	
(111) Louis A. Simpson	1.00				-					0	
Life Trustee	1.00	x						0.	0.	0	
(112) James A. Skinner	1.00										
Life Trustee		x						0.	0.	0	
(113) Eugene A. Tracy	1.00										
Life Trustee		х						0.	0.	0	
(114) Arthur R. Velasquez	1.00										
Life Trustee		х						0.	0.	0	
		_									
		-									
		-									
		1									
otal to Part VII, Section A, line 1c											

art		I Statement of Re	ven	ue						7 Pag
		Check if Schedule O	conta	ains a respo	nse	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclud from tax und sections 512 -
Its	1 a	Federated campaigns		1a						
n	b	Membership dues		1b		3,307,814.				
Å M	с	Fundraising events		1c		1,723,787.				
ar /	d	Related organizations		1d						
Ĩ	е	Government grants (contr	ributi	ons) 1e		6,203,220.				
3	f	All other contributions, gifts,	gran	ts, and						
the		similar amounts not included	l abov	/e 1f		17,322,963.				
Ó	g	Noncash contributions included in	lines .	la-1f 1g \$		756,646.				
and Other Similar Amounts	h	Total. Add lines 1a-1f					28,557,784.			
						Business Code				
	2 a	General Admissions				900099	12,432,670.	12,432,670.		
	b	Special Exhibits			_	900099	3,095,358.	3,095,358.		
anc	c	U-505 Exhibit				900099	1,742,784.	1,742,784.		
svel	d	Giant Dome Theater				900099	1,495,427.	1,495,427.		
Ке	e	Coal Mine Exhibit			_	900099	777,168.	777,168.		
Revenue	-	All other program service	rovo	nue		900099	1,517,074.	1,517,074.		
	q						21,060,481.			
-	<u>y</u> 3			dividonde ir			,,			
	3	Investment income (inclue	Ŭ				7,168,387.			7,168,3
	4	other similar amounts) Income from investment of tax-exempt bond p					,100,007.			,,100,0
	4 5				iu p	loceeus	666.			6
	5	Royalties	· · · · · · · · · · · · · · · · · · ·	(i) Real		(ii) Personal				
	•	0	•	1,009,3		(ii) i eisonai				
		Gross rents	6a							
		Less: rental expenses	6b	356,2						
		Rental income or (loss)	<u>6c</u>	653,0	59.		(52.050		(52.050	
		Net rental income or (loss	;) <u></u>	(1) Coordinates	<u></u>	(ii) Oth er	653,059.		653,059.	
	7 a	Gross amount from sales of		(i) Securiti		(ii) Other				
		assets other than inventory	7a	164,495,7	1/.					
	b	Less: cost or other basis			~ ~					
		and sales expenses		169,086,8						
	С	Gain or (loss)	7c	-4,591,1	05.	L				
1		Net gain or (loss)			·····		-4,591,105.			-4,591,1
	8 a	Gross income from fundraisi								
5		including \$ 1,								
		contributions reported on								
		Part IV, line 18			8a	120,500.				
	b	Less: direct expenses			8b	708,272.				
	С	Net income or (loss) from	fund	raising even	ts		-587,772.			-587,7
	9 a	Gross income from gamin								
		Part IV, line 19			9a	5,575.				
	b	Less: direct expenses			9b	7,000.				
	С	Net income or (loss) from	gam	ing activities	·	·····	-1,425.			-1,4
1	0 a	Gross sales of inventory,	less	returns						
		and allowances			10a	720,117.				
	b	Less: cost of goods sold			10b	110,328.				
	с	Net income or (loss) from	sale	s of inventor	<u>y</u>		609,789.		348,980.	260,8
						Business Code				
1	1 a	Parking & Guest Srv	s			900099	2,360,850.			2,360,8
inu:	b	Food Court				722514	1,917,094.			1,917,0
Revenue	с									
ř		All other revenue				900099	1,267,061.	649,389.	617,672.	
	е	Total. Add lines 11a-11d				I	5,545,005.			

Industry

Form 990 (2023)

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) Х Check if Schedule O contains a response or note to any line in this Part IX (B) (D) (C) (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 2,399,512. trustees, and key employees 1,151,483. 810,456. 437,573. Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 17,215,323. Other salaries and wages 13,680,580. 1,981,052. 1,553,691. 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 538,162 406,940. 76,589 54,633. 2,090,503 1,448,283 347,757 294,463. Other employee benefits 9 1,330,109 1,005,783 189,296 135,030. 10 Payroll taxes 11 Fees for services (nonemployees): Management а 356,619, 356,619 b Legal 110,366. 110,366 С Accounting 122,959 122,959 Lobbying d 102,000. 102,000. Professional fundraising services. See Part IV, line 17 е 601,895. 601,895. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 7,158,945 6,500,743. 532,288 125,914. column (A), amount, list line 11g expenses on Sch 0.) 2,415,229 2,415,229, Advertising and promotion 12 10,688. 756,672. 17,763 785,123 Office expenses 13 1,254,031 887,152, 305,668 61,211. Information technology 14 15 Royalties 1,347,759 1,239,353. 108,406 16 Occupancy 768,532, 64,288 575,036, 129,208. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,539,871, 1,539,871, 20 Interest Payments to affiliates 21 10,655,185 10,283,921 371,264 Depreciation, depletion, and amortization 22 573,070 46,094 526,976. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) Building Maintenance 2,410,815, 2,289,592. 121,223 а Program Development 1,338,940. 1,221,768. 6,141. 111,031. b Exhibit Fab. & Maint. 799,218, 799,218, С 23,336. Bank & Credit Card Fees 167,159. 143,823. d 789,194, 480,518, 207,612 101.064. All other expenses е 6,401,072, 56,870,519 47,352,941 3,116,506. Total functional expenses. Add lines 1 through 24e 25 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)

	990 (2 t X	2023) Industry Balance Sheet				36-2	2167797 Page
		Check if Schedule O contains a response or not	e to any lir	ne in this Part X			Г
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3,971,000.	1	3,058,26
	2	Savings and temporary cash investments			42,941,684.	2	49,064,79
	3	Pledges and grants receivable, net			9,770,558.	3	8,424,98
	4	Accounts receivable, net	8,982,327.	4	1,869,53		
	5	Loans and other receivables from any current of	· · ·	_	· · ·		
	-	trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disquali				-	
	-	under section 4958(f)(1)), and persons described				6	
	7	Notes and loans receivable, net		Г		7	
Assets	8	Inventories for sale or use			71,427.	8	86,05
As	9				753,121.	9	3,104,31
		Land, buildings, and equipment: cost or other			,		, ,
		basis. Complete Part VI of Schedule D	10a	424,120,425.			
	b		10b	274,890,919.	137,417,381.	10c	149,229,50
	11	Investments - publicly traded securities			142,473,164.	11	122,232,34
	12	Investments - other securities. See Part IV, line			59,203,578.	12	81,633,76
	13	Investments - program-related. See Part IV, line	, ,	13	, ,		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			4,018,052.	15	3,497,27
	16	Total assets. Add lines 1 through 15 (must equ			409,602,292.	16	422,200,83
	17	Accounts payable and accrued expenses			9,658,113.	17	7,768,79
	18	Grants payable		18			
	19	Deferred revenue	12,572,344.	19	13,927,48		
	20	Tax-exempt bond liabilities			48,978,266.	20	29,691,63
	21	Escrow or custodial account liability. Complete				21	
<u>ه</u>	22	Loans and other payables to any current or form					
itië		trustee, key employee, creator or founder, subs	antial cont	tributor, or 35%			
Liabilities		controlled entity or family member of any of the	se persons			22	
<u>ا</u> ۳	23	Secured mortgages and notes payable to unrela	ted third p	Γ		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	yables to r	elated third			
		parties, and other liabilities not included on lines	s 17-24). Co	omplete Part X			
		of Schedule D			925,981.	25	1,078,13
	26	Total liabilities. Add lines 17 through 25			72,134,704.	26	52,466,05
		Organizations that follow FASB ASC 958, che	ck here	X			
Ces		and complete lines 27, 28, 32, and 33.					
aŭ	27	Net assets without donor restrictions	270,137,978.	27	300,846,23		
Ba	28	Net assets with donor restrictions	L	67,329,610.	28	68,888,54	
		Organizations that do not follow FASB ASC 9	58, check	here			
٣		and complete lines 29 through 33.					
s l	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or ea	quipment f	und		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Š.	32	Total net assets or fund balances		L	337,467,588.	32	369,734,77
	33	Total liabilities and net assets/fund balances			409,602,292.	33	422,200,83

422,200,833. Form 990 (2023)

409,602,292.

33

33

Total liabilities and net assets/fund balances

Kenneth C. Griffin Museum of Science and
--

	Kenneth C. Griffin Museum of Science and				
Form	n 990 (2023) Industry	36-216	7797	Pa	_{ge} 12
Pa	Int XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	58	,414,	869.
2	Total expenses (must equal Part IX, column (A), line 25)	2	56	,870,	519.
3	Revenue less expenses. Subtract line 2 from line 1	3	1	,544,	350.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	337	,467,	588.
5	Net unrealized gains (losses) on investments	5	31	,153,	678.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-430,	837.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	369	,734,	779.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Sc	hedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or re-	viewed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a se	eparate basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	t of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain of	on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	he			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2023)

SC	HE	DULE A		Dublic Cha	rity Status an		lia Su	unnort		OMB No. 1545-0047
(Fo	orm 9	90)			n rity Status an					2023
				• •	147(a)(1) nonexempt cha			or a section		2023
		of the Treasury enue Service		A	ttach to Form 990 or Fo	orm 990-E	Ζ.			Open to Public
				¥	/Form990 for instruction		latest inf	ormation.	Employor	Inspection
INdi	le oi	the organization	Indust		useum of Science an	a				identification number 36-2167797
Pa	rt I	Reason		=	(All organizations must c	omplete ti	nis part) S	ee instruction		
					(For lines 1 through 12, c					
1			•		on of churches described		,	I)(A)(i).		
2		A school des	cribed in sect	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	า 990).)				
3		A hospital or	a cooperative	hospital service org	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical res	earch organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state								
5		-	-		ollege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
~				Complete Part II.)	en en de la constante en estas en la se			4.5		
6 7				-	mental unit described in					a de la contra din
'	<u> </u>			omplete Part II.)	antial part of its support fr	on a gove	ennentai		le general j	
8		-			(1)(A)(vi). (Complete Par	+ II)				
9	F				l in section 170(b)(1)(A)(,	ed in coniu	inction with a	land-grant	college
-		•	-		culture (see instructions).				•	•
		university:			, , , , , , , , , , , , , , , , , , ,		, ,	,	0	
10		An organizati	on that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities relat	ed to its exen	npt functions, subje	ct to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
		income and u	nrelated busir	ness taxable income	e (less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	after June 30, 1975.
				mplete Part III.)						
11		-	-	-	ively to test for public sa	•				
12		-	-	-	sively for the benefit of, to	-			•	
				-	ed in section 509(a)(1) o					Sheck the box on
a		_	-	• •	of supporting organizatior supervised, or controlled				-	aivina
6					egularly appoint or elect a	• • •	-			
		••	0	complete Part IV, S	• • • • •	indjointy c				,pporting
b				-	d or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ving
		control or n	nanagement o	of the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
c		_ Type III fur	ctionally inte	grated. A supportir	ng organization operated	in connect	tion with, a	and functional	ly integrate	ed with,
	_		Ũ	()(s). You must complete I	,	,			
c			-		porting organization oper				•	
				•	zation generally must sat	•		•	an attentiv	/eness
		- ·		,	mplete Part IV, Sections					
e			•		written determination fro nally integrated supportion			турет, туре	п, туре п	
f	Fnt	er the number of								
			• •	n about the supporte						
		(i) Name of suppo		(ii) EIN	(iii) Type of organization	(iv) Is the organized (iv) is the organized (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv)	anization listed ng document?	(v) Amount of		(vi) Amount of other
		organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
										<u> </u>
										<u> </u>
Tota	al									

Schedule A ((Form 990)	02023	Industry
Schedule A	FOUL 990	2023	Induber 3

Part II

3

36-2167797 Page **2**

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) (d) 2022 (a) 2019 (b) 2020 (c) 2021 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 30,378,394 41,515,795. 126,650,878 31,261,691 22,840,907 252,647,665. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5,577,460 5,439,338 5,134,940 6,189,564, 5,716,877, 28,058,179. 3 The value of services or facilities furnished by a governmental unit to the organization without charge 35 955 854. 46 955 133. 131 785 818 37 451 255 28 557 784 280,705,844. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 280,705,844. 6 Public support. Subtract line 5 from line 4 Section B. Total Support <u>(d)</u> 2022 Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (e) 2023 (f) Total 35,955,854, 46,955,133. 131,785,818. 37,451,255. 28,557,784, 280,705,844. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 3,510,555. 2,941,681 5,587,751 5,610,402. 7,169,053 24,819,442. and income from similar sources 9 Net income from unrelated business activities, whether or not the 1,000 1,000. business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 677,474. 262,468, 2,376,052 1,731,183. 649,389. 5,696,566. 311,222,852. **11 Total support.** Add lines 7 through 10 88,223,047. **12** Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 90.19 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 14 % 15 Public support percentage from 2022 Schedule A, Part II, line 14 85,98 15 % 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2022. 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 17a 10% -facts-and-circumstances test - 2023. 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 b 10% -facts-and-circumstances test - 2022. 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 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

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 Part III Support Schedule for Organizations Described in Section 509(a)(2)

Industry

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Section A. Fublic Support						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to						
 or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 						
6 Total. Add lines 1 through 5						
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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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.)	L		La contra di contra di	<u> </u>		
14 First 5 years. If the Form 990 is for th	ie organization's fi	rst, second, third, '	rourth, or fifth tax	year as a section 5	ou1(c)(3) organi	zation,
Section C. Computation of Publi					1 1	
15 Public support percentage for 2023 (I			column (f))		15	%
16 Public support percentage from 2022					16	%
Section D. Computation of Inves						
17 Investment income percentage for 20					17	%
18 Investment income percentage from a					18	%
19a 33 1/3% support tests - 2023. If the	organization did n	ot check the box o	on line 14, and line	e 15 is more than 3	33 1/3%, and lii	ne 17 is not
more than 33 1/3%, check this box ar b 33 1/3% support tests - 2022. If the	-					
line 18 is not more than 33 1/3%, che	-					
20 Private foundation. If the organization			-		-	

1

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

Industry

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

	Kenneth C. Griffin Museum of Science and			
Sche		5-2167797	Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1 2	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization? <i>If</i> "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	rs, ed 		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			

	the supported organization(s).	1		
Sec	the supported organization(s). Stion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

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 du	ring the year (see instructions).
--	---------------------------------	----

The organization satisfied the Activities Test. Complete line 2 below. а

b		The organization is the parent of e	ach of its supported organizations.	Complete line 3 below.
---	--	-------------------------------------	-------------------------------------	------------------------

c		The organization	supported a	a governmental	entity.	Describe in F	Part VI how	you supported	a governmental enti	ty (see instruction <u>s).</u>	
---	--	------------------	-------------	----------------	---------	---------------	-------------	---------------	---------------------	--------------------------------	--

- 2 Activities Test. Answer lines 2a and 2b 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 on line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No" 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.

Booti

2a

2b

3a

Yes No

1

Kenneth C. Griffin Museum of Science and	Kenneth C	Griffin	Museum	of	Science	and
--	-----------	---------	--------	----	---------	-----

Sche	edule A (Form 990) 2023 Industry			36-2167797 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	e Sections A through E.	-
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

	dule A (Form 990) 2023 Industry	(a)(0) 0			36-2167797	Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Organ	nizations _{(continu}	ed)	. <u></u>	
Sect	on D - Distributions				Current Y	'ear
_1	Amounts paid to supported organizations to accomplish exe			1		
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	he organization is responsive		_		
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	(n)	(1)	10		
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	S	(iii) Distributa Amount for	
_1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
a	From 2018					
b	From 2019					
C	From 2020					
d	From 2021					
e	From 2022					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2023 distributable amount					
i	Carryover from 2018 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j and 4c.					
8	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2020					
	Excess from 2022					
	Excess from 2023					

Schedule A (Form 990) 2023

Kenneth C. Griffin Museum of Science and		
Schedule A (Form 990) 2023 Industry	36-2167797	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V	and 2; Part IV, Sectio , Section B, line 1e; P	n C,
Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additior (See instructions.)	nal information.	
Schedule A, Part II, Line 10, Explanation for Other Income:		
Miscellaneous Revenue		
2019 Amount: \$ 676,733.		
2020 Amount: \$ 256,139.		
2021 Amount: \$ 286,307.		
2022 Amount: \$ 257,968.		
2023 Amount: \$ 649,389.		
Film Lease Revenue		
2019 Amount: \$ 741.		
2020 Amount: \$ 6,329.		
2021 Amount: \$ 1,875.		
Employee Retention Credit		
2021 Amount: \$ 2,087,870.		
2022 Amount: \$ 1,473,215.		

** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. 2023

OMB No. 1545-0047

Employer identification number

Kenneth	с.	Griffin	Museum	of	Science	and	
_							

36-2167797

	Industry
Organization type (ch	neck one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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), 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 doesn't meet the filing requirements of Schedule B (Form 990).

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

-	B (Form 990) (2023)	1 -	Page 2
	rganization C. Griffin Museum of Science and	E	mployer identification number
Industry			36-2167797
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 5,716,81	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$3,000,00	Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$679,06	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

	3 (Form 990) (2023) ganization	E	mployer identification number
nneth (dustry	C. Griffin Museum of Science and		36-2167797
			30-2107737
Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1		\$	

Schedule	B (Form 990) (2023)				Page 4
Name of o	organization				Employer identification number
Kenneth	C. Griffin Museum of Science and				
Industry	Y				36-2167797
Part III	Exclusively religious, charitable, etc., contributin from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of the provided that the total of exclusively religious, of	through (e) and the followin charitable, etc., contributions of \$	ig line entry. For or	ganizations	
(a) No	Use duplicate copies of Part III if additional s	space is needed.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	yift	(d) Dese	cription of how gift is held
		(e) Transf	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Dese	cription of how gift is held
		(e) Transf	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	insferor to transferee
(a) No. from					
from Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Dese	cription of how gift is held
		(e) Transf	er of gift		
	Transferee's name, address, a		D	olationship of tra	insferor to transferee
			<u> </u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	yift	(d) Dese	cription of how gift is held
		(e) Transf	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	insferor to transferee
	1				

(Form 990)	For Org	anizations Exempt From Income	Tax Under Section	501(c) and Section 527	2023	
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						
 Section 501(c)(3) org Section 501(c) (other Section 527 organiz If the organization ans Section 501(c)(3) org Section 501(c)(3) org If the organization ans Tax) (see separate inst 	ganizations: Com or than section 50 ations: Complete wered "Yes" on ganizations that I ganizations that I wered "Yes" on ructions), then:	Form 990, Part IV, line 4, or Ford have filed Form 5768 (election und have NOT filed Form 5768 (electio Form 990, Part IV, line 5 (Proxy	plete Part I-C. Parts I-A and C below. m 990-EZ, Part VI, lin der section 501(h)): Co n under section 501(h)	Do not complete Part I-B. he 47 (Lobbying Activities omplete Part II-A. Do not co)): Complete Part II-B. Do r), then: mplete Part II-B. not complete Part II-A.	
		tions: Complete Part III.	_			
Name of organization		Griffin Museum of Scienc	e and	Emp	loyer identification number	
Part I-A Compl	Industry	anization is exempt unde	r aportion $E01(a)$	r in a postion 527 of	36-2167797	
3 Volunteer hours for Part I-B Compl	r political campai ete if the org	gn activities anization is exempt unde	r section 501(c)(3	3).		
1 Enter the amount of	of any excise tax	incurred by the organization unde	r section 4955		\$	
					Yes No	
		anization is exempt unde	r section 501(c),	except section 501(c)(3).	
2 Enter the amount of	of the filing organ	ization's funds contributed to othe	er organizations for se	ction 527	\$	
3 Total exempt funct	ion expenditures	. Add lines 1 and 2. Enter here an	d on Form 1120-POL,		•	
					♪Yes No	
5 Enter the names, a made payments. F	Enter the amount of any excise tax incurred by the organization under section 4955 \$ Enter the amount of any excise tax incurred by organization managers under section 4955 \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? \$ Was a correction made? If "Yes," describe in Part IV. If the amount directly expended by the filing organization for section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filin made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segreg political action committee (PAC). If additional space is needed, provide information in Part IV.	ch the filing organization ne amount of political				
(a) Nam	e	(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	

Political Campaign and Lobbying Activities

OMB No. 1545-0047

SCHEDULE C (Form 990)

		in Museum of Scie	ence and		
Schedule C (Form 990) 2023 Part II-A Complete if the org	Industry	nnt under section	501(c)(3) and file		Page 2 Page 2 Page 2
section 501(h)).					
	ation belongs to an aff	iliated group (and list ir	Part IV each affiliated	proup member's nam	ne. address. EIN.
	re of excess lobbying	• • •			,,
		nd "limited control" pro	ovisions apply.		
Limi	its on Lobbying Expe	•		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (grassroots lobbying)			
b Total lobbying expenditures to infl	uence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	ines 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	es (add lines 1c and 1c	(k			
f Lobbying nontaxable amount. Ent		e following table in bot	h columns.		
If the amount on line 1e, column (a) o	or (b) is: The lot	obying nontaxable am	ount is:		
not over \$500,000,		the amount on line 1e.			
over \$500,000 but not over \$1,000	· · · ·	00 plus 15% of the exc			
over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
over \$1,500,000 but not over \$17,		00 plus 5% of the exce	<u>ss over \$1,500,000.</u>		
over \$17,000,000,	\$1,000	,000.			
g Grassroots nontaxable amount (er	, ,				
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than ze	-				Yes No
reporting section 4911 tax for this (Some organizations t	4-Year Av hat made a section 5 See the separ	eraging Period Under 01(h) election do not rate instructions for li	have to complete all o nes 2a through 2f.)		
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(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))					L
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and ha (election under section 501(h)).	s NOT fil	ed Form 5	768
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)
of the lobbying activity.	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or			
local legislation, including any attempt to influence public opinion on a legislative matter			
or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		122,959
j Total. Add lines 1c through 1i			122,959
2a Did the activities in line 1 cause the organization to not be 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	n 501(a)//	5) or cooti	00
Part III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).		<i>J</i> , or secu	011
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 			
 3 Did the organization make only influese lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the 			
Part III-B Complete if the organization is exempt under section 501(c)(4), section			on
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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 politic			
expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year			
c Total			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p			
expenditures 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:			
The Netional Group (TNG) represents The Kerneth G. Griffin Museum of			
The National Group (TNG) represents The Kenneth C. Griffin Museum of			
Science and Industry in government and other policy-making forums. They			
work to influence decision-makers by advocating for the interests of			
the Museum. TNG works to build relationships with elected officials,			

bureaucrats, and other stakeholders to promote the Museum's interests.

SCI	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-004	7
	n 990)	Complete if the orga	nization answered "Yes" on Form 990,		2023	
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. .ttach to Form 990.		Open to Public	с
Interna	Revenue Service		0 for instructions and the latest informatio		Inspection	
Nam	e of the organization	on Kenneth C. Griffin Museum o Industry	f Science and	Em	ployer identification numl 36-2167797	ber
Par	t I Organiza		d Funds or Other Similar Funds or	Accour		
		n answered "Yes" on Form 990, Part IV, lin			•	
			(a) Donor advised funds	(b) Fur	nds and other accounts	
1		nd of year				
2		f contributions to (during year)				
3		f grants from (during year)				
4		t end of year	witing that the apparts hold in dense advised	fundo		
5	•		writing that the assets held in donor advised exclusive legal control?		Yes	No
6			dvisors in writing that grant funds can be use			NU
Ū	•	u , , ,	r donor advisor, or for any other purpose con	•		
_	impermissible priva	ate benefit?	· · · · ·		Yes	No
Par	t II Conserva	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, Par	t IV, line 7		
1	Purpose(s) of cons	ervation easements held by the organization	on (check all that apply).			
		of land for public use (for example, recrea	·		important land area	
		f natural habitat	Preservation of a c	certified hi	istoric structure	
•		of open space				
2	day of the tax year	.	ied conservation contribution in the form of a		Held at the End of the Tax Y	/ear
а				2a		
b						
с	•	vation easements on a certified historic stru		0-		
d	Number of conserv	vation easements included on line 2c acqu	ired after July 25, 2006, and not			
	on a historic struct	ture listed in the National Register		2d		
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished, or terminated by the org	ganization	during the tax	
	year					
4 5		where property subject to conservation eas tion have a written policy regarding the per				
5		orcement of the conservation easements it			Yes	No
6			handling of violations, and enforcing conserv			
					0 ,	
7	Amount of expens	es incurred in monitoring, inspecting, hanc	lling of violations, and enforcing conservatior	easemen	nts during the year	
8			satisfy the requirements of section 170(h)(4)	(B)(i)		
•	and section 170(h)					No
9		•	on easements in its revenue and expense sta			
		ounting for conservation easements.	note to the organization's financial statements	s mai dest	cribes the	
Par			Art, Historical Treasures, or Othe	r Simila	ar Assets.	
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	balance s	heet works	
	of art, historical tre	easures, or other similar assets held for put	blic exhibition, education, or research in furth	erance of	public	
	•		ncial statements that describes these items.			
b	-		8, to report in its revenue statement and bala			
			exhibition, education, or research in furthera	ince of pu	idiic service,	
	•	ng amounts relating to these items. ded on Form 990, Part VIII, line 1			\$	
					\$ \$	
2	.,		asures, or other similar assets for financial ga	in, provide	• e	
_		unts required to be reported under FASB A		,		
а	-		~ 		\$	
	Assets included in				\$	
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2	2023

	_	GIIIIII Museum	or berence and						•
	dule D (Form 990) 2023 Industry t III Organizations Maintaining C	ollections of Ar	t. Historical Tre	asures or	Other		5-216 ssets		Page 2
3	Using the organization's acquisition, accessi		-					(Contin	luea)
•	collection items (check all that apply).		e, encon any er the r	ono mig that i	nano olg		01 100		
а	X Public exhibition	d	l 🗌 Loan or exc	hange progran	n				
b	Scholarly research	e		nango progran					
c	Preservation for future generations	J							
4	Provide a description of the organization's co	lections and explain	how they further th	e organization	's exem	nt nurnose ir	n Part 3	xIII	
5	During the year, did the organization solicit o								
•	to be sold to raise funds rather than to be ma			-				Yes	X No
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pa		ie in the englinearen			onn ooo, r a	,		
1a	Is the organization an agent, trustee, custodi	an. or other intermed	liarv for contribution	s or other asse	ets not i	ncluded			
	on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII						ـــــ		
			iennig tablet					Amount	t
с	Beginning balance					1c			
	Additions during the year								
	Distributions during the year								
f	Ending balance					16 1f			
	Did the organization include an amount on Fe							Yes	No
	If "Yes," explain the arrangement in Part XIII.					J ·			
Par									
	· · ·	(a) Current year	(b) Prior year	(c) Two years		d) Three years	s back	(e) Four	years back
1a	Beginning of year balance	21,294,019.	25,583,763.	23,542,	145.	20,406,	762.	16,	493,417.
	Contributions	766,203.	158,044.		500.	2,257,	080.	1,	510,904.
	Net investment earnings, gains, and losses	3,382,417.	-3,459,505.	2,167,	118.	1,538,		2,	867,405.
	Grants or scholarships								
	Other expenditures for facilities								
-	and programs	887,560.	988,283.	913,	000.	659,	848.		464,964.
f	Administrative expenses					· · ·			
g	End of year balance	24,555,079.	21,294,019.	25,583,	763.	23,542,	145.	20,	406,762.
•	Provide the estimated percentage of the curr	ent vear end balance	e (line 1g. column (a)) held as:		<u> </u>		· · · ·	
a	Board designated or quasi-endowment	.0000	%	,					
b	Permanent endowment 94.0000	%							
	Term endowment 6.0000								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	•	tion that are held ar	nd administere	d for the	9			
	organization by:	0						ſ	Yes No
								3a(i)	X
								3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza							3b	
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, I	Part X, li	ine 10.			
	Description of property	(a) Cost or o	ther (b) Cost	or other	(c) Ac	cumulated		(d) Bool	< value
		basis (investr	nent) basis	(other)	dep	reciation			
1a	Land								
	Buildings		218	,094,642.	11	L7,314,319		100,	780,323.
	Leasehold improvements								
	Equipment		19	,084,122.	1	L4,380,073		4,	704,049.
	Other		186	,941,661.	14	13,196,527		43,	745,134.
	. Add lines 1a through 1e. (Column (d) must e		X line 10c column	<i>(</i> B))				149,	229,506.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Industry			36-2167797	Page 3
Part VII Investments - Other Securities				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. 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	t value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A) Equity Funds	56,433,389.	End-of-Year Market Value		
	25,200,374.	End-of-Year Market Value		
	23,200,314.	Ind of feat Market Variat		
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	81,633,763.			
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market	t value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets				
Complete if the organization answered "Yes"		1d. 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, line 15, col	(<i>(</i> R))			
Part X Other Liabilities	<u>. (</u>))			
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	1e or 11f See Form 990 Part X line	25	
(a) Decemention of lightlike			(b) Book	value
······································				
(1) Federal income taxes				F 4 0 0 0 0
(2) Asset Retirement Obligation				548,929.
(3) Funds on Deposit				334,051.
(4) Supplemental Retirement Plans				195,152.
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 25, col	(<i>(</i> B))		1	078,132.
2. Liability for uncertain tax positions. In Part XIII, provide				
organization's liability for uncertain tax positions under				

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Kenneth C. Griffin Museum of Science and
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	Kenneth C. Griffin Museum of Science	and			
Sche	hedule D (Form 990) 2023 Industry			36-2167797 Page	
Par	t XI Reconciliation of Revenue per Audited Financial Staten	nents With	Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1:	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	91,508,808.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	31,153,678.		
b	Donated services and use of facilities	2b	1,875,034.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		-514,744.		
е	Add lines 2a through 2d			2e	32,513,968.
3	Subtract line 2e from line 1			3	58,994,840.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	601,895.		
b	Other (Describe in Part XIII.)	4b	-1,181,866.		
с	Add lines 4a and 4b			4c	-579,971.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)			5	58,414,869.
Par	t XII Reconciliation of Expenses per Audited Financial State	ments With	Expenses per F	Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total expenses and losses per audited financial statements			1	59,241,617.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	1,875,034.		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	1,181,866.		
е	Add lines 2a through 2d			2e	3,056,900.
3	Subtract line 2e from line 1			3	56,184,717.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	601,895.		
b	Other (Describe in Part XIII.)	4b	83,907.		
с	Add lines 4a and 4b			4c	685,802.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	56,870,519.
Par	t 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 net assets without donor

restrictions in the year in which the items are acquired or as decreases

in net assets with donor restrictions if the assets used to purchase the

items were restricted by donors.

The Museum's collections are made up of artifacts of historical

significance, scientific specimens and art objects that are held for

educational, research, scientific and curatorial purposes. Each of the

Industry Schedule D (Form 990) 2023 Page 5 Part XIII Supplemental Information (continued) items is cataloged, preserved and cared for, and activities verifying the items' existence and assessing their condition are performed continuously. The collections are subject to the Museum's policy that requires proceeds from their sales to be used for direct care of existing artifacts or acquire other items for collections. Part III, line 4: The Museum's collection - with almost 40,000 objects that showcase advances in science, industry and technology - serves to create spectacular exhibits and experiences that excite and inspire Museum guests and further the Museum's mission and vision. Remarkable artifacts in the collection include the 700-ton U-505 submarine; a real United 727 airplane; the Pioneer Zephyr, the train that set the speed record in 1934; a British Spitfire WWII plane; a collection of carefully preserved human anatomical slices and fetuses; and much more. The Museum's collections are designed to spark scientific inquiry and creativity to motivate children to achieve their full potential in science, technology, medicine and engineering in furtherance of the Museum's exempt purpose. Part V, line 4: The organization's endowment funds are meant to serve as a source of

financial support of the Museum's mission. A portion of annual endowment

earnings are used to support museum general operations. Earnings are

directed to specific elements of the Museum's operations as directed by

donor restrictions on respective contributions to the endowment.

Part X, Line 2:

The Financial Accounting Standards Board (FASB) issued guidance requiring

Kenneth C. Griffin Museum of Science	and		
Schedule D (Form 990) 2023 Industry		36-2167797	Page 5
Part XIII Supplemental Information (continued)			
tax effects from uncertain tax positions to be recognized in the f	inancial		
statements only if the position is more likely than not to be sust	ained		
should the position be challenged by a taxing authority. Managemen	it		<u> </u>
believes that there are no material uncertain positions that requi	re		
recognition in the financial statements. There are no tax position	is for		
which a material change in any unrecognized tax benefit or liabili	tv is		
reasonably possible in the next 12 months.			
The Museum has federal net operating loss carryforwards available	to		
	-		
offset future unrelated business taxable income. The net operating	loss		
carryforwards expire through 2043 and total approximately \$2,035,0	00 and		
\$2,397,000 at December 31, 2023 and 2022, respectively. As of Dece	ember 31,		
2023 and 2022 management has determined the likelihood of realizi	ng the		
2023 and 2022, management has determined the likelihood of realizi	ing the		
benefit from a future utilization of the net operating loss carryf	orwards		
is uncentrin Therefore a 100% valuation allowance has been appli	ad +a		
is uncertain. Therefore, a 100% valuation allowance has been appli	lea to		
the deferred tax assets associated with the net operating loss			
carryforwards of approximately \$620,000 and \$647,000 at December 3	31, 2023		
and 2022, respectively.			
<u></u>			
The Museum files Form 990 in the U.S. federal jurisdiction and the	State		
The Museum Tites form 550 in the 0.3. Tederal Julisatetion and the	state		
of Illinois.			
Part XI, Line 2d - Other Adjustments:			
Change in Value of Life Insurance Policy	18,294.		
Gain (Loss) on Film Consortium Investment	22,179.		
	,		
Change in Value of Asset Retirement Obligation	-28,765.		
Change in Value of Interest Pate Gwan	-442,545.		
Change in Value of Interest Rate Swap			
Bad Debt Expense	-83,907.		

	Kenneth C.	Griffin M	luseum of	Science a	and					
Schedule D (Form 990) 2023 Part XIII Supplemental Inform	Industry					36-2167797	Page 5			
	nation (cont	inued)				 				
Total to Schedule D, Part XI,	Line 2d			-	514,744.					
Dent VI Line Ab Other Min										
Part XI, Line 4b - Other Adju	istments:					 				
Rental Expenses				_	356,266.					
Cost of Goods Sold				-	110,328.					
Fundraising Expenses				-	708,272.					
Gaming Expenses					-7,000.					
Total to Schedule D, Part XI,	Line 4b			-1,	181,866.					
Part XII, Line 2d - Other Adj	ustmonts.									
	usements:									
Rental Expenses					356,266.					
Cost of Goods Sold					110,328.					
Fundraising Expenses					708,272.					
Gaming Expenses					7,000.					
Total to Schedule D, Part XII	, Line 2d			1,	181,866.					
Part XII, Line 4b - Other Adj	ustments:									
Bad Debt Expense					83,907.					
					85,907.					

SCHEDULE G	Suppleme	ntal Information Regarding	Func	Iraisi	ing or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				or 19, or if the	2023
Department of the Treasury		Attach to Form 990	or Forr	n 990	-EZ.		Open to Public
Internal Revenue Service		o www.irs.gov/Form990 for instru		and the	he latest informatio		Inspection
Name of the organizatio		Griffin Museum of Science	and				r identification number
	Industry					36-21	
	complete this par	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, ∣	line 17. Form 99	0-EZ filers are not
· · · ·	· · ·	ed funds through any of the followir	na activ	ities (Check all that apply		
a X Mail solicita	•		•		overnment grants		
b X Internet and	email solicitations			-	nment grants		
c X Phone solic	itations	g X Special		-	-		
d X In-person so	olicitations						
2 a Did the organization	on have a written o	or oral agreement with any individual	(incluc	ling of	ficers, directors, trus		
		art VII) or entity in connection with p			•		Yes No
,	0	viduals or entities (fundraisers) pursu	ant to	agreer	ments under which t	he fundraiser is	to be
compensated at le	east \$5,000 by the	organization.	_			-	
(i) Nome and address	o of individual		(iii)	Did raiser		(v) Amount p	
(i) Name and addres or entity (fund		(ii) Activity	have c	ustody trol of	(iv) Gross receipts from activity	to (or retained fundraiser	by to (or retained by)
or only (undraidely				utions?		listed in col.	(i) organization
Alexander Ross Group LTD -		Strategic and tactical	Yes	No	-		
2406 Prairie Avenu	le,	fundraising counsel		X	0.	102,0	000. 0.
				<u> </u>			
				<u> </u>			
				<u> </u>			
				<u> </u>			
				<u> </u>			
Total	. <u></u>					102,0	100.
3 List all states in wh	ich the organizatio	n is registered or licensed to solicit	contrib	utions	or has been notified	l it is exempt fro	m registration
or licensing.							
CA, FL, IL, MI, NY, PA,	UT WI MN OH V	A					

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

Industry Schedule G (Form 990) 2023 36-2167797 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events Black Creativity None (add col. (a) through Gala Columbian Ball col. (c)) (event type) (event type) (total number) evenue 1,248,500. 595,787. 1,844,287. 1 Gross receipts

ΨI				
Å				
	2 Less: Contributions	523,787.	1,200,000.	1,723,787.
	3 Gross income (line 1 minus line 2)	72,000.	48,500.	120,500.
	4 Cash prizes			
Direct Expenses	5 Noncash prizes	7,000.	10,250.	17,250.
	6 Rent/facility costs			
rect Ex	7 Food and beverages	139,312.	112,445.	251,757.
ā	8 Entertainment	23,990.	91,567.	115,557.
	9 Other direct expenses	176,332.	147,376.	323,708.
	10 Direct expense summary. Add lines 4 through	708,272.		
	11 Net income summary. Subtract line 10 from lin	-587,772.		

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than

\$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1 Gross revenue				
S	2 Cash prizes				
bense	3 Noncash prizes				
Direct Expenses	4 Rent/facility costs				
Ō	5 Other direct expenses				
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── 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 condu				
	Is the organization licensed to conduct gaming ac If "No," explain:	tivities in each of these s	states?		Yes No
	Were any of the organization's gaming licenses re		• •	/ear?	Yes No
U	If "Yes," explain:				

Schedule G (Form 990) 2023

Kenneth C. Griffin Museum of Scienc	e and
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Sch	edule G (Form 990) 2023	Industry		36-23	1677	97	Pa	ge 3
		aming activities with no	onmembers?			Yes		No
			trust, or a member of a partnership or other entity for					
	to administer charitable gaming?					Yes		No
13	Indicate the percentage of gaming							
a	The organization's facility				13a			%
k	An outside facility				13b			%
14	Enter the name and address of th	e person who prepares	s the organization's gaming/special events books and	l records:				
	Name							
	Address							
	Address							
15:	Does the organization have a con	tract with a third party	from whom the organization receives gaming revenu	e?		Yes		No
100	Does the organization have a con	and party	from whom the organization receives gaming revend		. —			
k	If "Yes," enter the amount of gam	ina revenue received b	by the organization \$ and	the amount				
	of gaming revenue retained by the							
c	If "Yes," enter name and address							
-								
	Name							
	Address							
16	Gaming manager information:							
	Name							
	Gaming manager compensation	\$						
	Description of services provided							
	Director/officer	Employee	Independent contractor					
17	Mandatory distributions:							
	•	r state law to make cha	aritable distributions from the gaming proceeds to					
	retain the state gaming license?				\square	Yes		No
ł			aw to be distributed to other exempt organizations or					
	organization's own exempt activit	-	· · ·	op on o m m m o				
Pa			explanations required by Part I, line 2b, columns (iii)	and (v); and Par	t III, lir	nes 9,	9b, 10)b,
			de any additional information. See instructions.					
Sch	edule G, Part I, Line 2b,	List of Ten High	est Paid Fundraisers:					
(i)	Name of Fundraiser: Alexa	ander Ross Group	LTD					
(i)	Address of Fundraiser: 24	406 Prairie Avenu	ne, Evanston, IL 60201					

		Kenneth C. Griffin Museum of Science and		
Schedule G (For	m 990)	Industry	36-2167797	Page 4
Part IV Su	pplemental Info	Industry Drmation (continued)		
		(oontinued)		

SC	HEDULE J Compensation Information					1545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employ			20	22)
		Compensated Employees	000 Dent IV line 00		20	Ľ٦)
Depa	tment of the Treasury	Complete if the organization answered "Yes" on Form 9 Attach to Form 990.	990, Part IV, line 23.		Open to		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the I	atest information.		Inspe		
Nam	e of the organization	Kenneth C. Griffin Museum of Science and		Employer id	entificatio	on nui	mber
		Industry		36-21	67797		
Ра	rt I Question	Regarding Compensation					
						Yes	No
1a		ate box(es) if the organization provided any of the following to or for a	•	990,			
		line 1a. Complete Part III to provide any relevant information regarding					
	First-class or c		or residence for persor				
	Travel for companions Payments for business use of personal resid						
			b dues or initiation fees				
	Discretionary s	pending account Personal services (s	such as maid, chauffeu	r, chet)			
	16						
b	•	on line 1a are checked, did the organization follow a written policy rega	• • •				
~	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain				. 1 b		<u> </u>
2	0	require substantiation prior to reimbursing or allowing expenses incur	,				
	trustees, and office	s, including the CEO/Executive Director, regarding the items checked	on line 1a?		. 2		
2	Indianta which if ar	v of the following the experimation used to establish the comparentia	n of the exercite tion is				
3	,	y, of the following the organization used to establish the compensatio	0				
		ctor. Check all that apply. Do not check any boxes for methods used I	Jy a related organizatio				
	·	tion of the CEO/Executive Director, but explain in Part III.	tooptroot				
				ommittoo			
		her organizations	ard or compensation co	ommittee			
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respe	ect to the filing				
-	organization or a re						
а	•				4a	х	
b						Х	<u> </u>
c	•						x
•	-	es 4a-c, list the persons and provide the applicable amounts for each					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-5	9.				
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or ac		n			
	contingent on the re						
а	•				5a		x
	Any related organiz						X
	, ,	r 5b, describe in Part III.					
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or ac	crue any compensatio	n			
	contingent on the n	et earnings of:					
а	The organization?				6a		x
	Any related organiz						X
	If "Yes" on line 6a c	r 6b, describe in Part III.					
7	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization provide a	ny nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III			. 7		x
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract					
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," descr	ibe in Part III		. 8		x
9	If "Yes" on line 8, d	d the organization also follow the rebuttable presumption procedure d					
	Regulations section			<u></u>	9		
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.			le J (Forn	n 990)) 2023

Industry

36-2167797

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) A. Chevy Humphrey	(i)	591,615.	172,500.	1,876.	75,000.	32,647.	873,638.	0.
President & CEO/Trustee	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) David Woody	(i)	296,303.	25,000.	1,876.	10,290.	14,634.	348,103.	0.
VP - Exhibitions, Collections, CCO	(ii)	0.	0.	0.	0.	Ο.	0.	0.
(3) Jonathan Assell	(i)	253,404.	45,000.	0.	8,870.	35,325.	342,599.	0.
VP - Chief Financial Officer	(ii)	0.	0.	0.	0.	Ο.	0.	0.
(4) Syeda Soofia	(i)	235,869.	17,500.	897.	8,414.	38,408.	301,088.	0.
VP - Chief of People and Culture	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Sheila M. Cawley	(i)	232,240.	0.	1,181.	8,309.	30,376.	272,106.	0.
SVP - Chief Rev Strategy (until 8/23	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Hsinghua Chen	(i)	217,150.	20,000.	0.	7,707.	3,503.	248,360.	0.
VP - Chief Administrative Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Robert Dipasquantonio	(i)	180,169.	10,000.	1,177.	6,475.	21,816.	219,637.	0.
AVP - Information Technology	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) Anne Rashford	(i)	175,100.	20,382.	3,429.	6,104.	13,998.	219,013.	0.
VP - Govt Affairs/Chief Bus Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) Jessica Chavez	(i)	160,393.	20,000.	230.	4,327.	27,208.	212,158.	0.
Ruth D. & Ken M. Davee VP, Education	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) Curt Gruber	(i)	176,076.	7,500.	12,316.	6,552.	391.	202,835.	0.
AVP - Marketing & Sales (until 3/24)	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) Patricia Ward	(i)	166,370.	15,000.	0.	5,677.	12,390.	199,437.	0.
AVP - Exhibitions & Partnerships	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Page 2

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Page 3

Part III Supplemental Information

Schedule J (Form 990) 2023

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, Lines 4a-b:

Severance payments during 2023 include: Curt Gruber - \$11,124 and Bradley

Industry

Schiever - \$29,423. These payments are reported as taxable compensation on

Part II, column (B)(iii).

Eligible executives participate in non-qualified deferred compensation

plans organized under code Section 457(f). Contributions to the 457(f) plan

during 2023 include:

A. Chevy Humphrey - \$65,452

Schedule J (Form 990) 2023

(Form Departm	EDULE K 9990) nent of the Treasury Revenue Service	Complete if the orga	nization answered explanations, and	formation on Ta I "Yes" on Form 990 d any additional info gov/Form990 for ins), Part IV, li rmation in	ne 24a. F Part VI.	Provide descript				C	DMB No. 2(Dpen t nspec)23 o Pub	
Name	of the organization Kennet Indust	ch C. Griffin Museum of S Cry	cience and							-	identif L6779		n num	ber
Part	I Bond Issues													
	(a) Issuer name	(a) Issuer name (b) Issuer EIN (c) CUSIP # ((d) Date issued	(d) Date issued (e) Issue price		(f) Descripti	on of purpose	(g) De	efeased	(h) On of is	behalf suer	(i) Pooled financing	
									Yes	No	Yes	No	Yes	No
A II	FA Series 2017A-B	86-1091967	NoneAvail	05/30/17	60,0	00,000.	Series 2009 Bond 000.Redemption			x		x		x
В														
с														
D														
Part	II Proceeds													
				Α			В	С	2			D		
_1	Amount of bonds retired			30,0	000,000.									
2	Amount of bonds legally defease	ed												
3	Total proceeds of issue			60,0	000,000.									
		3												
5	Capitalized interest from proceed	ds												
6	Proceeds in refunding escrows			/	500,000.									
7	Issuance costs from proceeds			"	400,000.									
8	Credit enhancement from proce	eds												
9	Working capital expenditures fro	om proceeds												
	Capital expenditures from proce	eds												
-														
-														
13	Year of substantial completion													
				Yes	No	Yes	No	Yes	No		Yes	+	No	
	•	of a refunding issue of tax-exempt refunding issue)?		х										
		of a refunding issue of taxable bor												
	issued prior to 2018, an advance	e refunding issue)?			х									
16	Has the final allocation of procee	eds been made?		х										
				X										

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

Schedule K (Form 990) 2023

Kenneth C. Griffin Museum of Science and

Schedule K (Form 990) 2023 Industry			36-2	167797				Page
Part III Private Business Use								
		A		B		ç	<u> </u>)
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X						<u> </u>
2 Are there any lease arrangements that may result in private business use of								I
bond-financed property?		х						
3a Are there any management or service contracts that may result in private								I
business use of bond-financed property?		Х						1
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?		х						I
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?								I
 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		%		%		%		9
 5 Enter the percentage of financed property used in a private business use as a 		,,,		/0		/0		,
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		ç
6 Total of lines 4 and 5		%		%		%		 9
 7 Does the bond issue meet the private security or payment test? 		70 X		70		70		>
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
		x						I
governmental person other than a 501(c)(3) organization since the bonds were issued?		~		1				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or		0/						
disposed of		%		%		%		ç
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								I
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all								I
nonqualified bonds of the issue are remediated in accordance with the								I
requirements under Regulations sections 1.141-12 and 1.145-2?	Х							
Part IV Arbitrage		_						
		A		B				-
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		X		1				
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						L
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?	х							<u> </u>

Kenneth C. Griffin Museum of Science and

Schedule K (Form 990) 2023 Industry			36-2	167797				Page 3
Part IV Arbitrage (continued)								
	l A	4		В		С	ſ)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
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?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		х						
Part V Procedures To Undertake Corrective Action				•				
	4	4		В		С	Г)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	x							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	uctions.			·	,	
Part IV, Line 2c:								
Bond Counsel performed the rebate calculation for the period December								
17, 2009 through December 17, 2014.								
								·

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2023

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization	N Kenneth	с.	Griffin	Museum	of	Science	and	

Employer identification number

	Industry				3	5-216779'	7	
Pa	rt 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	Method o noncash con	(d) of determini tribution an		s
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	12,777	756,646.	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 \ldots							
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 ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0	
							Yes	No
30a	During the year, did the organization receive b			· · ·				
	must hold for at least 3 years from the date of		ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period	?				<u>30a</u>		X
	If "Yes," describe the arrangement in Part II.	li t	an inca the survey	f and a state day of a set 9	tion of		v	
31	Does the organization have a gift acceptance					31	x	
32a	Does the organization hire or use third parties contributions?		-	cit, process, or sell noncash		. 32a		x
b	If "Yes," describe in Part II.							
22	If the exception didn't report on emount in a	aluma (a) fa	a turna of property	for which column (c) is cho	مارمما			

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2023

Conception M form 200 (2022 Industry 36 40 information required by Part Lines 30, 304, and 30, and whether the organization is reporting in Fart Loxamn (b), the number of contributions, the number of lines received, or a contribution of both. Also complete the part of any additional information. Schedule M, Pert I, Column (b): Column (b) represents the number of items contributed, Per line 9, column (b) represents the number of denations contributed,			Kenneth C. Grift	fin Museum of Sc	ience and			
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): Column (b) represents the number of items contributed.	Schedule N	<u>И (Form 990) 202</u> 3						Page 2
Column (b) represents the number of items contributed.	Part II	Supplementa is reporting in Par	rt I, column (b), the num	vide the information render of contributions,	equired by Part I, lines 30t the number of items recei	o, 32b, and 33, an ved, or a combina	d whether the organi tion of both. Also co	zation
Column (b) represents the number of items contributed.								
	Schedule	M, Part I, Col	umn (b):					
For line 9, column (b) represents the number of donations contributed.	Column (b) represents t	the number of iter	ms contributed.				
	For line	9, column (b)	represents the n	umber of donatio	ns contributed.			

SCHEDULE O	Supplemental Information to Form 990 or 990-	-EZ ⊦	OMB No. 1545-0047
(Form 990)	Complete to provide information for responses to specific questions on		2023
Department of the Treasury	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.	-	Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information. Kenneth C. Griffin Museum of Science and	Employer	Inspection
Name of the organizatior	Industry	Employer 1 36-21	dentification number 67797
	·		
Form 990, Part I,	Line 1, Description of Organization Mission:		
everyone, and its	vision is rooted in the Museum's historic rotunda		
engraving: Science	discerns the laws of nature, industry applies them		
to the needs of hu	mankind.		
_			
Form 990, Part III	, Line 1, Description of Organization Mission:		
Museum's mission i	s to inspire the inventive genius in everyone, and		
its vision is root	ed in the Museum's historic rotunda engraving:		
Science discerns t	he laws of nature, industry applies them to the needs		
of humankind. The	Museum welcomes over 1.4 million guests annually and		
is the top Chicago	museum field trip destination for students. Through		
its education prog	rams, the Museum engages over half a million		
participants annua	lly in science education programs.		
Form 990, Part III	, Line 4a, Program Service Accomplishments:		
domed wrap-around :	movie screen.		
Form 990, Part III	, Line 4d, Other Program Services:		
Retail and support	ing services represent various program offerings that		
enhance the guest	experience. These include the musuem store, food		
services, and park	ing services.		
Expenses \$ 1,893,6	92. including grants of \$ 0. Revenue \$ 1,849,513.		
Form 990, Part VI,	Section A, line 2:		
Jason Pritzker and	Cindy Pritzker have a family relationship.		

Schedule O (Form 990) 202	23	Page 2
Name of the organization	Kenneth C. Griffin Museum of Science and Industry	Employer identification number 36-2167797
John A. Canning, Jr.	and John F. Podjasek III have a family relationship.	
Barry L. MacLean and	Duncan A. L. MacLean have a family relationship.	
Lester Crown and Mic	hael A. Reinsdorf have a business relationship outside	
of the Museum.		
William M. Goodyear	and David A. Fisher serve on a board outside of the	
Museum.		
Eric P. Lefkofsky an	d Michael A. Reinsdorf serve on a board outside of the	
Museum.		
Edward M. Liddy and Museum.	William A. Osborn serve on a board outside of the	
Richard H. Lenny and	Sheila A. Penrose serve on a board outside of the	
Museum.		
Barry L. Maclean, Du	ncan A. L. Maclean, and Smita N. Shah have a business	
relationship outside	of the Museum.	
Barry L. Maclean and	Duncan A. L. Maclean serve on a board outside of the	
Museum.		
E. Scott Santi and D	G Macpherson serve on a board outside of the Museum.	

Ralph Wanger and Leonard Wanger have a family relationship.

Name of the organization Kenneth C. Griffin Museum of Science and Industry	Employer identification number 36-2167797
Form 990, Part VI, Section A, line 4:	
The organization filed Amended Articles of Incorporation and changed its	
name to Kenneth C. Griffin Museum of Science and Industry.	
Form 990, Part VI, Section B, line 11b:	
The Museum's Form 990 is prepared by an external public accounting firm who	
provides drafts for internal review. After the internal review, these	
drafts are updated, and a final draft is reviewed by the Chairperson of the	
Audit Committee and is made available to the Trustees electronically for	
their review, prior to electronically filing with the Internal Revenue	
Service.	
Form 990, Part VI, Section B, Line 12c:	
The Museum formally sends a conflict of interest questionnaire annually to	
trustees, officers and employees. The Museum's compliance officer reviews	
the results of the questionnaires and investigates any reported potential	
conflicts for resolution as necessary.	
From time to time, the Museum conducts business with publicly traded	
companies at which certain Museum board members have an employment or board	
relationship. Business with these companies is entered into at arms-length	
and through the Museum's standard procurement process without influence	
from the interested board member(s). Any conflicts are resolved when	
interested board members excuse themselves when voting on matters related	
to the public company in which they serve.	

Form 990, Part VI, Section B, Line 15:

Schedule O (Form 990) 202	3 Kenneth C. Griffin Museum	of Science and	Page 2
Name of the organization	Industry	or berenet and	36-2167797
			·
The Compensation Com	nittee of the Board of Dire	ectors oversees and approves	
the compensation for	the CEO. All members of t	he Compensation Committee are	
independent. The pro-	ress consists of.		
independente, inc pro-			
1. The Compensation	Committee meets annually to	o review and make decisions	
on CEO compensation.			
2. Individual perform	nance is evaluated against	goals and objectives that	
support the Museum's	mission and strategic prid	orities.	
3. From time to time	, HR prepares a compensation	on benchmark analysis	
consisting of peer is	nstitutions to ensure exect	utive compensation remains	
competitive within is	ndustry and reasonable.		
4. Each year, the Mu	seum's leadership team det	ermines if merit increases	
will be awarded to M	iseum staff. The Chief of I	People and Culture	
	isedin starr, me chief or		
facilitates and driv	es this process to ensure of	consistency and fairness	
across the Museum.			
5 The process is co	ntemporaneously documented		
		·	
Form 990, Part VI, S	ection C, Line 18:		
The Museum posted a	copy of its Form 990 on it:	s website and made copies of	
Form 990 and 990 m	bligly available upon reg	uest. As the Museum filed the	
application for reco	nition of exemption, Form	1023 before July 15, 1987,	
it need not be made ;	publicly available.		
Form 990, Part VI, S	ection C, Line 19:		
The Museum's annual :	report and the financial s	tatements are made available	
to the public via th	e Museum's website and upor	n 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

Schedule O (Form 990) 2023 Name of the organization Kenneth C. Griffin Museum of Science ar Industry	nd	Page 2 Employer identification number 36-2167797
section 6104(d).		
Form 990, Part IX, Line 11g, Other Fees:		
Consultants:		
Program service expenses	1,600,949.	
Management and general expenses	494,199.	
Fundraising expenses	124,004.	
Total expenses	2,219,152.	
Security Services:		
Program service expenses	2,198,143.	
Management and general expenses	7,575.	
Fundraising expenses	254.	
Total expenses	2,205,972.	
Janitorial Services:		
Program service expenses	1,757,055.	
Management and general expenses	0.	
Fundraising expenses	0.	
Total expenses	1,757,055.	
All Other Professional Fees:		
Program service expenses	944,596.	
Management and general expenses	30,514.	
Fundraising expenses	1,656.	
Total expenses	976,766.	
Total Other Fees on Form 990, Part IX, line 11g, Col A	7,158,945.	

Schedule O (Form 990) 2023 Name of the organization Kenneth C. Griffin Museum of Science Industry	and	Page Employer identification number 36-2167797
Form 990, Part XI, line 9, Changes in Net Assets:		
orm 550, full at, time 5, changed in Act Abberb.		
Change in Value of Life Insurance Policy	18,294.	
Gain (Loss) on Film Consortium Investment	22,179.	
Change in Value of Asset Retirement Obligation	-28,765.	
Change in Value of Interest Rate Swap	-442,545.	
Fotal to Form 990, Part XI, Line 9	-430,837.	