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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	or the	2009 ca	lendar yea	r, or tax year beginning 01	-01-2009 and ending 12-31-200	9	1 D.F	: J
B Ch	eck ıf a	pplicable	Please	C Name of organization SHEDD AQUARIUM SOCIETY			D Employer i	identification number
☐ Ad	dress ch	nange	use IRS label or	•			36-21679	
┌ Na	me cha	inge	print or	Doing Business As			E Telephone	number
┌ Inı	tıal retu	ırn	type. See Specific	Number and street (or P.O. be	ox if mail is not delivered to street addre	ess) Room/suite	(312)692	2-3114
Гте	mınate	ed	Instruc- tions.	1200 SOUTH LAKE SHORE DR		,ssy (Koom, suite	G Gross receip	ots \$ 173,023,539
	nended			City or town, state or country	and 7IP + 4		4	
		n pending		CHICAGO, IL 60605	, and Ext. 1			
i Ab	plication	r penuning					J	
				ne and address of principal BEATTIE	officer		iis a group reti ates?	urn for
			1200 5	SOUTH LAKE SHORE DRIV	<i>/</i> E	aiiiii	ates) 165 J* NO
			CHICA	GO,IL 60605		H(b) Are a	ll affiliates inclu	uded?
					.va. 5 507	1		st (see instructions)
I 18	ах-ехеп	npt status	501(c)) (3) ◀ (insert no)	a)(1) or 52/	H(c) Gro	up exemption i	number 🟲
J W	ebsit e	e: 🕨 WW	W SHEDDI	NET ORG				
K For	m of or	ganızatıon	✓ Corporat	tion Trust Association O	ther 🟲	L Year of fo	ormation 1924	M State of legal domicile
	rt I	Sumr						,
	1			e organization's mission or				
					TES A PUBLIC AQUARIUM TO I			
œ.			RVATION	DESIS IHROUGH EXHIBI	TS AND EDUCATION PROGRA	M2 MIIH IHE	E GOAL OF PR	ROMOTING AQUATIC
Governance								
Ě								
950								
	2		'		tinued its operations or disposed			et assets
20 (/)	3		=		ody (Part VI, line 1a)			3
Activities &	4	Number	ofindepen	ident voting members of the	e governing body (Part VI, line 1	b)	•	4
흤	5	Total nu	ımber of en	nployees (Part V , line 2a)				5
đ	6			olunteers (estimate if neces				6
					Part VIII, column (C), line 12			7a 121,:
	b	Net unre	elated busi	ness taxable income from	Form 990-T, line 34			7b 43,6
						Pric	or Year	Current Year
a.	8	Contril	butions and	d grants (Part VIII, line 1h)		31,127,937	19,152,7
Ä	9	Progra	m service	revenue (Part VIII, line 2g)		25,167,292	26,700,3
Rayenue	10	Invest	ment incor	ne (Part VIII, column (A),	lines 3, 4, and 7d)		3,823,036	-9,424,5
	11		-		5, 6d, 8c, 9c, 10c, and 11e)		2,512,210	1,435,8
	12				t equal Part VIII, column (A), lın	е	62,630,475	37,864,40
	13				olumn (A), lines 1-3)		81,000	
	14				lumn (A), line 4)		02,000	00,0
	15				nefits (Part IX, column (A), lines	5-		
8		10)	.5, 011101 00	ompensation, employee ber	ienes (r are 1x, coraini (xy, iiies		19,593,270	21,462,3
Expenses	16a	Profes	sıonal fund	raising fees (Part IX, colur	nn (A), line 11e)			
훙	ь	Total fui	ndraising exp	enses (Part IX, column (D), line	₂₅₎ μ 2,656,252			
ш	17				11a-11d, 11f-24f)		25,741,416	28,455,08
	18	Totale	expenses /	Add lines 13–17 (must equ	ual Part IX, column (A), line 25)		45,415,686	
	19	Reveni	ue less exp	penses Subtract line 18 fro	om line 12		17,214,789	
ኤ ው ው						Beginnin	g of Current	Food of Vocas
Not Assets or Fund Balances						_	Year	End of Year
15.5 19.5 19.5 19.5 19.5 19.5 19.5 19.5	20	Totala	assets (Par	rt X, line 16)			297,412,742	
골품	21	Totall	ıabılıtıes (F	Part X, line 26)			50,058,242	66,302,3
	22	Netas	sets or fun	d balances Subtract line 2	1 from line 20		247,354,500	269,139,3
Pa	rt II	Sign	ature Blo	ock				
					nned this return, including accompanying n of preparer (other than officer) is base			
			er, it is true,	correct, and complete Declaratio	n of preparer (other than officer) is base	d on an imonna	don or which piep	parer rias arry knowledge
Sigi	n	****	**			2010	-05-13	
Her	e	Signa	ature of office	er		Date		
) JOYC	E M SIMON S	SECRETARY/TREASURER AND CF	0			
			or print nam					
		Preparer'	's L			Check If		ntıfyıng number
Paid		signature		N TRAPP		self- empolyed 🕨 🦵	(see instructio	ons)
	arer's	Firm's na	me (or your	s L BLACKMAN KALLICK LLP				
Use		ıf self-en	nployed), and ZIP + 4	<u> </u>	FLOOR		EIN Þ	
	•	audress,	anu ZIP + 4	10 S RIVERSIDE PLAZA 9TH	FLOOK		Phone no	(312) 207-1040
		<u> </u>		CHICAGO, IL 60606				
Мау	the IR	S discus	s this retu	rn with the preparer shown	above? (see instructions)			▼ Yes

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

At Shedd Aquarium, animals connect individuals to the living world through exhibits and education programs, inspiring them to make a difference by taking conservation action both globally and locally

4e	Total program service e	kpenses► \$ 36,58	0,408		
40	(Expenses \$	(Describe in Schedule O) including gra) (Revenue \$)
	Other program services	(Describe in Schedule O)			
	and photos as well as self-gu throughout the year, the Aqu school groups Programs inco lower level of the Aquarium, expand curricula and support grade levels and identifies co	ided activities, live interpretations arium offers innovative aquatic so rporate distance learning, museur has two class-rooms, two laborat state science education goals as	i, guided tours and activity cent lience and conservation-related in theater, mentoring and hands ories and an electronic/distance well as develop innovative, han in the Aquarium The Community	ers to allow guests to explore conc programs for children, adults, fami s-on/minds-on activities The Aqual learning room The Aquarium mair	tic Science Center, located on the ntains two advisory councils to help sory Council includes teachers of all
4c	(Code) (Expenses \$ 7,464	,194 including grants of \$	88,000) (Revenue \$	684,979)
T	Animal Husbandry The Aqua fishes and 198 species of inv of birds Altogether, the colle purposes In total, the aquat life-support system pipes W. Departments and our Life Su environmental quality specia	rium houses one of the largest are ertebrates. In addition there are of ctions include 1,800 fishes and invoice environments in the building column ater quality is maintained by state oport Operations Department are	d most diverse collections of liv ver 39 species of reptiles, 29 species of reptiles, 29 species from 77 protected spatial over 5 million gallons of well-of-the art computerized system involved in the care of our animal art animal hospital and laborate	e aquatic animals in the world Cui becies of amphibians, 10 species of becies About 1,700 of these anima ater and are supported by approxii ns Staff from our Animal Health D als Staff include veterinarians, tec ory as well as Aquarists and Manne	als are off-exhibit for breeding mately 100 miles of plumbing and ivision, Fishes and Marine Mammals chricians, biologists and
4b	(Code) (Expenses \$ 9,764	,259 including grants of \$) (Revenue \$)
4a	The Aquarium's exhibit philos are as diverse and compellin are designed with a layered audience feedback and how gain their input For each ext	ophy is to develop displays that he gas the natural world they repres nerarchy of information. We take the region fits into our overall the hibit, we create an advisory board programs and marketing. Approx	d on the National Register of Hi elp visitors enjoy the beauty ar ent Since varied audiences hav a multi-disciplinary approach to me We bring in content advisor of community representatives	exhibit development and evaluations as needed and periodically hold in	n about conservation Our exhibits ion and learning styles, our exhibits on Exhibit themes are based on workshops for larger staff groups to heir feedback, including thoughts on
45	(Code	\	955 including grants of ¢) (Payanya t	24 607 202 \
4	Describe the exempt pur Section 501(c)(3) and 5	oose achievements for each	section 4947(a)(1) trusts	e largest program services t are required to report the ar n service reported	
	If "Yes," describe these				, 105 , 110
3	_	e conducting, or make sign	-	onducts, any program	□Yes ☑No
	If "Yes," describe these i	iew services on Schedule O			
		0-EZ?	am services during the ye		┌ Yes ┌ No

Dart TV	Checkl	ist of E	Pennired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ 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.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No	ļ	ļ	•
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
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	Yes	
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) 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		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

year

orm	990 (2009)			Page
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
L				
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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		No
ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	6a		No
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	-		
а	file Form 8282?	7c		No
u	The rest, indicate the number of Forms 6262 med during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	711		
•	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	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			

1200 SOUTH LAKE SHORE DRIVE

CHICAGO, IL 60605 (312) 692-3114

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

Sa	ection A. Governing Body and Management			
	Ction A. Governing body and Hanagement		Yes	No
			103	110
1a	Enter the number of voting members of the governing body 1a 50			
b	Enter the number of voting members that are independent 1b 49			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was			
5	filed?	5	Yes	N -
5 6	Did the organization become aware during the year of a material diversion of the organization's assets?	6		No No
0 7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			NO
	governing body?	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal	<u> </u>		
Re	evenue Code.)		1	1
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by		163	
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15-	V	
	The organization's CEO, Executive Director, or top management official	15a 15b	Yes	
U	If "Yes" to line a or b, describe the process in Schedule O (See instructions)	130	res	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ь	taxable entity during the year?	16a		No
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure		I	<u> </u>
17	List the States with which a copy of this Form 990 is required to be filed FIL , MI , WI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			
	interest policy, and financial statements available to the public. See Additional Data Table			le.
20	State the name, physical address, and telephone number of the person who possesses the books and records of t JOYCE M SIMON	ne orga	nızatıor	n 🟲

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

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. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee										
(A) Name and Title	(B) Average hours	Posit t	(C non (hat a	chec)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
TED A BEATTIE TRUSTEE, PRES AND CEO	45 00	Х		х				554,549	0	232,460
Yasmın Bates-Brown TRUSTEE	1 00	Х						0	0	0
Ellen D Caya TRUSTEE	1 00	Х						0	0	0
Raymond M Chin TRUSTEE	1 00	Х						0	0	0
Elizabeth H Connelly TRUSTEE	1 00	Х						0	0	0
Eugene M Cummings TRUSTEE	1 00	Х						0	0	0
David W Devonshire TRUSTEE	1 00	Х						0	0	0
David L Epstein TRUSTEE	1 00	Х						0	0	0
Tyrone C Fahner TRUSTEE	1 00	Х						0	0	0
Sarah N Garvey TRUSTEE	1 00	Х						0	0	0
H John Gilbertson Jr TRUSTEE	1 00	Х						0	0	0
John J Greisch TRUSTEE	1 00	Х						0	0	0
Brett J Hart TRUSTEE	1 00	Х						0	0	0
Wallace L Head TRUSTEE	1 00	Х						0	0	0
Quentin G Heisler Jr TRUSTEE	1 00	Х						0	0	0
Daniel H Hennessy TRUSTEE	1 00	Х						0	0	0
Robert H Jordan TRUSTEE	1 00	Х						0	0	0

(A) Name and Title	(B) Average hours per		tion (that a		′)		<u> </u>	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Brian A Kenny TRUSTEE	1 00	Х						0	0		
Richard L Keyser TRUSTEE	1 00	Х						0	0		
Thomas N King TRUSTEE	1 00	Х						0	0		
Cary A Kochman TRUSTEE	1 00	Х						0	0		
David J Koo TRUSTEE	1 00	Х						0	0		
Anne E Krebs TRUSTEE	1 00	Х						0	0		
Donna LaPietra TRUSTEE	1 00	Х						0	0		
Bruce K Lee TRUSTEE	1 00	Х						0	0		
Bruce D Mau TRUSTEE	1 00	Х					T	0	0		
Cheryl M McKissack TRUSTEE	1 00	Х						0	0		
Andrew McNally V TRUSTEE	1 00	Х						0	0		
Harvey L Miller TRUSTEE	1 00	Х						0	0		
J Jay Miller	1 00	X						0	0		
TRUSTEE Wade D Miquelon	1 00	X						0	0		
Patrick J Mullen	1 00							0	0		
TRUSTEE Ellen L O'Connor	1 00	х						0	0		
TRUSTEE Jane B Perkins	1 00							0	0		
TRUSTEE Bruce J Piller	1 00	X						0	0		
TRUSTEE Ginevra Reed Ralph	1 00	×						0	0		
TRUSTEE Susan Regenstein	1 00	x						0	0		
TRUSTEE Marc E Rothman	1 00	x						0	0		
TRUSTEE Gregory H Sachs											
TRUSTEE John F Sandner	1 00	X						0	0		
TRUSTEE Nancy S Searle	1 00	X						0	0		
TRUSTEE Lloyd A Semple Jr	1 00	X						0	0		
TRÚSTEE Benjamin M Shapiro	1 00	X						0	0		
TRUSTEE Mary S Smith	1 00							0	0		
TRUSTEE Guy E Snyder	1 00	X						0	0		
TRUSTEE Tracy Souder	1 00	X						0	0		
TRUSTEE John P Tague	1 00	Х						0	0		
TRUSTEE Jane L Warner	1 00	X						0	0		
TRUSTEE Steven M Winter	1 00							0	0		
TRUSTEE Reeve Byron Waud	1 00	X						0	0		
TRUSTEE JOYCE M SIMON	1 00	Х						0	0		
SECRETARY,TREASURER,CFO CHRISTOPHER JABIN	45 00			X				284,198	0	23,38	
EXECUTIVE VICE PRESIDENT BRADLEY L POPOVICH SR	45 00				Х			214,591	0	29,61	
SENIOR VICE PRESIDENT	45 00				Х			201,788	0	12,39	
AMY RITTER COWEN EXECUTIVE VICE PRESIDENT KENNETH T RAMIREZ	45 00			_	Х		_	196,593	0	11,28	
EXECUTIVE VICE PRESIDENT	45 00				Х		_	184,114	0	16,16	
MICHAEL M DELFINI EXECUTIVE VICE PRESIDENT	45 00				Х		_	182,195	0	,	
CHERYL MELL VICE PRESIDENT	45 00				Х			150,849	0	15,17	
DEBRA KERR EXECUTIVE VICE PRESIDENT	45 00					х		200,311	0	21,06	
NANCY B ANSCHEL VICE PRESIDENT	45 00					х		144,316	0	17,93	
JENNIFER BARYL SENIOR DIRECTOR	45 00					х		134,990	0	13,72	
MATTHEW C BURDEN SENIOR DIRECTOR	45 00					х		130,680	0	23,92	
Bryan Schuetze Senior Director	45 00					х		128,502	0	23,69	

1b Total . Total number of individuals (including but not limited to those listed above) who received more than

\$100,000 in reportable compensation from the organization 19

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

2,707,676

Section B. Independent Contractors

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

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

(A) Name and business address	(B) Description of services	(C) Compensation
CHICAGO CREATIVE PARTNERSHIP 314 W SUPERIOR SUITE 500 CHICAGO, IL 60610	ADVERTISING	1,856,878
WILSON DOW INC 1006 S MICHIGAN AVE SUITE 800 CHICAGO, IL 60605	SHOW DEVELOPMENT	1,035,631
VALERIO DEWALT TRAIN 500 N DEARBORN 9TH FLOOR CHICAGO, IL 60610	ARCHITECTS	999,840
CATH ASSOCIATES INC 2401 MAIN STREET EVANSTON, IL 60202	PROJECT MANAGEMENT	606,018
KOBOTECH 8 S MICHIGAN AVE CHICAGO, IL 60603	AV SERVICES	483,642
3. Total number of independent contractors (including but not limited to these listed above	\ who recoved more than	

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

5

467,553

Νo

Form 99								Page 9
Part \	<u>/*****</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इध	1a	Federated cam	paigns 1a					
E E	ь	Membership du	es 1b	4,369,552				
s, g	С	Fundraising eve	ents 1c	299,720				
<u>#</u> _ह	d	Related organiz	rations 1d					
žĘ.	e	Government grants	s (contributions) 1e	5,558,479	ļ			
atío er.∜	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	8,924,989				
돌 돌	g	Noncash contri	butions included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ _	s 1a-1f	▶	19,152,740			
	"	Totali A da ililos		Business Code				
Program Serwce Revenue	2a	ADMISSIONS		900,099	24,697,202	24,697,202		
9. 26.	ь	FOOD SERVICE		722,210	890,053			890,053
ф. П	c	EDUCATIONAL PRO	OGRAMS	900,099	684,979	684,979		
e.	d	BELUGA ENCOUNT	ERS	900,099	146,586	146,586		
ج ج	e	VALET		900,099	112,387			112,387
ē.	f	All other progra	am service revenue		169,119	121,183		47,936
ξ	g	Total. Add lines	s 2a – 2f		26,700,326			
	3	Investment inc	ome (including dividen	ds, interest				
			aramounts)	⊢	3,776,371			3,776,371
	4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties	(ı) Real					
	6a	Gross Rents	2,097,345	(11) Personal 3,634				
	ь	Less rental	417,084					
	c	expenses Rental income	1,680,261	3,634				
	d	or (loss) Net rental inco	l me or (loss)		1,683,895		3,634	1,680,261
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	121,009,721					
	b	Less cost or other basis and	134,210,605					
	c	sales expenses Gaın or (loss)	-13,200,884					
	d	Net gain or (los	s)		-13,200,884			-13,200,884
ane	8a	Ψ	luding ,793					
Other Revenue		of contributions See Part IV, lin	reported on line 1c) le 18 a	299,720				
ĭţ	Ь		penses b	531,445	-367,652			-367,652
O	c 9a		(loss) from fundraising	events F	-307,032			-307,032
	_	See Part IV, lin	ne 19 a					
	b c		penses b (loss) from gaming acti ^r	vities F				
		Gross sales of returns and allo	inventory, less owances .	vicies				
	b c	_	a oods sold b (loss) from sales of inve	entory				
		Miscellaneous		Business Code				
	11a	OTHER REVEN	IUE	900,099	119,609		117,500	2,109
	ь							
	С							
	d	All other reven						
	e	Total. Add lines	s 11a-11d		119,609			
	12	Total revenue.	See Instructions .	▶┆	37,864,405	25,649,950	121,134	-7,059,419

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

_	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
			ns (B), (C), and ((B)	(D). (C)	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	13,000	13,000						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	25,555	15/655						
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	75,000	75,000						
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	2,336,077	575,221	1,123,141	637,715				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				<u> </u>				
7	Other salaries and wages	14,726,378	11,094,688	2,766,573	865,117				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	732,839	462,740	215,354	54,745				
9	Other employee benefits	2,350,801	1,658,324	635,436	57,041				
10	Payroll taxes	1,316,253	831,080	386,836	98,337				
11	Fees for services (non-employees)								
а	Management	1,168,879	1,124,258	35,958	8,663				
b	Legal	63,682	44,502	19,180	· · · · · · · · · · · · · · · · · · ·				
С	Accounting	61,200	,	61,200					
d	Lobbying	97,535		97,535					
e	Professional fundraising See Part IV, line 17	,							
f	Investment management fees	394,506		394,506					
g	Other	124,709	77,790	35,651	11,268				
12	Advertising and promotion	1,925,967	,	1,925,967	<u>, </u>				
13	Office expenses	4,082,667	3,215,760	614,647	252,260				
14	Information technology	56,272		56,272					
15	Royalties	55,212		55,2					
16	Occupancy	1,933,112	1,826,199	88,894	18,019				
17	Travel	742,755	505,080	162,225	75,450				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	535,755						
19	Conferences, conventions, and meetings	32,983	21,570	10,372	1,041				
20	Interest	852,194	849,895	,	2,299				
21	Payments to affiliates	,	,						
22	Depreciation, depletion, and amortization	10,530,579	10,013,304	422,467	94,808				
23	Insurance	493,216	47,500	445,716					
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	OTHER CONTRACTUAL SERVI	3,209,695	2,053,949	781,626	374,120				
Ь	REPAIR AND MAINTENANCE	1,379,978	1,144,031	206,772	29,175				
С	OTHER EXPENSES	735,432	376,791	282,447	76,194				
d	FOOD SERVICE EXPENSE	559,737	559,737	·					
e	UNRELATED BUSINESS INCO	9,989	9,989						
f	All other expenses		-,-35						
25	Total functional expenses. Add lines 1 through 24f	50,005,435	36,580,408	10,768,775	2,656,252				
26	Joint costs. Check here ► ☐ If following SOP 98-2	30,003,733	30,300,400	10,700,773	2,030,232				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Pa	rt X	Balance Sheet					
					(A)		(B)
	Ι.				Beginning of year	_	End of year
	1	Cash—non-interest-bearing	0.000.07.4	1	0.511.011		
	2	Savings and temporary cash investments	•		8,833,074	2	6,514,044
	3	Pledges and grants receivable, net	•		14,556,881	3	14,139,822
	4	Accounts receivable, net			879,238	4	1,956,336
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	_
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			585,762	9	2,015,475
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	276,542,310			
	ь	Less accumulated depreciation	10b	105,613,194	142,395,441	10c	170,929,116
	11	Investments—publicly traded securities			72,630,340	11	89,802,913
	12	Investments—other securities See Part IV, line 11	55,859,932	12	48,409,600		
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	_
	15	Other assets See Part IV, line 11			1,672,074	15	1,674,345
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			297,412,742	16	335,441,651
	17	Accounts payable and accrued expenses .			13,302,890	17	4,627,794
	18	Grants payable				18	
	19	Deferred revenue			492,871	19	893,912
	20	Tax-exempt bond liabilities			32,599,766	20	31,425,332
68	21	Escrow or custodial account liability Complete Part IV of Schedu.	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	•				
<u> </u>		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	25,000,000
	25	Other liabilities Complete Part X of Schedule D			3,662,715	25	4,355,275
	26	Total liabilities. Add lines 17 through 25			50,058,242	26	66,302,313
		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e l	ines 27			
Fund Balances		through 29, and lines 33 and 34.					
미	27	Unrestricted net assets			220,932,319	27	214,250,760
8	28	Temporarily restricted net assets			15,106,343	28	43,416,393
2	29	Permanently restricted net assets			11,315,838	29	11,472,185
Ξ		Organizations that do not follow SFAS 117, check here ► □ and	ıd con	ıplet e			
10		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	ınds			32	
Net	33	Total net assets or fund balances			247,354,500		269,139,338
	34	Total liabilities and net assets/fund balances			297,412,742	34	335,441,651

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

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization SHEDD AQUARIUM SOCIETY

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

Public Charity Status and Public Support

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

Employer identification number

									36-216/9				
	rt I			olic Charity Stat						struction	ıs		
	rganız			foundation because					x)				
1	<u> </u>			on of churches, or as)(1)(A)(i).					
2	<u>_</u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	<u>_</u>	A hospit	al or a coop	perative hospital serv	vice organiza	ition descri	bed in sectio	n 170(b)(1)	(A)(iii).				
4	Γ			organization operate y, and state	ed in conjunc	tion with a	hospital desc	cribed in sec	tion 170(b)(1	.)(A)(iii).	.Enter	the	
5	Γ	_	•	rated for the benefit	-	or universit	ty owned or o	perated by a	governmenta	al unit des	cribe	d ın	
	_			(Complete Pa	*								
6	<u> </u>			ocal government or									
7	 ~	describe	ed in	t normally receives a \)(vi) (Complete Pa		part of its	support from	a governme	ntal unit or fro	om the ge	neral	public	:
8	Г			described in section)(vi) (Con	nplete Part II)					
9				t normally receives					outions, memb	ership fe	es, an	d gro	SS
	•			ties related to its ex									
		-		ss investment incom	-	-							
			_	anızatıon after June 3				· ·		,			
LO	Г	•		anızed and operated	•			•	•				
.1	<u></u>	_	_	anized and operated	•	•	•			carry out	t the n	urnos	ses of
	ŕ	one or m	nore publicly	supported organizations the type of supported by Type II	tions describ orting organiz	oed in secti zation and o	on 509(a)(1)	or section! s 11e throug	509(a)(2) Se gh 11h	e section		1)(3).	Chec
f g		section If the or check th Since Ai	509(a)(2) ganızatıon r nıs box	on managers and oth eceived a written de 006, has the organiz	termination f	rom the IR	S that it is a ⁻	Гуре I, Туре	e II or Type II				
				ectly or indirectly co	ntrols, eithe	r alone or t	ogether with p	persons des	cribed in (ii)			Yes	No
		and (III)	below, the g	overning body of the	the support	ed organiza	ation?			11	Lg(i)		
				r of a person describ							g(ii)		
			•	ed entity of a person	• •		bove?				g(iii)		
h				g information about t							3(/		l
(i) Name of supported organization		ne of (ii) (described on col (i) listed in your governing document?		Old you no organiza col (i) c	otify the tion in of your	(vi Is th organiza col (i) or in the l	ne tion in ganized		A mo	vii) ount o			
				(see instructions))	Yes	No	Yes	No	o Yes				
				"									
							1	1					
								1					
								+			$\overline{}$		
otal	1						1		+				

instructions

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if y	ou checked the	box on line 5, 7	7, or 8 of Part I	.)																							
	ection A. Public Support	_																										
Cale	e ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total																				
1	Gifts, grants, contributions, and membership fees received (Do no include any "unusual grants")	11,011,596	5 15,261,627	13,171,983	26,574,307	14	,699,777	80,719,290																				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	4,991,689	4,982,732	4,376,715	5,023,355	4	,452,963	23,827,454																				
3	The value of services or facilities furnished by a governmental unit to the organization without charge																											
4	Total. Add lines 1 through 3	16,003,285	20,244,359	17,548,698	31,597,662	19	,152,740	104,546,744																				
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							1,274,014																				
6	(f) Public Support. Subtract line 5 from line 4							103,272,730																				
Se	ection B. Total Support																											
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(f) Total
7	A mounts from line 4	16,003,285	6,581,988	17,548,698	31,597,662	19,152,740		19.152.740		19.152.740		19.152.740		19,152,740		19.152.740		19.152 740		19.152 740		19,152,740		104,546,744				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,742,216	6,581,988	7,506,777	7,152,503	5	877,350	31,860,834																				
9	Net income from unrelated business activities, whether or not the business is regularly carried on	22,732	21,281	32,578	39,730	121,134		121,134		121,134		121,134		121,134		237,455												
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	1,709,551	1,313,617	1,541,730	1,315,086		119,609	5,999,593																				
11	Total support (Add lines 7							142,644,626																				
12	through 10) L Gross receipts from related activit	ries, etc (See inst	ructions)			12	I	130,276,112																				
13	First Five Years If the Form 990 is	, ,	•	third fourth or f	ıfth tax vear as a		3) organiz																					
	check this box and stop here	ior the organizati	on o mor, occoma,	, emilia, roarem, or r	mem cax your as a	001(0)(0	, organiz	▶ [
Se	ection C. Computation of Pu	blic Support P	ercentage																									
14	Public Support Percentage for 200			11 column (f))		14		72 400 %																				
15	Public Support Percentage for 2008 Schedule A, Part II, line 14						72 720 %																					
	33 1/3% support test—2009. 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—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this																											
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization part IV how the organization me	.— 2009. If the orgation meets the "f	anızatıon dıd not o acts and cırcumst	check a box on lin cances" test, chec	ck this box and st	op here.	Explain	. -																				
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organization	nization meets the	e "facts and cırcu	mstances" test, o	heck this box an	d stop h e	ere.	►□ ►□																				

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

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493133045170

OMB No 1545-0047

identification number

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

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

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

Was a correction made?

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	ne of the organization DD AQUARIUM SOCIETY	Employer identification numb					
		36-2167918					
Part	I-A Complete if the organization is exempt under section 501(c) or is a	section 52	7 organi	zation.			
1	Provide a description of the organization's direct and indirect political campaign activities in Pai	rt IV					
2	Political expenditures	F	\$				
3	Volunteer hours						

Par	t I-B Complete if the organization is exempt under section 501(c)(3).			
1	Enter the amount of any excise tax incurred by the organization under section 4955	 - -	\$_	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	F	\$_	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			□Yes □No

3	If the organization incurred a section 4955 tax, d	lid it file Form 4720 for this year?

fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

b	If"Ye	s," describe in Part IV
Par	t T-C	Complete if the organization is exempt under section $501(c)$ except section $501(c)(c)$

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	F	\$
	Enter the amount of the filing arganization's finds contributed to other arganizations for contra E27		

_	Enter the amount of the ming organization's lands contributed to other organizations for section 527			
	exempt funtion activities	-	\$_	

- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

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

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

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18					
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000			00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

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

		(;	a)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		7,403
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		4,682
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV	Yes		97,535
j	Total lines 1c through 1i			109,620
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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		ļ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

Dues, assessments and similar amounts from members

Ident if ier	Return Reference	Explanat ion
Part II-B, Line 1i	Explanation of Other Lobbying Activities	PAYMENTS TO OUTSIDE CONSULTANT

DLN: 93493133045170

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2009

Cat No 52283D

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** SHEDD AQUARIUM SOCIETY 36-2167918 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

		(a) Donor advised funds	(1) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor adv funds are the organization's property, subject to the			ed Yes N
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit		•	
1	rt III Conservation Easements. Complete	ıf the organızatıon answered "Ye	s" to Form	990, Part IV, line 7.
	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat	tion or pleasure) Preservation (ally importantly land area
	Preservation of open space			
	Complete lines 2a-2d if the organization held a qua	lified conservation contribution in the	form of a co	nservation
	easement on the last day of the tax year			Hald at the Ford of the Warn
	Total number of conservation easements		2a	Held at the End of the Year
	Total acreage restricted by conservation easement:	c	2a 2b	
	Number of conservation easements on a certified hi		2c	
	Number of conservation easements included in (c) a	2d		
	Number of conservation easements modified, transf	erred, released, extinguished, or termi	inated by the	organization during
	Number of states where property subject to conserv	ration easement is located ►		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds		handling of	violations, and Yes N
		,?		☐ Yes ☐ N
	enforcement of the conservation easements it holds	ecting and enforcing conservation ea	sements du	 Yes N ring the year ►
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation ea	asements du nents during	 Yes N ring the year ►
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins A mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line	pecting and enforcing conservation earing, and enforcing conservation easem 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final	nsements du nents during f section	Tyes N ring the year ► the year ►\$ Yes N e statement, and
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins A mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of	pecting and enforcing conservation easing, and enforcing conservation easem 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments	nents during f section and expens ncial statem	Tyes N ring the year ► the year ► \$ Yes N e statement, and ents that describes
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease till Organizations Maintaining Collection	pecting and enforcing conservation eading, and enforcing conservation easem 2 (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's finarments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8 5 116, not to report in its revenue stated for public exhibition, education or res	nents during f section and expens ncial statem es, or Oth 3. tement and to	Tyes N ring the year ► the year ► Yes N e statement, and ents that describes er Similar Assets.
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease **III** Organizations Maintaining Collection Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held	pecting and enforcing conservation earing, and enforcing conservation easem 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 85 and for public exhibition, education or responding statements that describes the public exhibition, education, or resear public exhibition, education, or resear	nents during f section e and expens ncial statem es, or Oth 3. tement and b search in fur se items ent and bala	Tyes N ring the year the year Yes N e statement, and ents that describes er Similar Assets. valance sheet works of therance of public service, nce sheet works of art,
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins A mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease **III** Organizations Maintaining Collection Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held for the organization elected, as permitted under SFAS historical treasures, or other similar assets held for	pecting and enforcing conservation easing, and enforcing conservation easem 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8 (and the footnote to the organization or researcial statements that describes the public exhibition, education, or researcial statements and calculation, or researcial statements.	nents during f section e and expens ncial statem es, or Oth 3. tement and b search in fur se items ent and bala	Tyes N ring the year the year Yes N e statement, and ents that describes er Similar Assets. valance sheet works of therance of public service, nce sheet works of art,
	Staff and volunteer hours devoted to monitoring, ins A mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease **III** Organizations Maintaining Collection Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item (i) Revenues included in Form 990, Part VIII, line:	pecting and enforcing conservation easing, and enforcing conservation easem 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8 (and the footnote to the organization or researcial statements that describes the public exhibition, education, or researcial statements and calculation, or researcial statements.	nents during f section e and expens ncial statem es, or Oth 3. tement and b search in fur se items ent and bala	the year the
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease **III** Organizations Maintaining Collection Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	pecting and enforcing conservation easing, and enforcing conservation easem 2 (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8 5 116, not to report in its revenue stated for public exhibition, education or researcial statements that describes the 5 116, to report in its revenue statements that describes the public exhibition, education, or researcial statements, education, or researcial statements.	nents during f section e and expens nicial statem es, or Oth 3. tement and b search in fur se items ent and bala rich in further	the year
	enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, ins Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease **III** Organizations Maintaining Collection Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item (i) Revenues included in Form 990, Part VIII, line: (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets held for provide the following amounts relating to these item (ii) Assets included in Form 990, Part X	pecting and enforcing conservation easing, and enforcing conservation easem 2 (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's final ments ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8 5 116, not to report in its revenue stated for public exhibition, education or researcial statements that describes the 5 116, to report in its revenue statements that describes the public exhibition, education, or researcial statements, education, or researcial statements.	nents during f section e and expens nicial statem es, or Oth 3. tement and b search in fur se items ent and bala rich in further	the year

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

ar	411 Organizations Maintaining Co	ollections of Art	<u>, His</u>	torica	I Treas	sures, or (<u> </u>	er Similar <i>i</i>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne follow	ıng that	are a sıgnıfıc	ant ı	use of its colle	ectioi	า	
а	Public exhibition		d	▽ ∟	oan or ex	kchange prog	rams	5			
b	Scholarly research		e	Γ o	ther						
С	Preservation for future generations										
ı	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	w they f	urther the	e organizatio	n's e	xempt purpos	e ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•				nılar	Г	Yes	√ No
Pai	t IV Escrow and Custodial Arrang					on answere	ed "Y	es" to Form	1 990),	
	Part IV, line 9, or reported an ar			•							
.a	Is the organization an agent, trustee, custod included on Form 990, Part X?	dian or other interme	diary	for con	tribution	s or other as:	sets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng tabl	е	ı					
						-		•	A mou	ınt	
С	Beginning balance						1 c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1 f				
а	Did the organization include an amount on F	orm 990, Part X, line	e 21?						厂	Yes	∏ No
b	If "Yes," explain the arrangement in Part XIV	/									
Pa	rt V Endowment Funds. Complete										
		(a)Current Year	(b	Prior Ye		c) Two Years Ba	ck (d	1) Three Years Ba	ick (e	Four Ye	ears Back
а	Beginning of year balance	91,077,342			51,788						
b	Contributions	342,242			00,000				_		
С	Investment earnings or losses	22,598,444		-36,8	81,075						
d	Grants or scholarships								_		
е	Other expenditures for facilities and programs	941,040		4,3	93,371						
f	Administrative expenses										
g	End of year balance	113,076,988		91,0	77,342						
:	Provide the estimated percentage of the yea	r end balance held a	as								
а	Board designated or quasi-endowment	65 260 % %									
ь	Permanent endowment ► 9 220 % %										
	Term endowment ► 25 520 % %	,									
c a	Are there endowment funds not in the posse	ssion of the organiz	ation 1	that are	held and	d administere	d for	the			
_	organization by	ooron or the organiza								Yes	No
	(i) unrelated organizations							3	Ba(i)		Νo
	(ii) related organizations							3	Ba(ii)		No
	If "Yes" to 3a(II), are the related organization	•					•		3b		
_	Describe in Part XIV the intended uses of th					5	4.0				
'a i	t VI Investments—Land, Building	s, and Equipme	nt. S								
	Description of investment				st or other nvestment)			(c) Accumulat depreciation		(d) Boo	k value
.a	Land		•						\perp		
	Buildings		•			104,22	3,519	31,293,	854	72	2,929,66
C	Leasehold improvements		•			117,70		, ,	617	73	3,758,181
d	Equipment		•			54,58	4,545	30,371,	723	24	1,212,822
е	Other					2	8,448				28,448

170,929,116

Part VII Investments—Other Securities. See (a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives Closely-held equity interests		
Other HEDGE FUND OF FUNDS	11,889,585	F
BANK COMMON & COLLECTIVE FUNDS	5,092,838	F F
LIMITED PARTNERSHIP INTERESTS	26,427,399	F.
BANK CD AND BANKERS' ACCEPTANCE	2,474,651	F
BANK SHORT TERM INVESTMENT FUNDS	232,907	F
INTERESTS IN PRIVATE EQUITY FUNDS	1,710,522	F
INTEREST IN REAL ASSET FUNDS	581,698	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	, ,	
Part VIII Investments—Program Related. See		13. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	
(a) Descrip	tion	(b) Book value
		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability		
Part X Other Liabilities. See Form 990, Part X	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	•
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	37,864,405
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	50,005,435
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-12,141,030
4	Net unrealized gains (losses) on investments	4	33,925,868
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	33,925,868
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	21,784,838
Par	XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	72,362,576
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	34,892,677
3	Subtract line 2e from line 1	3	37,469,899
4	A mounts 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 394,506		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	394,506
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	37,864,405
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	50,577,738
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 948,529		
e	Add lines 2a through 2d	2e	966,809
3	Subtract line 2e from line 1	3	49,610,929
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 394,506]	
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	394,506
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	50,005,435

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
Part III, Line 1a		LIVE ANIMAL INVENTORY THE COSTS OF PURCHASING OR COLLECTING LIVE ANIMALS ARE EXPENSED AS INCURRED DONATED SPECIMENS ARE NOT VALUED AND, THEREFORE, ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS
Part III, Line 4		The Aquarium houses one of the largest and most diverse collections of live aquatic animals in the world. Currently, this includes 928 species of fishes and 198 species of invertebrates. In addition there are over 39 species of reptiles, 29 species of amphibians, 10 species of marine mammals and 10 species of birds. Altogether, the collections include 1,800 fishes and invertebrates from 77 protected species. About 1,700 of these animals are off-exhibit for breeding purposes. At Shedd Aquarium, animals connect individuals to the living world through exhibits and education programs, inspiring them to make a difference by taking conservation action both globally and locally
Part X	Description of Uncertain Tax Positions Under FIN 48	FIN 48 FOOTNOTE - UNDER GAAP, THE SOCIETY RECOGNIZES INCOME TAX LIABILITIES OR BENEFITS AT THE TIME SUCH AMOUNTS HAVE BEEN INCURRED AND ARE REASONABLY ESTIMABLE ANY POTENTIAL INTEREST OR PENALTIES RELATED TO POSSIBLE FUTURE TAX LIABILITIES ARE RECORDED AS INCOME TAX EXPENSE THE SOCIETY BELIEVES IT HAS NO MATERIAL UNRECOGNIZED INCOME TAX BENEFITS OR LIABILITIES AT DECEMBER 31, 2009 AND 2008 AND IS NO LONGER SUBJECT TO EXAMINATION BY FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR PERIODS BEFORE 2006
Part XII, Line 2d - Other Adjustments		SPECIAL EVENTS EXPENSE 531445 RENTAL EXPENSES 417084
Part XIII, Line 2d - Other Adjustments		SPECIAL EVENTS EXPENSE 531445 RENTAL EXPENSES 417084

DLN: 93493133045170

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

Open to Public **Inspection**

Vame	of the	organi	zatıor	1
SHED	DAQI	JARIU	M SO	CIETY

Employer identification number

36-2167918

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

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

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3	Activites per Region	(Use Schedule F-1	(Form 990) if additional	space is needed)
---	----------------------	-------------------	--------------------------	-------------------

3 Activites per Region (U	se Schedule F-1	(Form 990)	litional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	SEAHORSE CONSERVATION	75,000
NORTH AMERICA	0	0	PROGRAM SERVICES	PLANT VISIT TO REVIEW GLASS GRAPHICS AND SIGNAGE FOR THE OCEANARIUM RENOVATION PROJECT	1,257
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STEVE IRWIN FELLO WSHIP	4,872
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	RESEARCH TRIPS	10,965
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	CORAL REEF RESEARCH, EDUCATION AND COLLECTION	178,390
	0	0			270,484
For Privacy Act and Paperwork R	 eduction Act Notic	e. see the Instruc	tions for Form 990.	 Cat No 50082W Sch e	edule F (Form 990) 2009

Part IV	, line 15, for ar		inizations or Entiti ceived more than \$5 I space is needed.					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SEAHORSE CONSERVATION	75,000	CHECK			
2 Enter total n	umber of recipi by the IRS, or	lent organizations I for which the grant	isted above that are ee or counsel has pr	recognized as charrovided a section 50	ties by the foreign of the foreign o	country, recognized letter	as . ►	
•	•	_	ntities				. ▶	1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
Procedure for Monitoring Grants		Schedule F, Part I, Line 2 Shedd requires reports on how funds
Outside the U S		were expended and according to plan and evaluation of results o the program's accomplishments

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DLN: 93493133045170

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

licensing

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Name of the organization SHEDD AQUARIUM SOCIETY

Employer identification number

								36-2167918	
Pa		c tivities. Comple ers are not require					to Form	990, Part IV	, line 17.
1	Indicate whether the orga	anızatıon raısed fund	s through	any of the	e follov	ung activities Ch	eck all th	at apply	
а	Mail solicitations			e	Г	Solicitation of no	n-governi	ment grants	
Ь	Internet and e-mail s	olicitations		f	Г	Solicitation of go	vernment	grants	
С	Phone solicitations				Γ	Special fundraisir	ng events		
d	☐ In-person solicitation	ıs							
2a	Did the organization have or key employees listed i								Г _{Yes} Г N
b	If "Yes," list the ten higher to be compensated at lea								
	(i) Name of individual or entity (fundraiser)	(ii) Activity	fundrais custo	Did ser have ody or rol of utions?		Gross receipts rom activity	(or re fundra	nount paid to stained by) iser listed in sol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No					
Tota	d								

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

Pa	rt I	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1 TRUSTEE GALA	(b) Event #2	(c) O ther Events	(Add col	tal Eve (a) th I (c))	
٠.			(event type)	(event type)	(total number)			
HELE HELE	1	Gross receipts	404,570	58,943			46	3,513
Revenue	2	Less Charitable contributions	299,720	3			29	9,720
	3	Gross income (line 1 minus line 2)	104,850	58,943			16	3,793
	4	Cash prizes				<u> </u>		
မွ	5	Non-cash prizes						
euse	6	Rent/facility costs						
Direct Expenses	7	Food and beverages						
<u>ਰ</u>	8	Entertainment						
△	9	Other direct expenses .	356,363	175,082			53	1,445
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)			53	1,445
	11	Net income summary Combine li	nes 3, column d, and line	10			-36	7,652
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
 ⊉			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot		
Revenue				bingo, progressive bingo			(c))	rougn
~	1	Gross revenue				-		
	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes <u>%</u>	Г Yes	Г Yes			
			Гио	Гио	Гио	,		
	7	Direct expense summary Add line	s 2 through 5 ın column (d)				
	8	Net gaming income summary Com	nbine lines 1, column d, ai	nd line 7	🕨			
•	_						Yes	No
9 a		ter the state(s) in which the organize the organization licensed to operate				. 9a		
b	If"	'No," Explain						
	_					_		
10a		re any of the organization's gaming	licenses revoked, susper	ded or terminated during	the tax year?	10a		
b	If"	'Yes," Explain						
11		es the organization operate gaming				11	<u> </u>	<u> </u>
12		the organization a grantor, beneficia med to administer charitable gamino				. 12		
					Schedule G (Form 9		-EZ) 20	09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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Schedule I (Form 990)

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

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

Attach to Form 990

OMB No 1545-0047

DLN: 93493133045170

2009

Open to Public Inspection

36-2167918

Department of the Treasury Internal Revenue Service

Rd Suite 710

Spring field, MD 20910

Name of the organization
SHEDD AQUARIUM SOCIETY

Employer identification number

General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (c) IRC Code section (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash (book, FMV, appraisal or government assistance other) International Iguana 752954637 501(c)(3) 5,000 CONSERVATION Foundation1989 Colonial Parkway Fort worth, TX 76110 Association of Zoos and 550526930 501(c)(3) 5,000 GENERAL Aguariums8403 Colesville

Enter tota	al number of section	ı 501(c)(3) and	government	organizations
------------	----------------------	-----------------	------------	---------------

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV	Supplemental	Information, Complete	e this part to provide t	he information require	d in Part I, line 2, and a	ny other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Shedd requires reports on how funds were expended and according to plan and evaluation of results of the program's accomplishments

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DLN: 93493133045170

Employer identification number

OMB No 1545-0047

Schedule J

Department of the Treasury Internal Revenue Service

(Form 990)

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

36-2167918 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? **4**a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4ь Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo Any related organization? 6Ь Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	1	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
TED A BEATTIE	(ı) (ıı)	413,780	119,000	21,769	222,858	9,602	787,009	
JOYCE M SIMON	(ı) (ıı)	211,702	35,000	37,496	13,785	9,602	307,585	
CHRISTOPHER JABIN	(ı) (ıı)	189,703	10,000	14,888	12,762	16,857	244,210	
BRADLEY L POPOVICH SR	(I) (II)	185,069	7,000	9,719	11,663	727	214,178	
AMY RITTER COWEN	(ı) (ıı)	167,343		29,250	10,561	720	207,874	
KENNETH T RAMIREZ	(ı) (ıı)	160,783	20,000	3,331	6,661	9,503	200,278	
MICHAEL M DELFINI	(ı) (ıı)	148,964	20,000	13,231	9,923	16,799	208,917	
CHERYL MELL	(ı) (ıı)	140,780		10,069	9,240	5,938	166,027	
DEBRA KERR	(ı) (ıı)	178,750	10,000	11,561	11,562	9,503	221,376	
NANCY B ANSCHEL	(ı) (ıı)	131,789	5,000	7,527	8,631	9,308	162,255	
MATTHEW C BURDEN	(ı) (ıı)	122,901	2,500	5,279	7,258	16,670	154,608	
Bryan Schuetze	(ı) (ıı)	107,639	15,000	5,863	7,036	16,660	152,198	
				'				
		<u> </u>	 '	 '				
	'		<u> </u>	<u> </u>				
		1	1	1		I		

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
		Travel for companions - the spouse of the President/CEO was provided airfare for one instance involving bona fide business travel, the benefit was treated as non-taxable compensation Part 1, Line 1a Health or social club dues or initiation fees - the President/CEO was provided certain social club dues, the portion of this benefit related to bona fide business purposes was treated as non-taxable compensation
	· '	Part I, Line 4b Line 4b - The President/CEO participated in a supplemental non-qualified retirement plan as described in section 457 (f) Total contributions for the year were \$208,158

Schedule J (Form 990) 2009

Schedule K

(Form 990)

DLN: 93493133045170

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization SHEDD AQUARIUM SOCIETY 36-2167918 **Bond Issues** (h) O n (g) Defeased Behalf of (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Purpose Issuer Yes Yes No No ILLINOIS FINANCE AUTHORITY ADVANCE REFUND 1997 BONDS 35,881,436 Х 86-1091967 45200BSF6 11-08-2005 Х Proceeds Part II В C D Ε Α Total proceeds of issue 35,881,436 Gross proceeds in reserve funds 2 Proceeds in refunding or defeasance escrows 3 38,644,694 Other unspent proceeds Issuance costs from proceeds 470,480 Working capital expenditures from proceeds Capital expenditures from proceeds Year of substantial completion 8 Yes Yes No Yes No No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х 9 Were the bonds issued as part of an advance refunding issue? Χ 10 Has the final allocation of proceeds been made? Χ 11 Does the organization maintain adequate books and records to support 12 Х the final allocation of proceeds? **Private Business Use** В C D Е Α Yes No Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?

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

which may result in private business use?

Are there any lease arrangements with respect to the financed property

		A	١	E	3	(3)		E
		Yes	No								
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

	7 ii Dittage										
			A	В			С	D			E
		Yes	No								
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2	Is the bond issue a variable rate issue?		X								
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?										
	records?		X								
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		X								
b	Name of provider										
с	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X								
5	Were any gross proceeds invested beyond an available temporary period?		X								
6	Did the bond issue qualify for an exception to rebate?	X									

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DLN: 93493133045170

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization SHEDD AQUARIUM SOCIETY

Employer identification number

					36-2167918			
Pa	Tt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of de reven	etermı	nıng	
1	Art—Works of art							
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles $\ \ .$.							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	27	1,669,808	FAIR MARKET VAL	.UE		
10	Securities—Closely held stock	-						
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts	•						
	FOOD &		25	214.078	FAID MADKET VAL	ш		
	Other ► (BEVERAGE) Other ► (FREIGHT)	X	1	ł	FAIR MARKET VAL FAIR MARKET VAL			-
20	AIRLINE		1	100,000	TAIR MARKET VAL	<u> </u>		
27	Other ► (TICKETS)	X	15	87,624	FAIR MARKET VAL	.UE		
	Other ► (MISCELLANEOUS)	Х	15		FAIR MARKET VAL			
29	Number of Forms 8283 receive	d by the ora	anization during the tax ve	•				
	for which the organization comp				29			
							Yes	No
30a	During the year, did the organiz	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three yea	rs from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the ent	ire holding p	period?			30a	<u> </u>	No
ь	If "Yes," describe the arrangem	nent in Part :	II					
31	Does the organization have a g	ıft acceptan	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	se third part	ies or related organizations	to solicit, process, or sell i	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not repoi	rt revenues i	in column (c) for a type of n	roperty for which column (a) is checked.			
	describe in Part II				,,			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information. ► Attach to Form 990.

Supplemental Information to Form 990

Name of the organization SHEDD AQUARIUM SOCIETY

Employer identification number

36-2167918

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 3		THE ORGANIZATION CONTRACTS WITH SODEXO, INC. TO MANAGE AND OPERATE FOOD SERVICES AT THE AQUARIUM
Form 990, Part VI, Section A, line 4		1 Section 4.2 was amended to expand the board size to 50 to 55 members from the previous range of 45 to 50 members. 2 Section 5.1 was amended to revise the Officers of the Board to a Chairman and such other officers as may be determined by the Board. This provides more flexibility to the Board in determining the number of Senior Vice Chairman and Vice Chairman positions at any particular time. The previous bylaws called for one Senior Vice Chairman and one Vice Chairman. 3 Section 6.2 was amended to specify the size of the Executive Committee as a range of 5 to 10 members rather than the previous fixed number of 10 members (exclusive of the Chairman).
Form 990, Part VI, Section B, line 11		The completed Form 990, including schedules, was distributed to the members of the Audit Committee (the Committee) of the Board of Trustees. The Committee met with the organization's President/CEO and Chief Financial Officer to review the Form 990 and related schedules. Subsequently, each Trustee was requested to review the final Form 990, including schedules, which had been uploaded to the Trustees' extranet site. All questions or comments were directed to the organization's Chief Financial Officer.
Form 990, Part VI, Section B, line 12c		Annually, Trustees, affiliates, employees and volunteers are asked to review the organization's Code of Ethics and complete a Code of Ethics Statement and Questionnaire, which includes their agreement to report promptly any reportable matters. Such Statements are reviewed and evaluated by the Finance and Audit Committee of the Board of Trustees.
Form 990, Part VI, Section B, line 15		The Compensation Committee (the Committee) of the Board of Trustees is responsible for the annual review of the compensation of the officers and key employees of the organization. All members of the Committee are independent. In determining the compensation of the President/CEO, the Committee evaluates his performance against previously agreed upon criteria, considers comparable market data, then debates and documents its recommendation of reasonable compensation. In determining the compensation of other officers and key employees, the same procedures are performed, how ever, the Committee considers the CEO's evaluation of the staffs' performance. The recommendations are then taken to the Executive Committee of the Board for final review and action.
Form 990, Part VI, Section C, line 19		Form 990, Part VI, Section C, Line 19 The organization's governing documents and financial statements are made available upon request
FORM 990, PART VI, SECTION A, LINE 1	EXECUTIVE COMMITTEE AUTHORITY	The Executive Committee of the Board of Trustees has the power and authority of the Board of Trustees and may act on behalf of the Board of Trustees between meetings of the Board, subject to certain limitations Under the terms of the organization's bylaws, the Executive Committee is made up of ten members of the Board of Trustees elected by the Board at its annual meeting, the Chairperson of the Board serves as an ex officio member with a vote as the eleventh member

Additional Data

Software ID: Software Version:

EIN: 36-2167918

Name: SHEDD AQUARIUM SOCIETY

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
ADMISSIONS	900,099	24,697,202	24,697,202		
FOOD SERVICE	722,210	890,053			890,053
EDUCATIO NAL PRO GRAMS	900,099	684,979	684,979		
BELUGA ENCOUNTERS	900,099	146,586	146,586		
VALET	900,099	112,387			112,387

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
OTHER CONTRACTUAL SERVI	3,209,695	2,053,949	781,626	374,120
REPAIR AND MAINTENANCE	1,379,978	1,144,031	206,772	29,175
OTHER EXPENSES	735,432	376,791	282,447	76,194
FOOD SERVICE EXPENSE	559,737	559,737		
UNRELATED BUSINESS INCO	9,989	9,989		