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DLN: 93493142002263

990 m

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)

benefit trust or private foundation)

Open to

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

The property of the property o

2011

OMB No 1545-0047

Open to Public Inspection

A Fo	or the :	2011 ca	alendar year, or tax year beginning 09-01-201	1 and ending 08-31-20	12		<u> </u>	
		pplicable	C Name of organization ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY			D Employer	identification number	
☐ Ad	dress ch	nange	Doing Business As			36-2515 E Telephone		
∏ Na	ıme cha	nge	Doing Business As			•		
Ini	tıal retu	rn	Number and street (or P O box if mail is not deliver	red to street address) Room/s	uite	(312) 66	ipts \$ 30,232,996	
Г Те	rmınate	d	17 N DEARBORN			G Gloss lece	ipts \$ 30,232,990	
☐ An	nended	return	City or town, state or country, and ZIP + 4 CHICAGO, IL 60602	•				
Г Ар	plication	n pending	Sinc. 1889, 12 88802					
			F Name and address of principal officer			- is a group re		
			DR RAYMOND CROSSMAN 17 N DEARBORN		affilia	ites?	⊤Yes 🔽 No	
			CHICAGO,IL 60602		H(b) Are a	II affiliates inc	luded?	
—————————————————————————————————————	av-evem	npt status	▼ 501(c)(3)	4947(a)(1) or	_		ist (see instructions)	
		<u> </u>		4947(a)(1) 01 327	H(c) Grou	ıp exemption	number F	
			W A DLER EDU		<u> </u>			
			Corporation Trust Association Other		L Year of fo	rmation 1963	M State of legal domicile IL	
Pa	rt I		mary					
Governance	-	THE SC	escribe the organization's mission or most sig HOOL CONTINUES THE PIONEERING WOR ATING SOCIALLY RESPONSIBLE PRACTIT E	K OF THE FIRST COMM				
E E	-							
¥0.	2 6	Check th	nis box 🛌 if the organization discontinued it:	s operations or disposed	of more than 3	5% of its po	t assets	
			of voting members of the governing body (Par		or more than 2	ı	19	
Activities &			of independent voting members of the govern		·))	_	1 17	
Ĭ			mber of individuals employed in calendar year		-		363	
् व	6	Total nu	mber of volunteers (estimate if necessary) .				5 17	
	1		related business revenue from Part VIII, colu	* **		7	a 0	
	ь	Net unre	lated business taxable income from Form 990	0-T, line 34		7		
					Pric	r Year	Current Year	
ā	8		butions and grants (Part VIII, line 1h)	•	526,98			
Revenue	9 10	_	am service revenue (Part VIII, line 2g) tment income (Part VIII, column (A), lines 3,		25,385,293 -178,274			
æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8	'		0 0		
	12	Totalı	revenue—add lines 8 through 11 (must equal	Part VIII, column (A), lu	ne			
	1.0					25,734,000		
	13 14		s and sımılar amounts paıd (Part IX, column (/ ts paıd to or for members (Part IX, column (A			265,50	268,685	
	15		es, other compensation, employee benefits (P				0	
8	13	5-10)			14,634,06	1 18,243,503		
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), l		27,013 2			
ਬੁ	b		ındraısıng expenses (Part IX, column (D), line 25) ▶ <u>961</u>					
	17		expenses (Part IX, column (A), lines 11a-11	•	9,802,234 10,245,33			
	18		expenses Add lines 13-17 (must equal Part			24,728,81		
- e7	19	Reven	ue less expenses Subtract line 18 from line :	Beginnin	1,005,187 g of Current			
Net Assets or Fund Balances						ear	End of Year	
esse Base	20	Total	assets (Part X, line 16)			24,985,25	7 16,977,959	
が発	21		liabilities (Part X, line 26)			19,173,989		
	22		ssets or fund balances Subtract line 21 from	line 20		5,811,268	7,363,085	
	rt III er penal		ature Block erjury, I declare that I have examined this return,	, including accompanying	schedules and s	tatements. an	d to the best of mv	
know			f, it is true, correct, and complete. Declaration of					
		****				013-05-22		
Sigi		Signa	ature of officer		Da	ate		
Her	e		RAYMOND CROSSMAN PRESIDENT					
		 	<u> </u>	Date	Check If	Dronaroda t-	vnavor identification number	
Paid		Preparer signature		self-	elf- (see instructions)			
	arer's	_	,	employed 🕨	P00756195			
	Only	ıf self-er	ame (or yours CROWE HORWATH LLP mployed),			EIN 🕨		
	.,	address,	, and ZIP + 4			Phone no	(312) 899-7000	
			Chicago, IL 606024903				,,, , , , , , , , , , , , , , , ,	

Par	t III	Statement of Program S Check if Schedule O contains a			
DV SER	ADLER ANCIN VICES,	IG PROFESSIONAL PSYCHOLO	PSYCHOLOGY IS AN INSTI GICAL PRACTICE IT PROV NS, ANTICIPATING AND RE	FUTION OF HIGHER EDUCATION IDES QUALITY PROFESSIONAL SPONDING TO THE CONSTANT AND SOCIETY	EDUCATION, COMMUNITY
2		ne organization undertake any siq 1or Form 990 or 990-EZ?		ing the year which were not listed o	n ∀es ▼ No
	If "Ye	s," describe these new services	on Schedule O		
3		ne organization cease conducting ces?		ın how it conducts, any program	Yes 🔽 No
	If "Ye	s," describe these changes on S	chedule O		
4	expen	ises Section 501(c)(3) and 501	(c)(4) organizations and secti	ach of its three largest program ser on 4947(a)(1) trusts are required t any, for each program service repo	o report the amount of
4a	MISSI ADVA	ADLER SCHOOL OF PROFESSIONAL PSYCION IS TO CONTINUE THE PIONEERING	WORK OF ALFRED ADLER BY GRADUA	rants of \$ 268,685) (Revenu UCATION THROUGH A SCHOLAR/PRACTITION ATING SOCIALLY RESPONSIBLE PRACTITION GRAMS ENROLLING MORE THAN 1,200 STU	ONER MODEL FOR 60 YEARS ITS ERS, ENGAGING COMMUNITIES, AND
4b	(Code	e) (Expenses \$	ıncludıng gr	ants of \$) (Revenue	2 \$)
4c	(Code	e) (Expenses \$	ıncludıng gr	ants of \$) (Revenue	2 \$)
4d		er program services (Describe ii	n Schedule O) including grants of \$) (Revenue \$)
4e		I program service expenses -\$	18,735,031	- · · · · ·	
	. 5.4		1, 00,001		

art TV	Checklis	t of	Required	Schedules
	CIICCNIIS	·	IXCUUII CU	Scriculics

	one or no quire a concauted		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	110
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 😼	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	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	8		No
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		N o
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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 and IV	15		No
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 and IV	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
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		No
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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	Yes	
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		Νo
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		No
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		No
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			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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		Νo
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		No
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
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check in Schedule O contains a response to any question in this Part V	•	•1	
			Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 107			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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			
b	return	21.	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
Ва	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	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 or securities account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b LO	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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			
L1	Section 501(c)(12) organizations. Enter			
	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)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		_

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.

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

Se	ection A. Governing Body and Management		- r	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		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	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b				
	organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►IL			
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 made these available. Check all that apply			

- Own website Another's website V Upon request
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of
- interest policy, and financial statements available to the public See Additional Data Table State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20

<u>Part VII</u> 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

- 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ◆ List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

◆ 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

(A) Name and Title	(B) Average hours per week (describe hours	Position more unless	on (d e thar	c) o no n one son er ar	t che e box is bo nd a tee)	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DR RAYMOND CROSSMAN PRESIDENT & BOARD MEMBER	40 00	х		Х				600,113	0	91,450
(2) AUDREY PEEPLES BOARD MEMBER	5 00	х						0	0	0
(3) BERNARD SCHULMAN BOARD MEMBER	5 00	х						0	0	0
(4) BETSY BRILL BOARD MEMBER	5 00	х						0	0	0
(5) DAVID KREISCHER BOARD MEMBER	5 00	х						0	0	0
(6) DAVID SINSKI BOARD MEMBER	5 00	Х						0	0	0
(7) ERIC WARNER BOARD MEMBER	5 00	х						0	0	0
(8) HAROLD MOSAK BOARD MEMBER	10 00	Х						71,999	0	0
(9) JANET CAMPBELL BOARD MEMBER	5 00	х						0	0	0
(10) JAVIER UBARRI BOARD MEMBER	5 00	Х						0	0	0
(11) JIM HOULIHAN BOARD MEMBER	5 00	х						0	0	0
(12) JUAN SALGADO BOARD MEMBER	5 00	х						0	0	0
(13) LINDSAY SETZER BOARD MEMBER	5 00	х						0	0	0
(14) MICHAEL GELLER BOARD MEMBER	5 00	х						0	0	0
(15) RALPH DEWITT BOARD MEMBER	5 00	х						0	0	0
(16) SID MOHN BOARD MEMBER	5 00	х						0	0	0
(17) VICKI CHOU BOARD VICE-CHAIR	5 00	Х						0	0	0

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

(A) Name and Title	(B) A verage hours per week (describe hours for related organizations in Schedule	unles an	on (d e thai	n one son er ar /trus	e bo is bo nd a stee	x, oth Highes	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	0)	trustee	Trustee	<u> </u>	ojee	t compensated ee	¥			
(18) WILLA TAYLOR BOARD MEMBER	5 00	х						0	0	0
(19) WILLIAM GREAVES BOARD MEMBER	5 00	х						0	0	0
(20) JEFF GREEN VP OF FINANCE & TECHNOLOGY	40 00			Х				219,885	0	24,971
(21) JO BETH CUP VP OF ADMINISTRATION	40 00			Х				186,688	0	33,782
(22) MARTHA CASAZZA VP ACADEMIC AFFAIRS	40 00			Х				208,820	0	22,100
(23) ANTHONY CHIMERA VP OF DEVELOPMENT	40 00				х			175,387	0	32,776
(24) LYNN TODMAN DIR, INST ON SOCIAL EXCLUSION	40 00				х			158,438	0	8,336
(25) COX ELIDA CRISTINA CORE FACULTY	40 00					х		121,491	0	18,230
(26) CRAIG HINES DIRECTOR OF ADMISSIONS	40 00					х		155,895	0	21,663
(27) HITE ELINOR AVP OF HR	40 00					х		129,729	0	6,763
(28) MARK BRANSON AVP OF MARKETING	40 00					х		131,533	0	20,249
(29) WENDY PASZKIEWICZ ASSOC VP OF ACADEMIC AFFAIRS	40 00					Х		131,642	0	24,726
to Sub-Total	O Part VII Sect						>			
d Total (add lines 1b and 1c)	<u> </u>		• •				<u> </u>	2,291,620	0	305,046
2 Total number of individuals (inclu	dıng but not lım	ited to	those	list		bove)	who	received more tha	n	

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
CARDMEMBER SERVICES PO BOX 15298 WILMINGTON, DE 198505298	CC PROCESSING/SRVS	553,243
CHICAGO TRANSIT AUTHORITY 567 WEST LAKE STREET CHICAGO, IL 60661	TRANSPORTATION	157,310
ABM SECURITY SERVICES PO BOX 743252 LOS ANGELES, CA 90074	SECURITY SERVICES	154,883
HOLLAND AND KNIGHT LLP 213 W INSTITUTE PLACE CHICAGO, IL 60610	GRAPHIC DESIGN	115,189
QUATT ASSOCIATES 2233 WISCONSIN AVE WASHINGTON, DC 20007	IT SYSTEM CONSULTATION & SUPPORT	105,755
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►7

Form 990 (2011) Page 9 Part VIII Statement of Revenue								
Part	/** **	Statement o	or 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
#\$ #	1a	Federated cam	paigns 1a	0				
ga our	ь	Membership du	ies 1b	0				
£. ∰`ر	C	_	ents 1c	0				
<u>=</u>	d		zations 1d	0				
Sing.	e	Government grants						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	ibutions included in	452,963				
S and	h	Total. Add lines	s 1a-1f	▶	1,147,208			
				Business Code				
enu	2a	TUITION & FEES		900099	28,476,417	28,476,417	0	0
æ	b	CONTRACTS AND S ACTIVITIES	SPONSORED	900099	288,658	288,658	0	0
9 9 9	c	ADLER COMMUNIT	Y HEALTH SERVICES	541900	173,457	173,457	0	0
38	d	OTHER REVENUE		900099	67,670	67,670	0	0
Ē	e							
Program Serwce Revenue	f	All other progra	am service revenue		0	0	0	0
<u> </u>	g	Total. Add lines	s 2a – 2f	▶	29,006,202			
	3		ome (including dividend	· · · · · · · · · · · · · · · · · · ·	79,586	0	0	79,586
	4		ar amounts) stment of tax-exempt bond	-	7,500	0	0	
	5	Royalties		` <u>.</u>	0	0	0	0
		·	(ı) Real	(II) Personal				
	6a	Gross rents	0	0				
	b	Less rental expenses	0	0				
	C	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0	0	0	0
	7a	Gross amount from sales of assets other	(i) Securities	(II) Other				
	ь	than inventory Less cost or other basis and sales expenses	0	0				
	c	Gain or (loss)	0	0		-1		
άυ	d 8a		rom fundraising Iudina	►	0	0	0	0
Other Revenue		\$	s reported on line 1c)					
<u> </u>			a	0				
Ě	b c		penses b (loss) from fundraising	0 events	ol		0	٥
	9a	Gross income f	rom gaming activities ne 19					
	b c		a penses b (loss) from gaming activ		o	0	0	0
		Gross sales of returns and allo	inventory, less owances .					
	b c		a oods sold b (loss) from sales of inve	0 0 entory ►	o	0	0	0
		Miscellaneous		Business Code				
	11a							
	ь							
	С							
	d		ue		0	0	0	0
	e	Total. Add lines	s 11a-11d	· · · · •	0			
	12	Total revenue.	See Instructions .	▶	30,232,996	29,006,202	0	79,586

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 15,000 15,000 Grants and other assistance to individuals in the United States See Part IV, line 22 220,000 220,000 3 Grants and other assistance to governments, organizations, and individuals outside the United 33,685 33,685 States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 2,219,622 683,046 1,361,189 175,387 key employees . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 13,009,992 10,140,442 2,535,013 334,537 Pension plan contributions (include section 401(k) and section 702,886 242,858 403(b) employer contributions) 424,483 35,545 1,478,596 922,897 507,085 Other employee benefits 48,614 832,407 587,782 212,459 10 32,166 Fees for services (non-employees) 11 Management 109,536 97,487 10,954 1,095 Legal 247,261 27,782 Accounting 277,821 2,778 Lobbying 84,500 84,500 Professional fundraising See Part IV, line 17 . . 27,600 27,600 Investment management fees 0 Other 137,410 g 16,175 118,491 2,744 Advertising and promotion . . . 1,145,431 1,019,434 114,543 11,454 12 13 Office expenses 240,869 14 Information technology 214,373 24,087 2,409 15 Royalties . . 2,419,826 16 2,153,645 241,983 24,198 292,734 157,316 124,549 10,869 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 0 19 Conferences, conventions, and meetings 58,637 37,137 19,205 2,295 251,299 223,656 25,130 2,513 20 21 Payments to affiliates . . . 8,795 22 Depreciation, depletion, and amortization 879,476 782,733 87,948 59,754 23 108,712 48,287 671 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f Ifline 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) CONSULTANTS 921,458 820,097 92,146 9,215 77,352 CATERING 226,599 85,947 63,300 SPEAKER FEES 37,578 37,578 PRINTING & PUBLICATIONS 159,960 142,364 15,996 1,600 d е All other expenses 2,893,489 2,261,183 553,591 78,715 25 Total functional expenses. Add lines 1 through 24f 28,785,123 21,383,475 6,440,648 961,000 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Part X **Balance Sheet** (A) (B) Beginning of year End of year 974 314 1 1 4.900.954 2 4.215.972 2 3 111,577 187,977 3 9.549.261 4 926.718 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 0 0 7 0 8 9 325,003 9 504.940 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis *Complete* 11,744,621 Part VI of Schedule D 10a 10b 2,642,073 b Less accumulated depreciation 9,533,314 10c 9,102,548 1,239,597 1,343,541 11 11 0 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 14 10,219 10,307 15 15 24,985,257 16,977,959 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,709,444 1,460,281 17 17 Accounts payable and accrued expenses . 18 18 19 10,785,754 19 2,007,105 20 4.561.323 20 3.997.501 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 908.171 23 802.078 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,209,297 25 1,347,909 D 26 19,173,989 26 9,614,874 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 5,811,268 27 7,309,495 Unrestricted net assets 28 48,587 28 Temporarily restricted net assets Fund 29 29 5,003 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 5.811.268 33 7.363.085 34 Total liabilities and net assets/fund balances 24.985.257 34 16.977.959

Ра	Check if Schedule O contains a response to any question in this Part XI			. 🔽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		30.2	232,996
2	Total expenses (must equal Part IX, column (A), line 25)	2			785,123
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,8	311,268
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1	103,944
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		7,3	363,085
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 is	sued		100	
_	on a separate basis, consolidated basis, or both	5464			
	▼ Separate basis				
За	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 re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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.

Inspection **Employer identification number**

		ne organı OL OF PRO	<u> </u>		01111 330 01	- OIIII 330 LL			Employer	identificatio	n number
									36-2515		
	rt I			ıblic Charity Sta						instructions	
	_			te foundation becaus					ox)		
1	<u> </u>		-	ion of churches, or a			=	b)(1)(A)(i).			
2	고			d in section 170(b)(1							
3	<u> </u>	•		perative hospital se	_						
4	ı	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5	Γ	An org	anızatıon op	perated for the benefi	t of a college	e or universi	ty owned or o	operated by a	a governmer	ntal unit desc	rıbed ın
		sect ior	170(b)(1)	(A)(iv). (Complete P	art II)						
6				r local government o							
7	Γ	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	n a governme	ntal unit or	from the gen	eral public
8	\sqcap	A com	munity trust	t described in sectio	n 170(b)(1)(A)(vi) (Cor	mplete Part I	I)			
9	\sqcap	Anorg	anızatıon th	at normally receives	(1) more th	nan 331/3%	of its suppor	t from contril	outions, mei	mbership fee:	s, and gross
		receipt	s from activ	vities related to its e	xempt functi	ons—subjec	t to certain e	exceptions, a	nd (2) no m	ore than 331	/3% of
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ir	ncome (less :	section 511	. tax) from bu	ısınesses
		acquire	ed by the or	ganızatıon after June	30,1975 S	See section !	509(a)(2). (0	Complete Par	tIII)		
10		An org	anızatıon or	ganized and operated	d exclusively	to test for	public safety	See section	509(a)(4).		
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type III - Other									
е	Γ	other t	_	ox, I certify that the ion managers and ot	-			•		•	
f		If the c	rganization this box	received a written d						III supporti	ng organization,
g		followir	ng persons?	2006, has the organ irectly or indirectly c)	Yes No
				governing body of th			_			11g	ı(i)
		(ii) a fa	amıly memb	er of a person descri	bed in (i) abo	ove?				11g	
		(iii) a 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g((iii)
h		Provide	e the followi	ng information about	the support	ed organızat	ion(s)				
(i) Name of supported organization		e of rted	(iii) Type of organization (described on EIN lines 1- 9 above or IRC section (iv) Is the organization in col (i) listed in your governing document?		e Ion In ted In Erning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?	
				(see instructions))	Yes	No	Yes	No	Yes	No	
Tota	I										

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

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. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
Explanation							

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493142002263

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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

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 35c (Proxy Tax), then

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

vame	orthe	org	anization	
ADLER	SCHOOL	OF.	PROFESSIONAL	PSYCHOLOGY

Employer identification number

36-2515281

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2 Political expenditures
- 3 Volunteer hours

art I-B	Complete if the organization is exem	pt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made? Yes
- b If "Yes," describe in Part IV

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 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? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) 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 -

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,0	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
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Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
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(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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)).

		(6	1)	(b)	
		Yes	No	Amount	
L	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		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
c	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
e	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		84,500	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	Other activities? If "Yes," describe in Part IV		No		
j	Total lines 1c through 1i			84,500	
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		Ī		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
-	A TITE A Complete if the expeniention is expensely under coeffice FO4/s/(4) coeffice				

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

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) 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	
h	Carryover from last year	2h	

3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions)

2a	
2b	
2c	
3	
4	
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

Identifier	Return Reference	Explanation
Description of the activities reported on Lines 1a through 1i		THE ADLER SCHOOL IS REPRESENTED BY LEGISLATIVE CONSULTANTS IN SUPPORT OF, AND RESPONSIBLE FOR, THE SCHOOL'S GOVERNMENT AFFAIRS PROGRAM BOTH IN THE FEDERAL GOVERNMENT AND IN THE STATE OF ILLINOIS SPECIFICALLY, THE CONSULTANTS PROVIDE DIRECT ADVOCACY SERVICES RELATING TO THE SCHOOL'S FEDERAL PROGRAMS, ARRANGE AND PARTICIPATE IN MEETINGS FOR THE SCHOOL'S LEADERSHIP WITH MEMBERS OF CONGRESS, MONITOR STATE AND FEDERAL ISSUES OF CONSEQUENCE TO THE SCHOOL AND ASSIST THE SCHOOL'S LEADERSHIP WITH ALL ASPECTS OF RESPONDING TO CONGRESSIONAL FORMS FOR EARMARK REQUESTS

DLN: 93493142002263

OMB No 1545-0047

Inspection

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY 36-2515281 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III

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

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Schedule D (Form 990) 2011 Cat No 52283D

	•••• Organizations Maintaining Co	llections of Art	t, His	tori	cal Treas	sures, or	<u>Othe</u>	<u>r Similar Asse</u>	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing that	are a signific	ant u	se of its collectio	n	
а	Public exhibition		d	Γ	Loan or ex	xchange pro	grams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ain hov	w they	further th	e organizatio	n's ex	kempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an					ion answer	ed "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	forc	ontribution	s or other as	sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able			•		
_								Amo	unt	
C C	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f	_		
2a	Did the organization include an amount on Fo		e 21?					ı	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV				1 110 4 11 4					
Pa	rt V Endowment Funds. Complete	If the organizatio)Prior \		o Form 990 Two Years Bac			NEgur V	ears Back
1a	Beginning of year balance	(a)Current rear	(0,	JETIOI	ieai (c)	TWO TEATS DAC	(4)	Tillee Teals back (e	=) 1 Out 10	cais back
b	Contributions						+			
c	Investment earnings or losses						+			
d	Grants or scholarships						+			
e	Other expenditures for facilities and programs									
f	Administrative expenses						\top			
q	End of year balance									
2	Provide the estimated percentage of the yea	r end balance held	as		I			I		
_ а	Board designated or quasi-endowment									
b	Permanent endowment									
c	Term endowment ►									
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re held and	d administer	ed for	the		
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)	<u> </u>	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•						<u>3b</u>		<u> </u>
4	Describe in Part XIV the intended uses of th									
Par	t VI Land, Buildings, and Equipme	int. See Form 99	90, Pa							
	Description of property				Cost or othe s (investmen			(c) Accumulated depreciation	(d) Bo	ok value
1a	Land		•							0
b	Buildings		•							0
c	Leasehold improvements					6,40	06,731	203,136		6,203,595
	Equipment		_			2.46	66,861	1,262,728		1,204,133
d	- 4		•			=,				1,20.,100
	Other	<u> </u>	<u>.</u>				71,029	1,176,209		1,694,820

Part VII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	+ , ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	,	
Part VIII Investments—Program Related. Se		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, II	ne 15.	-
(a) Descri	ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part X	K, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
DEFERRED RENT	1,347,909	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,347,909	
2 Fig. 48 (ASC 740) Footpote. In Bart VIV. provide the tax		pization's financial statements that reports the

	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ILS	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
	Total expenses (Form 990, Part IX, column (A), line 25)	2	
	Excess or (deficit) for the year Subtract line 2 from line 1	3	
	Net unrealized gains (losses) on investments	4	
	Donated services and use of facilities	5	
	Investment expenses	6	
	Prior period adjustments	7	
		8	
	Other (Describe in Part XIV)		
	Total adjustments (net) Add lines 4 - 8	9	
)	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
14	Reconciliation of Revenue per Audited Financial Statements With Revenue p		eturn
	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments		
)	Donated services and use of facilities		
:	Recoveries of prior year grants		
ı	Other (Describe in Part XIV)		
•	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
rt	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
	Total expenses and losses per audited financial statements	1	
	A mounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities		
)	Prior year adjustments		
	Other losses		
	Other (Describe in Part XIV) 2d		
:	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
•	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
•	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
3			
!	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Identifier Return Reference Explanation

additional information

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DLN: 93493142002263

OMB No 1545-0047

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury

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

Schools

Internal Revenue Service Name of the organization ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY

Employer identification number

	36-2515281			
Pai	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	42	Vac	
	Records indicating the racial composition of the student body, faculty, and administrative stair? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	Yes Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
	Educational policies?	5e		No
-	Use of facilities?	5f		No
	Athletic programs?	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h_		No
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	NI NI
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II	6b		No
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information

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

ldentifier	Return Reference	Explanation
Financial aid or assistance from a governmental agency	1 '	ADLER PARTICIPATES IN THE FEDERAL COLLEGE WORK STUDY AND GUARANTEED LOAN PROGRAMS

Schedule E (Form 990 or 990-EZ) 2011

DLN: 93493142002263

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

Open to Public **Inspection**

Employer identification number Name of the organization ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY 36-2515281 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 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 ✓ Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Part V if additional space is needed) (a) Region (b) Number of (d) Activities conducted in (e) If activity listed in (d) is a (c) Number of (f) Total offices in the employees or region (by type) (e g, program service, describe expenditures for region agents in region or fundraising, program specific type of region/investments independent services, investments, grants service(s) in region in region to recipients located in the contractors region) NORTH AMERICA (CANADA 1 20 PROGRAM SERVICES EDUCATION 2,870,799 & MEXICO ONLY) NORTH AMERICA (CANADA 0 0 GRANTMAKING 33,685 SCHOLARSHIPS & MEXICO ONLY)

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
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)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011

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 Part V if additional space is needed.

Use Part V If a	additional space is ne	eaea.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	NORTH AMERICA (CANADA & MEXICO ONLY)	23	33,685	CASH PAYMENT	0		
					1		COO) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Page **5**

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
Procedures for monitoring use of grant funds	Schedule F, Part I, Line 2	STUDENT MUST HAVE APPLIED FOR ADMISSION TO THE SCHOOL SCHOLARSHIPS ARE RESERVED FOR FULL-TIME STUDENTS STUDENTS MUST MAINTAIN SATISFACTORY PROGRESS TO MAINTAIN ELIGIBILITY GRANTS ARE AWARDED BY THE OFFICE OF ADMISSIONS, BASED ON VARIOUS CRITERIA INCLUDING DIVERSITY, COMMITMENT TO SOCIAL JUSTICE, AND INDIVIDUAL MERIT THE OFFICE OF ADMISSIONS MAINTAINS THE RECORDS OF THESE AWARDS AND DETERMINES STUDENTS' ELIGIBILITY THE GRANTS ARE APPLIED DIRECTLY TO THE STUDENTS' ACCOUNTS

ldentifier	Return Reference	Explanation
Method used to account for expenditures on organization's financial statements	1 ' '	NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL

ldentifier	Return Reference	Explanation
Method used to account for grants on organization's financial statements		NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL

Schedule F (Form 990) 2010

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DLN: 93493142002263

SCHEDULE G (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public

Name of the organization				·	Employer ider	ntification number
ADLER SCHOOL OF PROFES	SSIONAL PSYCHOLO	GY			36-2515281	
Part I Fundraising A	ctivities. Complet	e if the d	organiza	tion answered "Yes"	to Form 990, Part IV	, line 17.
1 Indicate whether the org	janization raised funds	through a	any of the	following activities Ch	eck all that apply	
a 🔽 Mail solicitations			е	Solicitation of no	n-government grants	
b 🔽 Internet and e-mail	solicitations		f	Solicitation of go	vernment grants	
c 🔽 Phone solicitations		ng events				
d	ons					
2a Did the organization hav or key employees listed						Ves
b If "Yes," list the ten high to be compensated at le	nest paid individuals of ast \$5,000 by the org	entities anization	(fundraise Form 99	ers) pursuant to agreem 0-EZ filers are not requ	ents under which the fui ired to complete this ta	ndraiser is ble
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
NICK B WHITCOMB ASSC INC 205 W UPPER WACKER DRIVE	CONSULTANT		No	0	27,600	27,600
CHICAGO, IL 60606						
		1				
		-				
		-				
		+				
Total				0	27,600	27,600
3 List all states in which the licensing	he organization is regi:	stered or	licensed t	o solicit funds or has b	een notified it is exempt	from registration or

Part I	Fundraising Events. Commore than \$15,000 on Form				
		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	(4)
1 2	Gross receipts				
2	Less Charitable				
3	contributions Gross income (line 1				
	minus line 2)				
4	Cash prizes				
5	Non-cash prizes				
6	Rent/facility costs				
. 7	Food and beverages				
8	Entertainment				
9	Other direct expenses .				
10	Direct expense summary Add lir	nes 4 through 9 in colum	an (d)	.	(
111	•	_	• •		,
art I	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		i tes lo foilii 990, Pa	rt IV, iiile 19, or repo	orted more than
		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	Gross revenue				
2	Cash prizes				
3	Non-cash prizes				
1 4					
4	Rent/racinty costs				
5	Other direct expenses				
6	Volunteer labor	┌ Yes		┌ Yes	
		Г №	ΓNο	Γ No	_
7	Direct expense summary Add line	s 2 through 5 in columr	n (d)		(
8	Net gaming income summary Com	ndine lines 1 and 7 in co	olumn (a)	<u> </u>	
	nter the state(s) in which the organiz				
Is	the organization licensed to operate	e gamıng actıvıtıes ın ea	ch of these states?		· Fyes Fno
b If	"No," Explain				
 a W	ere any of the organization's gaming				
	"Yes," Explain				- , res , NO

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza		<u> </u>	
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			_ No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization DLN: 93493142002263 OMB No 1545-0047

Employer identification number

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

Inspection

						36-2515281	
Part I General Infor	mation on Grants	and Assistance				•	
 Does the organization mathematics the selection criteria use Describe in Part IV the organization 	d to award the grants rganızatıon's procedu	or assistance? res for monitoring the us	e of grant funds in the	United States			
Form 990, Part	IV, line 21 for any	o Governments and recipient that receive 0) if additional space	d more than \$5,000	. Check this box if i	no one recipient rec	eived more than \$5,	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE LEGACY PROJECT 3018 N CLYBOURN AVE CHICAGO,IL 60618	27-3165505	501(C)(3)	10,000	0			SUPPORT ORGANIZATION'S MISSION
2 Enter total number of sec3 Enter total number of oth		-				.	1

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art 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
(1) SCHOLARSHIPS	38	220,000			

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

Identifier	Return Reference	Explanation
Procedures for monitoring		STUDENT MUST HAVE APPLIED FOR ADMISSION TO THE SCHOOL SCHOLARSHIPS ARE RESERVED FOR FULL-TIME
use of grant funds		STUDENTS THEY ARE AVAILABLE TO US OR INTERNATIONAL STUDENTS UNLESS OTHERWISE NOTED STUDENTS
		MUST MAINTAIN SATISFACTORY PROGRESS TO MAINTAIN ELIGIBILITY US STUDENTS MUST COMPLETE THE
		FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) ALL APPLICANTS MUST ALSO MAINTAIN A GPA OF 3 25
		IN PSYCHOLOGY COURSEWORK AT TIME OF APPLICATION SCHOLARSHIPS ARE PAID OVER TWO TERMS AND
		DIRECTLY APPLIED TO STUDENT ACCOUNTS

Compensation Information

DLN: 93493142002263

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

			36-2515281			
Pa	rt I Questions Regarding Compensation	on				
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the creimbursement orprovision of all the expenses des			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all		y			
	Compensation committee		Written employment contract			
	Independent compensation consultant	고	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	I, Section A, line $1 a$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	ental non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	e applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only me For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		No
9	If "Yes" to line 8, did the organization also follow th	he rebutt	able 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)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation			reported in prior Form 990 or Form 990-EZ	
(1) DR RAYMOND CROSSMAN	(I) (II)	400,075 0	200,038 0	0 0	81,401 0	10,049 0	691,563 0		
(2) JO BETH CUP	(I) (II)	161,688 0	25,000 0	0	20,461 0	13,321 0	220,470 0		
(3) JEFF GREEN	(I) (II)	194,885 0	25,000 0	0 0	15,267 0	9,704 0	244,856 0		
(4) LYNN TODMAN	(I) (II)	133,438 0	25,000 0	0 0	8,258 0	78 0	166,774 0		
(5) ANTHONY CHIMERA	(I) (II)	150,387 0	25,000 0		19,483 0	13,293 0	208,163 0		
(6) MARTHA CASAZZA	(I) (II)	183,820 0	25,000 0	0	21,640 0	460 0	230,920		
(7) WENDY PASZKIEWICZ	(I) (II)	106,642 0	25,000 0	0 0	14,065 0	10,661 0	156,368 0		
(8) MARK BRANSON	(I) (II)	131,533 0	0	0 0	7,117 0	13,132 0	151,782 0		
(9) CRAIG HINES	(I) (II)	155,895 0	0 0	0	15,352 0	6,311 0	177,558 0		

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
		DR CROSSMAN, PRESIDENT OF THE SCHOOL PARTICIPATES IN THE 457(F) DEFERRED COMPENSATION PLAN CONTRIBUTIONS TO THE PLAN TOTALED \$51,565 DURING FY 12
	Part I, Line 7	A LEADERSHIP TEAM BONUS IS BASED UPON THE ACHIEVEMENT OF CERTAIN FINANCIAL GOALS THE SCHOOL DETERMINES A 5 YEAR PERFORMANCE PLAN AND UPON ACHIEVING THE FINANCIAL GOALS SET FORTH IN THAT PLAN, EMPLOYEES ARE AWARDED A BONUS OF AN AMOUNT DETERMINED BY THE CEO ELIGIBILITY FOR RECEIPT OF BONUS AWARDS IS SIGNED OFF ON BY HR THE CEO'S BONUS IS DETERMINED BY THE BOARD USING COMPARABILITY DATA FROM SIMILAR ORGANIZATIONS UPON ACHIEVING FINANCIAL GOALS SET FORTH IN THE 5 YEAR PERFORMANCE PLAN

Schedule J (Form 990) 2011

Schedule K (Form 990)

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.

OMB No 1545-0047

2011

DLN: 93493142002263

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

ADL	LER SCHOOL OF PROFESSION	AL PSYCHOLOGY							3	 36-251	5281			
Pa	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pr	ice (f)	Description	of Purpose	(g) De	Defeased (h) O Behalf Issue		alfof	llf of finance	
									Yes	No	Yes	No	Yes	No
A	ILLINOIS FINANCE AUTHORITY	36-2779212		02-16-2010	5,100		FINANCING & REFINANCING EDUC FACILITY			X		X		Х
Pa	rt III Proceeds													
								В		С			D	
1	A mount of bonds retired					563,805	<u> </u>							
_2	A mount of bonds defeased					0								
_3	Total proceeds of issue					5,100,000)							
4	Gross proceeds in reserve fur					0	0							
5	Capitalized interest from proceeds					142,846								
6	Proceeds in refunding escrow					0								
7	Issuance costs from proceeds					101,000								
8	Credit enhancement from proceeds					0								
9	Working capital expenditures	from proceeds				0								
10	Capital expenditures from pro	ceeds				4,999,000								
11	Other spent proceeds					0								
12	Other unspent proceeds					0	,							
13	Year of substantial completion	n			20	10								
					Yes	No	Yes	No	Yes		No	Yes	<u>; </u>	No
14	Were the bonds issued as par	t of a current refund	ing issue?			Х								
15	Were the bonds issued as par	t of an advance refu	ndıng ıssue?			Х								
16	Has the final allocation of pro	ceeds been made?			Х									
17	Does the organization maintai allocation of proceeds?		nd records to sup	port the final	Х									
Pa	rt IIII Private Business U	Jse												
					A		+	В		C		1	D	
					Yes	No	Yes	No	Yes		No	Yes	<u>; </u>	No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Part III Private Business Use (Continued) A B C D Are there any management or service contracts that may result in private business use? A return the any management or service contracts that may result in private business use? If Yes No	Sche	edule K (Form 990) 2011									Page 2
Are there any management or service contracts that may result in private business use? No Yes No Ye								_			•
Are there any management or service contracts that may result in private business use? b. If Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c. Are there any research agreements that may result in private business use of bond-financed property? d. If Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? d. Enter the percentage of financed property used in a private business use by entities other than a section \$0.1(c)(3) organization or a state or local government					\	l	В		c		D
b If Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? d If Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ourside unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourside unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourside unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, another section of the section 501(c)(3) organization and provate business use as a result of unrelated trade or business activity carried on by your organization, another section of the section 501(c)(3) organization and provate business use as a result of of the section 501(c)(3) organization and provate business use as a result of of the section 501(c)(3) organization and provate business use as a result of of the section 501(c)(3) organization and provate business use as a result of of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization or a state or local government of the section 501(c)(3) organization o				Yes	No	Yes	No	Yes	No.	Yes	No
counsel to review any management or service contracts relating to the financed property? c. Are there any research agreements that may result in private business use of bond-financed property? d. If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? d. 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 our unrelated trade or business activity cerned on by your organization, another section of unrelated trade or business activity cerned on by your organization, another section of 501(c)(3) organization, or a state or local government of the financed property used in a private business use as a result of unrelated trade or business activity cerned on by your organization, another section of the financed property used in a private business use as a result of unrelated trade or business activity cerned on by your organization, another section of the financed property used in a private business use as a result of unrelated trade or business activity cerned on by your organization, another section of the financed property? The first the percentage of financed property used in a private business use as a result of unrelated trade or business activity cerned on by your organization, another section of the first	3a		business		x						
financed property? d If Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government of 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 of the property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section of the post o	b	counsel to review any management or service contracts relating to the fina									
counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ourselated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourselated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourselated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourselated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ourselated trade or business activity carried on by your organization, another section 0 % 501(c)(3) organization, or a state or local government ourselated or unrelated trade or business activity carried on by your organization, another section 0 % Factorized trade or business activity carried on by your organization, another section 0 % Factorized trade or business activity carried on by your organization, another section 0 % Factorized trade or business activity carried on by your organization, another section 0 % Factorized trade or business activity carried on by your organization, another section 0 % Factorized trade or business activity carried on by your organization of which is a result of the section of the provided for	С		e of bond-		х						
other than a section 501(c)(3) organization or a state or local government	d										
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? Part IV Arbitrage A B C D Yes No Yes No Yes No Yes No Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? X X X X X X X X X X X X X X X X X X X	4	, , , , , , , , , , , , , , , , , , , ,	′		0 %				1		'
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? Part IV Arbitrage A B C D Yes No	5	unrelated trade or business activity carried on by your organization, anothe			0 %						
Part IV Arbitrage A B C D Yes No No Yes No No Yes	6	Total of lines 4 and 5			0 %						
A B C D Yes No	7		sure the	Х							
Yes No Ye	Pai	rt IV Arbitrage									
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?			Α			В		С		D	
Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?			Yes	No	Yes	No	Y	'es	No	Yes	No
2 Is the bond issue a variable rate issue?	1	Penalty in Lieu of Arbitrage Rebate, been filed with respect to the		x							
	2	Is the bond issue a variable rate issue?	Х								

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?	×				
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		x			
	Name of provider					
С	Term of hedge					
d	Was the hedge superintegrated?					
e	Was a hedge terminated?					
4a	Were gross proceeds invested in a GIC?		X			
ь	Name of provider					
c	Term of GIC					
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?					
5	Were any gross proceeds invested beyond an available temporary period?		х			
6	Did the bond issue qualify for an exception to rebate?		х			

Part V Procedures To Undertake Corrective Action

Part VI Supplemental Information

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

Identifier Return Reference Explanation

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Inspection

Name of the organization ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY

Employer identification number

36-2515281

ldentifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	THE COMPLETE 990 IS REVIEWED BY THE BOARD PRIOR TO SUBMISSION THE TAX RETURN IS THEN FILED IN JUNE FOLLOWING REVIEW
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	NEW BOARD MEMBERS AND EMPLOYEES RECEIVE AN ORIENTATION BOOKLET CONTAINING THE SCHOOL'S CONFLICT OF INTEREST POLICY THE SCHOOL RELIES ON THE BOARD MEMBERS AND EMPLOYEES TO NOTIFY THE SCHOOL OF ANY CONFLICTS OF INTEREST THAT MAY ARISE DURING THEIR TERM AS A BOARD MEMBER OR EMPLOYMENT WITH THE SCHOOL ALL BOARD MEMBERS AND THE MEMBERS OF THE EXECUTIVE TEAM ANNUALLY COMPLETE A CONFLICT OF INTEREST FORM IF A POTENTIAL CONFLICT IS FOUND TO EXIST, THE SCHOOL WILL WORK WITH ITS LEGAL COUNSEL AND TAKE APPROPRIATE ACTION
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	COMPENSATION FOR THE ORGANIZATION'S CEO IS DETERMINED BY USE OF A COMPENSATION COMMITTEE, INDEPENDENT COMPENSATION CONSULTANT, WRITTEN EMPLOYMENT CONTRACT, COMPENSATION STUDY, AND APPROVAL OF THE BOARD THE BOARD THEN SETS THE CEO'S COMPENSATION, WHICH IS DOCUMENTED IN THE MINUTES
COMPENSATION OF OTHER EMPLOYEES	FORM 990, PART VI, LINE 15B	COMPENSATION FOR OTHER KEY EMPLOYEES TO THE ORGANIZATION IS DETERMINED BY THE SCHOOL'S PRESIDENT (CEO) USING A COMPENSATION STUDY OF SIMILAR SIZE/TYPE OF ORGANIZATIONS SALARIES FOR ALL EMPLOYEES, INCLUDING THE EXECUTIVE COMMITTEE MEMBERS, ARE DETERMINED ANNUALLY THE DECISIONS ARE MADE IN WRITING AND THE NEW SALARIES ARE EFFECTIVE EACH CALENDAR YEAR ON SEPTEMBER 1ST
Governing documents, conflict of interest policy and financial statements available to the public	Form 990, Part VI, Section C, Line 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
Other Expenses	Form 990, Part IX, Line 24	SUPPLIES - TOTAL EXPENSE 90079, PROGRAM SERVICE EXPENSE 80170, MANAGEMENT AND GENERAL EXPENSES 9008, FUNDRAISING EXPENSES 901, SHIPPING - TOTAL EXPENSE 63831, PROGRAM SERVICE EXPENSE 32851, MANAGEMENT AND GENERAL EXPENSES 26703, FUNDRAISING EXPENSES 4277, STUDENT EVENTS - TOTAL EXPENSE 87155, PROGRAM SERVICE EXPENSE 55410, MANAGEMENT AND GENERAL EXPENSES 21864, FUNDRAISING EXPENSES 9881, RECRUITMENT - TOTAL EXPENSE 189508, PROGRAM SERVICE EXPENSE 22165, MANAGEMENT AND GENERAL EXPENSES 167343, FUNDRAISING EXPENSES 0, BAD DEBT EXPENSE - TOTAL EXPENSE 73612, PROGRAM SERVICE EXPENSE 0, MANAGEMENT AND GENERAL EXPENSES 73612, FUNDRAISING EXPENSES 0, GRADUATION EXPENSE - TOTAL EXPENSE 118442, PROGRAM SERVICE EXPENSE 110895, MANAGEMENT AND GENERAL EXPENSES 7547, FUNDRAISING EXPENSES 0, DUES & MEMBERSHIPS - TOTAL EXPENSE 85840, PROGRAM SERVICE EXPENSE 39167, MANAGEMENT AND GENERAL EXPENSES 40663, FUNDRAISING EXPENSES 6010, PASSTHROUGH GRANTS - TOTAL EXPENSE 59754, PROGRAM SERVICE EXPENSE 59754, MANAGEMENT AND GENERAL EXPENSES , FUNDRAISING EXPENSES , BANK CHARGES - TOTAL EXPENSE 88705, PROGRAM SERVICE EXPENSE 78947, MANAGEMENT AND GENERAL EXPENSES 8871, FUNDRAISING EXPENSES 887, MISC - TOTAL EXPENSE 2036563, PROGRAM SERVICE EXPENSE 1781824, MANAGEMENT AND GENERAL EXPENSES 197980, FUNDRAISING EXPENSES 56759,
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS - 103944,

Software ID: 11000230
Software Version: v2011.1.0

EIN: 36-2515281

Name: ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

hours per week per w	(F) stimated unt of other pensation rom the nization and related anizations
week Week Week Week Week Individual frustee organization (W-2/1099-MISC) Individual frustee organization (W-2/1099-MISC) Former Former	om the nization and related anizations
	91,450
DR RAYMOND CROSSMAN PRESIDENT & BOARD MEMBER 40 00 X X X 600,113	
AUDREY PEEPLES BO ARD MEMBER 5 00 X 0 0	0
BERNARD SCHULMAN BOARD MEMBER 5 00 X	0
BETSY BRILL BOARD MEMBER 5 00 X 0 0	0
DAVID KREISCHER BOARD MEMBER 5 00 X 0 0	0
DAVID SINSKI BOARD MEMBER 5 00 X 0 0	0
ERIC WARNER BOARD MEMBER 5 00 X 0 0	0
HAROLD MOSAK BOARD MEMBER 10 00 X 71,999 0	0
JANET CAMPBELL BOARD MEMBER 5 00 X 0	0
JAVIER UBARRI BOARD MEMBER 5 00 X 0 0	0
JIM HOULIHAN BOARD MEMBER 5 00 X 0	0
JUAN SALGADO BOARD MEMBER 5 00 X 0 0	0
LINDSAY SETZER 5 00 X 0 0	0
MICHAEL GELLER BOARD MEMBER 5 00 X 0 0	0
RALPH DEWITT 5 00 X 0 0	0
SID MOHN BOARD MEMBER 5 00 X 0 0	0
VICKI CHOU BOARD VICE-CHAIR 5 00 X 0	0
WILLA TAYLOR BOARD MEMBER 5 00 X 0 0	0
WILLIAM GREAVES BOARD MEMBER 5 00 X 0	0
JEFF GREEN VP OF FINANCE & TECHNOLOGY 40 00 X 219,885 0	24,971
JO BETH CUP VP OF ADMINISTRATION 40 00 X 186,688 0	33,782
MARTHA CASAZZA VP ACADEMIC AFFAIRS 40 00 X 208,820 0	22,100
ANTHONY CHIMERA VP OF DEVELOPMENT 40 00 X 175,387 0	32,776
LYNN TODMAN DIR, INST ON SOCIAL EXCLUSION 40 00 X 158,438 0	8,336
COX ELIDA CRISTINA CORE FACULTY 40 00 X 121,491 0	18,230

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours		(ition that					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
CRAIG HINES DIRECTOR OF ADMISSIONS	40 00					х		155,895	0	21,663	
HITE ELINOR AVP OF HR	40 00					х		129,729	0	6,763	
MARK BRANSON AVP OF MARKETING	40 00					Х		131,533	0	20,249	
WENDY PASZKIEWICZ ASSOC VP OF ACADEMIC AFFAIRS	40 00					Х		131,642	0	24,726	