Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2014 Open to Public

Department of the Treasury Internal Revenue Service

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

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

Inspection

<u>A</u> F	or the	2014 calendar year, or tax year beginning JUL 1, 2014 and ending	JUN 30, 201	.5
	heck if pplicable	C Name of organization	D Employer iden	tification number
	¬ Addres	S MILE CHITCHES COUNCIL ON GLOBAL ADDATES		
	change Name		36-	-2181969
es 	_ change Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/		
	_ return Final	332 S MICHIGAN AVENUE 1100		2-726-3860
PR _	return/ termin- ated		G Gross receipts \$	17,843,434.
۳	Amend		H(a) Is this a grou	
_¦₩,	return Applic: tion		for subordina	
~;@L	pendin	SAME AS C ABOVE	H(b) Are all subordinat	
28 <u>-</u> 1	ax-exe	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	 _	h a list. (see instructions)
		e: > WWW.THECHICAGOCOUNCIL.ORG	H(c) Group exemp	
®K F	orm of	organization: X Corporation		M State of legal domicile: IL
Pa	rt I	Summary		
ø.	1	Bnefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$ $\overline{ ext{CHIO}}$		
Š	;	AFFAIRS IS AN INDEPENDENT, NONPARTISAN ORGAN		
& Governance	2	Check this box if the organization discontinued its operations or disposed of i	more than 25% of its net	
ŏ.	3	Number of voting members of the governing body (Part VI, line 1a)	,	3 82
ජ	4	Number of independent voting members of the governing body (Part VI, line 1b)	\	4 81
es	5	Total number of individuals employed in calendar year 2014 (Part V. line 2a) NVEV	7있 ·	5 75
Activities	6	Total number of volunteers (estimate if necessary)	 ŏ · · ·	6 100
Act		Total unrelated business revenue from Part VIII, column (C), line 12 2016	``~`` F	7a 0.
	Ь	Total unrelated business revenue from Part VIII, column (C), line 12 2016 Net unrelated business taxable income from Form 990-T, line 34 MAY 0 2 2016	استلسد	
			Prior Year 10,471,843	Current Year 15, 314, 138.
<u>e</u>	ı	Contributions and grants (Part VIII, line 1h)	686,630	
Revenue	I	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	258,204	
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
	I	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,416,677	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	42,500	
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.
ø	45	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,592,034	5,852,646.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	(0.
je D	Ь	Total fundraising expenses (Part IX, column (D), line 25) \(\bigcup \)		
யி	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,171,224	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,805,758	
	19	Revenue less expenses. Subtract line 18 from line 12	610,919	2,195,705.
Net Assets or			Beginning of Current Ye	
Sets	20	Total assets (Part X, line 16)	20,787,905	
E	21	Total liabilities (Part X, line 26)	1,004,757	
چ	22	Net assets or fund balances. Subtract line 21 from line 20	19,783,148	21,756,924.
	art II	1 T		
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and st	•	my knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	21-16
<u>~</u>		Signature of officer		
Sig		Leah Joy Zell Treas		
Her	E .	Type or print name and title		
		Print/Type preparer's name Preparer's/signs		
Paid		JEFF SCHROEDER		
	arer	Firm's name SASSETTI LLC		
	Only	Firm's address 6611 NORTH AVENUE		
	-			

May the IRS discuss this return with the preparer shown above? (see instruc 432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the sep

SEE SCHEDULE O FOR ORGANIZATION MI

OAK PARK, IL 60302

	990 (2014) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-2181969 Page 2
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE CHICAGO COUNCIL ON GLOBAL AFFAIRS IS AN INDEPENDENT, NONPARTISAN
	ORGANIZATION THAT PROVIDES INSIGHT AND INFLUENCES THE PUBLIC
	DISCOURSE ON CRITICAL GLOBAL ISSUES. WE CONVENE LEADING GLOBAL
	VOICES AND CONDUCT INDEPENDENT RESEARCH TO BRING CLARITY AND OFFER
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	F 03C 034
70	(Code) (Expenses \$
	LEADERS, POLICYMAKERS, BUSINESS EXECUTIVES, JOURNALISTS, AND OTHER
	LEADING POLICY EXPERTS AT EVENTS ILLUMINATING GLOBAL ISSUES AND TRENDS.
	4 400 700
4b	(Code) (Expenses \$4, 499, 780. including grants of \$30,000.) (Revenue \$508,611.
	RESEARCH: INDEPENDENT RESEARCH AND ANALYSIS BY EXPERTS WHO GO BEYOND
	TRADITIONAL THINKING ON FOREIGN AFFAIRS TO MAKE NEW CONNECTIONS FOR
	POLICYMAKERS AND THE PUBLIC ON A RANGE OF GLOBAL ISSUES.
4c	(Code) (Expenses \$1, 130, 910 • including grants of \$) (Revenue \$)
	PROGRAM RELATED SERVICES: MARKETING AND COMMUNICATIONS, DATABASE AND
	REGISTRATION.
	Other program consecs (Decombo in Schodulo O.)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► 11,566,714.
40000	Form 990 (2014

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
_	If "Yes," complete Schedule A	1_	X	├
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Α_	 -
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
4	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		1
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۳		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		<u>├</u> ▔
_	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			ł
	If "Yes," complete Schedule D. Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	į
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			ł
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	<u> </u>	-
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ļ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from great making, fundamental business.	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		\vdash
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u> </u>		 -
.,		16	х	
17	or for foreign individuals / if "Yes," complete Schedule F, Parts III and IV			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		T
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	_ <u></u> _	_=	<u> </u>
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			<u> </u>
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	x	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	<u> </u>	<u> </u>	l
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
				X
_	Schedule K. If "No", go to line 25a	24a	├──	
b	5 , present the sum of the su	24b	<u> </u>	-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	L	X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L. Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		ľ	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	9		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a	2000	X
b		28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C		00.		x
~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			l
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			 -
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
w	Note. All Form 990 filers are required to complete Schedule O	90	х	
	Note, Anni Gin 330 nicis are required to complete ochequie 0	38		(2014)
		rorm	33U ((2014)

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	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 38		103	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1 1		
•	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 75			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	-
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ا ۔ ا		х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-	┢┻
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			37
	Was the organization a party to a prohibited tax shelter transaction at any time duning the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b_		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as chantable contributions?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			<u> </u>
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	L
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
ď	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		\vdash
_	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	- I		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1 1		
	amounts due or received from them.)	-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\vdash		L
а	is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans]		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 82 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 81 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶IL 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ROBERT CORDES - 312-821-7530 SUITE 1100. CHICAGO 60604 332 s. MICHIGAN AVENUE, Form 990 (2014) 432008 11-07-14

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	ído	not c	Pos heck i			one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss per	rson ı	s both	n an	compensation	compensation	amount of
	week				T	T 3	T	from	from related	other
	(list any hours for	ndividual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
-	related	ie or	stee			Highest compensated employee		(W-2/1099-MISC)	(** 2 1000 111100)	organization
	organizations	trust	nstitutional trustee		Key employee	ad unc		(and related
	below	Adual	tution	19:	em pk	lest co	je j			organizations
	line)	皇	ııstı	Officer	Key	를	P.			
(1) IVO DAADLER	40.00								_	
PRESIDENT	0.00	X		X				441,800.	0.	8,567.
(2) LESTER CROWN	2.00	1							_	_
CHAIRMAN		X	_	X	L			0.	0.	0.
(3) DOUGLAS A. DOETSCH	2.00	1						_		_
SECRETARY		X		Х	ļ	ļ		0.	0.	0.
(4) JOHN F. MANLEY	2.00									
VICE CHAIRMAN		Х		Х	_	-		0.	0.	0.
(5) MICHAEL H. MOSKOW	2.00							<u> </u>		
VICE CHAIRMAN		X		Х	_	<u> </u>	_	0.	0.	0.
(6) SHIRLEY WELSH RYAN	2.00									
VICE CHAIRMAN	2 00	X		Х	-	-	-	0.	0.	0.
(7) GLENN F. TILTON	2.00			v					0	_
EXECUTIVE VICE CHAIRMAN	2 00	Х	-	X	-	├	┝	0.	0.	0.
(8) LEAH JOY ZELL TREASURER	2.00	x		x				0.	0	_
(9) JOHN DEBLASIO	1.00	^	\vdash	Λ	-	_	\vdash	0.	0.	0.
BOARD MEMBER	1.00	x					ĺ	0.	0.	0
(10) ILENE S. GORDON	1.00	^	-		<u> </u>		├─	•	0.	0.
BOARD MEMBER	1.00	x	ŀ					0.	0.	0.
(11) SCOTT GORDON	1.00	^			\vdash		\vdash	0.		
BOARD MEMBER	1.00	x						0.	0.	0.
(12) DAVID W. JOHNSON	1.00					 	-	•	<u> </u>	
BOARD MEMBER	2100	x						0.	0.	0.
(13) JAMES C. KENNY	1.00	==				\vdash				
BOARD MEMBER		x						0.	0.	0.
(14) EBOO PATEL	1.00	Ħ			_	1	 			
BOARD MEMBER		х						0.	0.	0.
(15) FRANK S. PTAK	1.00	Ī	П							
BOARD MEMBER		х						0.	0.	0.
(16) SUNIL M. SANGHVI	1.00						l "			
BOARD MEMBER		х						0.	0.	0.
(17) FRED G. STEINGRABER	1.00									
BOARD MEMBER		Х						0.	0.	0.

432007 11-07-14

Form 990 (2014) THE CHICA	AGO COUN	<u>ICI</u>	L	ON	<u> </u>	LO	<u>BA</u>	L AFFAIRS	36-21	81	<u>969</u>	P	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	1 Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(C)						(D)	(E)			(F)		
Name and title	Name and title Average		Position do not check more than one				na	Reportable	Reportable		Estimated		
	hours per	box	, unle	ss per	rson ı	s both	an	compensation	compensation	า	amount of		
	week	H	cerar	nd a di	recto	r/trust	ee)	from	from related	elated d		other	
	(list any	rector						the	organizations			pensa	
	hours for related	P	쁑			ate ge		organization	(W-2/1099-MIS	C)		om th	
	organizations	ustee	trust		, e	en		(W-2/1099-MISC)			_	anızat d relat	
	below	lual fr	foral		go	g st	_					u reiai anizati	
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	ōr me				Uiga	ai iiZati	10/15
(18) EDUARDO M ALVAREZ	1.00	<u> </u>	┢	Ĭ	Ť	۳							
BOARD MEMBER		X			ŀ			0.		0.			0.
(19) ANTHONY K. ANDERSON	1.00	<u> </u>				H							
BOARD MEMBER		x						0.		0.			0.
(20) JOSE ARMARIO	1.00			H	_	╀╌┤							
BOARD MEMBER		x						0.		0.			0.
(21) HENRY S. BIENEN	1.00	<u> </u>		\vdash					 · · ·	•			
BOARD MEMBER		x						0.		0.			0.
(22) GREG BROWN	1.00					\vdash				-			
BOARD MEMBER		x						0.		0.			0.
(23) STEPHEN M. CHIPMAN	1.00			П									
BOARD MEMBER		x						0.		0.			0.
(24) FRANCIE COMER	1.00					$\vdash \dashv$							
BOARD MEMBER		x						0.		0.			0.
(25) DONALD A. COOKE	1.00		_	Н		H							
BOARD MEMBER		х						0.		0.			0.
(26) RICHARD M. COOPER	1.00			М							_		
BOARD MEMBER		x						0.		0.			0.
1b Sub-total	·		-			<u> </u>	_	441,800.		0.		8.5	67.
c Total from continuation sheets to Part VII	Section A					ï		1,711,088.		0.			24.
d Total (add lines 1b and 1c)	,,				•	i		2,152,888.		0.			91.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) who	o re		· · · · · · · · · · · · · · · · · · ·	لنت			
compensation from the organization						,		, , , , , , , , , , , , , , , , , , , ,	oco or roportable				12
										-		Yes	No
3 Did the organization list any former officer,	director, or tru	ıstee	e. ke	v en	olar	vee.	or h	nighest compensated en	nolovee on	1			
line 1a? If "Yes," complete Schedule J for si			,	,		, ,					3	X	
4 For any individual listed on line 1a, is the su		е со	mpe	ensat	tion	and	oth	er compensation from the	ne organization	l			
and related organizations greater than \$150									<u>g</u>	ľ	4	Х	
5 Did any person listed on line 1a receive or a									lual for services	- 1			
rendered to the organization? If "Yes." com					-					ı	5		х
Section B. Independent Contractors													•
Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ntra	ctor	s th	at received more than \$	100,000 of compe	ensat	ion fro	om	
the organization Report compensation for t													
(A)								(B)			(0)	
Name and business							_	Description of s	ervices	С	ompe		n
ROGER THUROW, 5005 GARFIE	LD STRE	ET	,	NW	,		4	STIPEND: NON-	RESIDENT				
WASHINGTON, DC 20016								SENIOR FELLOV	N		<u> 11</u>	4,1	67.
							T						

ROGER THUROW, 5005 GARFIELD STREET, NW,	STIPEND: NON-RESIDENT	
WASHINGTON, DC 20016	SENIOR FELLOW	114,167.
		

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

\$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS

L	II V		Check if Schedule O cont		or note to any line	e in this Part VIII			
				<u> </u>	S. Hoto to ally III.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts st	1	а	Federated campaigns	1a					
rar		b	Membership dues	1b	2,818,449.				
O E		С	Fundraising events	. 1c	2,247,484.				
# 1		d	Related organizations	1d					
S,E	,	e	Government grants (contribute	ons) 1e					
<u> </u>		f	All other contributions, gifts, gran	ts, and					
a g			similar amounts not included above	ve 1f	10,248,205.		ľ		
<u></u>		g	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts		<u>h</u>	Total. Add lines 1a-1f			15,314,138.			
					Business Code				
e	2	а	ADMISSION FEES		900099	495,777.	495,777.		
ه ځ]	b	LEADERSHIP STUDY MISSIC	ON	900099	480,866.	480,866.		
Program Service Revenue		С							
a T		d							
Вп	1 .	е							
<u>~</u>	'	f	All other program service reve	nue					
		g	Total. Add lines 2a-2f			976,643.			
	3		Investment income (including	dividends, inter	est, and				
			other similar amounts)		▶	375,167.			375,167.
	4		Income from investment of tax	c-exempt bond p	oroceeds >				
	5		Royalties						
	İ			(i) Real	(ii) Personal				
			Gross rents						
	l .		Less rental expenses		 				
	I		Rental income or (loss)		<u> </u>	-		_	
	I		Net rental income or (loss)		<u> </u>	<u>-</u>			
	7 :	а	Gross amount from sales of	(i) Securities	(ii) Other				
		_	assets other than inventory	839,784	\				
	'	b	Less: cost or other basis	056 110					
			and sales expenses	956,110, <116,326.>					
	ł		Gain or (loss)	Z110,320.5	<u>'</u>	<116,326.>		· · · · · · · · · · · · · · · · · · ·	116 326
	1		Net gain or (loss) .						<116,326.>
e	8	а	Gross income from fundraising including \$ 2,247	•	ł				
Ve I	1		contributions reported on line						
æ	ŀ		Part IV, line 18		337,702.				
Other Revenue	Ι,	h		a	222 222		:		
8			Less: direct expenses Net income or (loss) from fund		•	0.			
			Gross income from gaming ac	•					
			Part IV, line 19		.]				
	١,	b	Less direct expenses	. e	i I				
			Net income or (loss) from gam	• •					
			Gross sales of inventory, less	_					·
		_	and allowances						
	۱ ۱	b	Less: cost of goods sold						
			Net income or (loss) from sales		•				
		_	Miscellaneous Revenue		Business Code				
	11 :	а							
		b							
		С							
		d	All other revenue						
	(е	Total. Add lines 11a-11d		. ▶				
			Total revenue. See instructions.		<u> </u>	16,549,622.	976,643.	0.	258,841.
43200 11-07	ษ - 14								Form 990 (2014)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21							
2	Grants and other assistance to domestic							
	ındıvıduals. See Part IV, line 22							
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign							
	individuals. See Part IV, lines 15 and 16	30,000.	30,000.					
4	Benefits paid to or for members				 			
5	Compensation of current officers, directors,	1 220 060	000 722	200 221	001 014			
_	trustees, and key employees	1,330,968.	899,733.	209,321.	221,914.			
6	Compensation not included above, to disqualified							
	persons (as defined under section 4958(f)(1)) and							
_	persons described in section 4958(c)(3)(B)	2 674 220	2 620 674	444 205	601 440			
7	Other salaries and wages	3,674,328.	2,628,674.	444,205.	601,449.			
8	Pension plan accruals and contributions (include	204,568.	149,114.	22,772.	22 602			
•	section 401(k) and 403(b) employer contributions)		238,331.		32,682.			
9	Other employee benefits	326,963. 315,819.	230,208.	36,397. 35,156.	52,235. 50,455.			
10	Payroll taxes	213,013.	230,200.	33,130.	50,455.			
11	Fees for services (non-employees):							
a		48,454.	35,419.	10,000.	3,035.			
b	Legal	16,000.	33,419.	16,000.	3,033.			
4	Lobbying	10,000.		10,000.				
u	Professional fundraising services. See Part IV, line 17				<u> </u>			
f	Investment management fees	16,933.		16,933.				
	Other. (If line 11g amount exceeds 10% of line 25,	20,555		10,555.				
9	column (A) amount, list line 11g expenses on Sch O.)	1,760,250.	1,726,087.	32,012.	2,151.			
12	Advertising and promotion	481,862.	444,021.	691.	37,150.			
13	Office expenses	405,175.	224,929.	149,394.	30,852.			
14	Information technology	310,665.	155,578.	155,087.				
15	Royalties		,					
16	Occupancy	506,014.	362,741.	65,706.	77,567.			
17	Travel	1,237,659.	1,190,584.	41,100.	5,975.			
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	2,967,630.	2,882,275.	73,556.	11,799.			
20	Interest .	92.		92.				
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	232,211.		232,211.				
23	Insurance	16,420.		16,420.				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)							
а	BAD DEBT EXPENSE	148,793.	127,699.		21,094.			
b	MISCELLANEOUS	76,960.	60,890.	14,319.	1,751.			
С	TEMPORARY HELP	73,689.	65,315.	0.	8,374.			
d	PHOTOGRAPHY	70,233.	67,854.	1,714.	665.			
е	All other expenses	102,231.	47,262.	14,536.	40,433.			
<u>25</u>	Total functional expenses. Add lines 1 through 24e	14,353,917.	11,566,714.	1,587,622.	1,199,581.			
26	Joint costs. Complete this line only if the organization	-						
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.			ļ				
	Check here if following SOP 98-2 (ASC 958-720)				Earm 990 (2014)			

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash - non-interest-bearing 1 3,370,269. 6,278,681. Savings and temporary cash investments 2 5,587,046. 5,416,801. 3 3 Pledges and grants receivable, net 81,569. 160,663. Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 8 Inventories for sale or use 247,411. 132,234. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 1,973,036. basis Complete Part VI of Schedule D 10a 925,487. 542,056. 1,047,549. 10c b Less: accumulated depreciation 10b 11 Investments - publicly traded securities 11 10,959,554. 10,936,033. 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 20,787,905. 23,971,961. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 2,213,922. 960,845. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 30,811. 1,115. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 13,101. 0. 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 1,004,757. 2,215,037. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 11,423,200. 14,360,982. Unrestricted net assets 6,651,355. 7,581,642. 28 28 Temporarily restricted net assets 778,306. 744,587. 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 19,783,148. <u>21,756,924.</u> 33 33 Total net assets or fund balances 23,971,961. 20,787,905. Total liabilities and net assets/fund balances

Form	990 (2014) THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	36-2	181	969	Pag	_{re} 12
Par	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	16	<u>, 54</u>	9,6	22.
2	Total expenses (must equal Part IX, column (A), line 25)	2			3,9:	
3	Revenue less expenses. Subtract line 2 from line 1	3	2	,19	5,70	05.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19	,78	3,14	48.
5	Net unrealized gains (losses) on investments	5	<	221	,92	9.>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8	_			
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	21	,75	6,9	24.
Pai	rt XII Financial Statements and Reporting	·				
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_ [2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		[2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O	[
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt				
	Act and OMB Circular A-133?		[3a]	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

432012

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number

36-2181969 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 X An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) (see instructions)) Yes

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Pa	art II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) and	170(b)(1)(A)(v	
_	(Complete only if you checke	-					-
	fails to qualify under the tests	listed below, plea	se complete Part	III.)			
Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and		1				
	membership fees received. (Do not	i					
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities		•				
	furnished by a governmental unit to				1		! !
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions					İ	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included		1			1	
	on line 1 that exceeds 2% of the					1	
	amount shown on line 11,					1	
	column (f)					1	
	Public support. Subtract line 5 from line 4					1	
	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·	T	T	T	Т	T
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4			 			
8	Gross income from interest,					ł	
	dividends, payments received on						
	securities loans, rents, royalties			1			
۵	and income from similar sources Net income from unrelated business			<u> </u>			
9							
	activities, whether or not the business is regularly carned on			į			
40	Other income. Do not include gain					 	-
10	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instruction	ons)	<u> </u>		12	
	First five years. If the Form 990 is for	•	•	rd, fourth. or fifth t	ax vear as a sectio		
	organization, check this box and stop	•	, ,		,		▶[]
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2014 (I	ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	%
16	a 33 1/3% support test - 2014. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons
ı	33 1/3% support test - 2013. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	fies as a publicly	supported organiz	ation			▶□
178	a 10% -facts-and-circumstances test	- 2014. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and stop	here. Explain ın Pa	art VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		. ▶□
ı	o 10% -facts-and-circumstances test	- 2013. If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	heck this box and	stop here. Explai	n in Part VI how the	<u></u> _
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	nızation .	ightharpoons

Schedule A (Form 990 or 990-EZ) 2014

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

(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 It.)

Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	8032157.	9781023.	11801001.	9378204.	15651840.	54644225.
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the				_		
	organization's tax-exempt purpose	2006629.	1513735.	725,800.	686,630.	976,643.	5909437.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	4 - 4					
6	Total. Add lines 1 through 5	10038786.	11294758.	12526801.	10064834.	16628483.	$605536\overline{62}$.
7a	Amounts included on lines 1, 2, and						<u> </u>
	3 received from disqualified persons	1995369.	2199161.	2509007.	1935241.	2850033.	11488811.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that	ĺ					
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
C	Add lines 7a and 7b	1995369.	2199161.	2509007.	1935241.		11488811.
	Public support (Subtract line 7c from line 6)		2 Te E		1 - 124 1	2 (49064851.
	tion B. Total Support	. ,	T				
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
-		μυυ38/86.	11294758.	<u> 12526801.</u>	тооб4834.	16628483.	60553662.
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	066 555			4		
	and income from similar sources	269,398.	273,956.	866,632.	<u>15259</u> 73.	36,912.	2972871.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	060 300	000 000	0.5.5.5.5	15050==	26.22	0000001
	Add lines 10a and 10b	269,398.	273,956.	866,632.	1525973.	36,912.	2972871.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
46	regularly carned on						
12	Other income Do not include gain or loss from the sale of capital					İ	
	assets (Explain in Part VI)	10200101	11566511	10000100	1150000	1.5.5.5.5.5	50.50.5
			11568714.				
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth tax	x year as a section	501(c)(3) organiza	ition,
<u> </u>	check this box and stop here			· · · · · · · · · · · · · · · · · · ·			. ▶□
	tion C. Computation of Publi						
	Public support percentage for 2014 (li	• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		15	77.24 %
	Public support percentage from 2013				<u> </u>	16	74.10 %
	tion D. Computation of Inves						4 60
	Investment income percentage for 20		•	e 13, column (f))		17	4.68 %
	Investment income percentage from 2	•	•			18	5.70 %
19a	33 1/3% support tests - 2014. If the						
	more than 33 1/3%, check this box ar				-		$\triangleright X$
b	33 1/3% support tests - 2013. If the						nd
	line 18 is not more than 33 1/3%, check						. ▶□
20	Private foundation. If the organizatio	n did not check a t	box on line 14, 19a	i, or 19b, check thi	s box and see inst	ructions	

Yes No

Part IV | Supporting Organizations

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

Section A. All Supp	orting Organizations
---------------------	----------------------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and *if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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10b		

	dule A (Form 990 or 990-EZ) 2014 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 36-21	8196	9 P	age 5
Pa	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	<u> </u>
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		1	
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			L
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	İ		
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	İ		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instr	uctions)		
2	Activities Test. Answer (a) and (b) below.	ucaons).	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	Γ		
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes.			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
U	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	· •			
	reasons for the organization's position that its supported organization(s) would have engaged in these	25	-	
3	activities but for the organization's involvement.	2b		— ¬
	Parent of Supported Organizations Answer (a) and (b) below Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	[
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	20	 	
L	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
D		- OL	$\vdash \vdash \vdash$	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	لـــــا	

Sche	dule A (Form 990 or 990-EZ) 2014 THE CHICAGO COUNCIL ON	GLOBA	L AFFAIRS	36-2181969 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on l	Nov. 20, 1970. See in	nstructions. All
	other Type III non-functionally integrated supporting organizations must c	omplete Se	ctions A through E.	
Secti	ion A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
<u>b</u>	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		-
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		-	· · · · · · · · · · · · · · · · · · ·
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally-integrate	ed Type III supporting of	organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Scheo	fule A (Form 990 or 990 EZ) 2014 THE CHICAGO COLOR Type III Non-Functionally Integrated 509	OUNCIL ON GLOBA		6-2181969 Page 7
Section	on D - Distributions	(<u>-)(0) 01pp09 0.91</u>	(Continued)	Current Year
	Amounts paid to supported organizations to accomplish exe	mot nurnoses		- Ourient Tour
	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity	рапроссо ст саррания		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (pnor IRS approval required)		,	
	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6			
	Distributions to attentive supported organizations to which the	ne organization is responsive		
•	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
	Line 8 amount divided by Line 9 amount			
_	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
<u>i</u>	Carryover from 2009 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3 _j			
	and 4c			
8	Breakdown of line 7:			
a_				
b				
С				
d	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990-EZ) 2014 THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	36-2181969 Page 8
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or Also complete this part for any additional information (See instructions)	17b; and Part III, line 12.
	Asso complete this part for any additional information (See instructions)	
		<u></u>
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number 36-2181969

Pa	organizations Maintaining Donor Advised F		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	ng that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's excl	_	Yes No
6	Did the organization inform all grantees, donors, and donor advis	-	
	for charitable purposes and not for the benefit of the donor or do		
	impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the organization	zation answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (or		
	Preservation of land for public use (e.g., recreation or educ	ation) Preservation of a his	torically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		. 2b
С	Number of conservation easements on a certified historic structu	re included in (a)	2c
d	Number of conservation easements included in (c) acquired after	8/17/06, and not on a historic structi	ure
	listed in the National Register		. 2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the	e organization during the tax
	year >		
4	Number of states where property subject to conservation easeme	ent is located >	
5	Does the organization have a written policy regarding the periodic	monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holi	ds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and	enforcing conservation easements d	uring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and enfo	rcing conservation easements during	the year > \$
8	Does each conservation easement reported on line 2(d) above sa	tisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		. Yes No
9	In Part XIII, describe how the organization reports conservation e		
	include, if applicable, the text of the footnote to the organization's	s financial statements that describes	the organization's accounting for
<u> </u>	conservation easements.	 	
Pai	Organizations Maintaining Collections of Ar		ther Similar Assets.
	Complete if the organization answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·	
1a	If the organization elected, as permitted under SFAS 116 (ASC 98)	•	
	historical treasures, or other similar assets held for public exhibiti		nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes		
ь	, , , , , , , , , , , , , , , , , , , ,		
	treasures, or other similar assets held for public exhibition, educa	tion, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasur		ll gain, provide
	the following amounts required to be reported under SFAS 116 (A	ASC 958) relating to these items:	
а	• • •		\$
b	Assets included in Form 990, Part X	·	> \$

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

Schedule D (Form 990) 2014

		CAGO COUNCI				36-21	81969 P	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or O	ther Simila	r Assets	(continued)	
3	Using the organization's acquisition, accession							;
	(check all that apply)							
а	Public exhibition	d	Loan or excl	nange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co					se in Part	XIII.	
5	During the year, did the organization solicit or		·	•	mılar assets			_
D.	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arrang	jements. Comple	ete if the organization	n answered "Yes	s" to Form 990	, Part IV, I	ne 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contributions	or other assets	not included	_		٦
	on Form 990, Part X?					L_	」Yes ∟_	_ No
D	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table.			I		
_	Deciment belows				<u> </u>		Amount	
	Beginning balance				1c			
	Additions during the year	•	• • •		1d			
•	Distributions during the year Ending balance				. <u>1e</u>			
) 22	Did the organization include an amount on Fo	 vm 000 Part V line	21 for occrow or ou	stadial agogunt l	. [1f]	L	Yes	7 м-
	If "Yes," explain the arrangement in Part XIII.				•	. L	」 tes	JNo ⊓
Par								
		(a) Current year	(b) Pnor year	(c) Two years ba		vears hack	(e) Four years	hack
1a	Beginning of year balance	10,666,518.	9,574,346.	9,028,36		87,217.	8,651,	
b	Contributions	988,170.		10,00				301.
c	Net investment earnings, gains, and losses	27,492.	1,458,955.	865,45		0,976.>	1,253,	
d	Grants or scholarships					·		
	Other expenditures for facilities			-		-		
	and programs	34,575.	347,827.	317,17	76. 5	97,986.	414,	828.
f	Administrative expenses	16,233.	18,956.	12,29	96.	9,891.	1,	856.
g	End of year balance	11,631,372.	10,666,518.	9,574,34		28,364.	9,687,	217.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)	held as			-	
а	Board designated or quasi-endowment	94.00	%					
b	Permanent endowment ► 6.00	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	d equal 100%.						
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held an	d administered f	or the organiza	ation		
	by.						Yes	No
	(i) unrelated organizations			-			3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	listed as required or	Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		vment funds.					
Par								
	Complete if the organization answered	I "Yes" to Form 990,	Part IV, line 11a. Se	e Form 990, Par	t X, line 10.			
	Description of property	(a) Cost or of basis (investm	` '		(c) Accumulate depreciation		(d) Book valu	е
1a	Land			<u> </u>	-	1		
b	Buildings						·	
С	Leasehold improvements		16	5,818.	93,0	80.	72,7	38.
d	Equipment		1,80	7,218.	832,4	07.	974,8	
<u>е</u>	Other							
Total	Add lines 1a through 1e (Column (d) must ed	gual Form 990, Part)	C. column (B). Jine 10	Oc.)			1,047,5	<u>49.</u>

Schedule D (Form 990) 2014

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

	rt XI Reconciliation of Revenue per Audited Financial Stateme		<u> 30-</u>	2181969 Page 4
Pa			turn.	
_	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		_	16 665 205
1	Total revenue, gains, and other support per audited financial statements		1	16,665,395.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_{2a} <221,929.>		
a b	Net unrealized gains (losses) on investments Donated services and use of facilities		ł	
_	•	26	1	
c d	Recoveries of prior year grants Other (Describe in Part XIII.)	2c 337,702.	ł	
e	Add lines 2a through 2d	2d 337,702.	-	115,773.
3	Subtract line 2e from line 1		2e 3	16,549,622.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	· · · ·	3	10,545,022.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1	
c	Add lines 4a and 4b	[40]	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	•	5	16,549,622.
_	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per F		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	14,691,619.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	· · · · ·		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	1	
С	Other losses	2c	1	
d	Other (Describe in Part XIII.)	2d 337,702.	1	
е	Add lines 2a through 2d		2e	337,702.
3	Subtract line 2e from line 1		3	14,353,917.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b]	
С	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	14,353,917.
Pa	rt XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part		, Part	X, line 2, Part XI,
lines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional information.		
		·		
	,			
PAI	RT V, LINE 4:			
m^				
10	PROVIDE FUNDING FOR BOTH CURRENT AND FUTUE	RE PROGRAMS AND I	NIT	IATIVES.
ר א ד	om v itare 9.			
PAI	RT X, LINE 2:			
mu	COUNCIL TO EVENDE EDON INCOME MAYER INDEED	GROWTON FOILON	3 \ .	O.D. MILLS
IHI	COUNCIL IS EXEMPT FROM INCOME TAXES UNDER	SECTION SUI(C)(3)	OF THE
TATO	PEDNAT DEVENUE CODE MUE COINCILLE MANAGEME	NA DELLEMAN	mit.	
TIA	ERNAL REVENUE CODE. THE COUNCIL'S MANAGEME	INT BELLEVES THAT	TH.	ERE WAS NO
TTATE	DELYMEN DISCUSSES THOOMS NOT INTOSTRUCTURE	OCCUPANTA HOD WITH	3773	AD ELEBED
OM	RELATED BUSINESS INCOME NOR UNCERTAIN TAX F	OSITIONS FOR THE	YE	AR ENDED
TTT	TE 30 2015 AND ACCORDINGLY MUR EINANGIA	CM3 MEMENTS COM	3 T37	NO
0 01	WE 30, 2015, AND ACCORDINGLY, THE FINANCIAL	STATEMENTS CONT.	AIN	NO
מם מ	WITCIONS FOR INCOME MAYES MUR COINIGIT IS ES	DA OOO DEWINA	-	
בתנ	OVISIONS FOR INCOME TAXES. THE COUNCIL'S FO	YETUKN U.	r	
OPC	ANTZATION RYRMDT FROM THOOMS TAY TO OTHER	יריים יויריים פעא אידאנא איד ריי	יכו זא	יסד קעת ע
ORC	SANIZATION EXEMPT FROM INCOME TAX, IS SUBJE	CI IO EXAMINATIO	N B	THE IKS,
GEN	ERALLY FOR THREE YEARS AFTER IT IS FILED.			
التدب	TOTAL TOTAL TENTO AFTER IT IS FILLD.			

Schedule D (Form 990) 2014	THE CHIC	CAGO COUNCIL	ON GLOBAL	AFFAIRS	36-2181969 Page 5
Schedule D (Form 990) 2014 Part XIII Supplemental Infor	mation _{(contin}	ued)			
PART XI, LINE 2D -					
LESS DIRECT COST OF	CDECTAL.	EVENIDO			227 702
BESS DIRECT COST OF	SPECIAL	FARMIR			337,702.
					· —· · · · · · · · · · · · · · · · · ·
PART XII, LINE 2D -	OTHER AD	JUSTMENTS:			
LESS DIRECT COST OF	SPECIAL	EVENTS			337,702.
					
					
				 ·	
					
· · · · · · · · · · · · · · · · · · ·				·	
-		·			
					
		-			
					·· · · · · · · · · · · · · · · · · · ·
					•
					<u> </u>
					

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

Employer identification number

THI	CHICAGO COU				36-218196	9
Pa	rt I General Infor	rmation on A	ctivities Out	side the United States. Comple	ete if the organization answered "Y	es" on
	Form 990, Part IV	/, line 14b.				
1		-		ds to substantiate the amount of its gra		
	the grantees' eligibility for	or the grants or a	ssistance, and t	the selection criteria used to award the	grants or assistance?	Yes X No
2	For grantmakers. Desc United States	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance outsi	ide the
3	Activities per Region. (TI	he following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
JAPA KORE	N AND SOUTH	0	0	PROGRAM SERVICES	LEADERSHIP STUDY MISSION	584,179.
						
					1	
_						
	Sub-total	0	0			584,179.
	Total from continuation sheets to Part I Totals (add lines 3a	0	0			0.
	and 3b)	0	0			584,179.

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

Schedule F (Form 990) 2014

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
	recipient who received more than \$5,000. Part II can be duplicated if additional space is n	eeded.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of	recipient organization	ns listed above that are r	ecognized as charities by the f	oreign country,	recognized as tax-exe	empt by		-

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt b
	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3	Enter total			organizations		
3	Enter total	number or	otner	organizations	Ωr	entities

Schedule F (Form 990) 2014

Rantilli Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (h) Method of (g) Description of (a) Type of grant or assistance (b) Region valuation (book, FMV, appraisal, other) cash grant recipients cash disbursement non-cash non-cash assistance assistance 2015 GUS HART FELLOWSHIP AWARD NICARAGUA 10,000 WIRE TRANSFER 1 0. CASH HONORARIUM FOR JANUARY 2015 AON LECTURE ON ASIAN **ECONOMIES** INDIA 10,000, WIRE TRANSFER 0. 1 CASH 2014 DR. SCHOLL FOUNDATION VISITING FELLOW ON US-CHINA RELATIONS AWARD CHINA 1 10,000. WIRE TRANSFER 0. CASH

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

Schedule F (Form 990) 2014

Yes X No

Foreign Partnerships (see Instructions for Form 8865)

for Form 5713; do not file with Form 990)

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region), Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information

PART I, LINE 2:

HART FELLOW IS SELECTED ANNUALLY BY A COMMITTEE FROM AMONG NOMINATIONS

SUBMITTED. SELECTED FELLOWS ARE EMERGING LEADERS FROM THE LATIN AMERICA

AND CARIBBEAN REGION WHO ARE MAKING SIGNIFICANT CONTRIBUTIONS IN AREAS

SUCH AS EDUCATION, ECONOMICS, HEALTH, COMMERCE, POVERTY REDUCTION,

MICRO-FINANCE, THE ENVIRONMENT, INTERNATIONAL DEVELOPMENT, GOVERNANCE, OR

SOCIETY.

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS COLLABORATES WITH AON PLC TO BRING

AN EXPERT ON ASIAN ECONOMIES TO CHICAGO TO PARTICIPATE IN A PUBLIC

PROGRAM, LEADERSHIP DINNER, AND MEETINGS WITH CORPORATE AND CIVIC LEADERS

FOR THE AON LECTURE ON ASIAN ECONOMIES. THE MAIN CRITERION FOR SELECTION

IS THE SPEAKER SHOULD BE A LEADING ASIAN ECONOMIC POLICY MAKER OR THOUGHT

LEADER, SUCH AS A FORMER MINISTER OF FINANCE OR A TOP ECONOMIST, WHO CAN

SPEAK CANDIDLY ON DEVELOPING ASIAN ECONOMIES AND PROVIDE CRITICAL INSIGHT

INTO THE SURROUNDING ECONOMIC ISSUES.

THE DR. SCHOLL FOUNDATION FUNDED ESTABLISHMENT OF THE DR. SCHOLL

FOUNDATION VISITING FELLOW ON US-CHINA RELATIONS TO ENCOURAGE PUBLIC

UNDERSTANDING OF THE RELATIONSHIP BETWEEN THE TWO COUNTRIES. NOMINEES FOR

THE FELLOWSHIP ARE SOLICITED FROM LEADERS IN THE US AND CHINA, AND A

SELECTION COMMITTEE COMPRISED OF EXPERTS FROM NON-COUNCIL AFFILIATED

INSTITUTIONS CHOOSES A TOP CANDIDATE. THE CHOSEN FELLOW SPENDS UP TO A

MONTH IN CHICAGO SPEAKING TO SCHOOLS AND MEETING WITH LEADERS FROM ACROSS

THE CITY.

PART I, LINE 3:

432075 09-24-14

Schedule F (Form 990) 2014

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.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

THE CHI	CAGO COUNCIL ON GLO	DBAI	AI	FAIRS	36-2181	969			
Part I Fundraising Activities. required to complete this part	Complete if the organization answet.	red "Y	es" to	Form 990, Part IV, II	ne 17. Form 990-EZ	filers are not			
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a									
(i) Name and address of individual or entity (fundraiser)	(ii) Actıvıty	(iii) fundi have co or con contribi	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No						
Fotal		•	—						
3 List all states in which the organizatio or licensing			utions	or has been notified	it is exempt from re	gistration			
				 					
									

432081 08-28-14

Schedule G (Form 990 or 990-EZ) 2014

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

	edul ırt İ	e G (Form 990 or 990-EZ) 2014 THE CHI	CAGO COUNCIL	ON GLOBAL AF	FFAIRS 36-	2181969 Page 2
		Fundraising Events. Complete if the of fundraising event contributions and groups and groups.				
			(a) Event #1	(b) Event #2	(c) Other events	
			GLOBAL		NONE	(d) Total events
			LEADERSHIP A			(add col (a) through
•			(event type)	(event type)	(total number)	col (c))
Revenue		0	2 505 106			2 505 106
ě	1	Gross receipts	2,585,186.			2,585,186.
	2	Less. Contributions	2,247,484.			2,247,484.
	3	Gross income (line 1 minus line 2)	337,702.			337,702.
	4	Cash prizes				
တ္ဆ	5	Noncash prizes .				
esued	6	Rent/facility costs	101,878.			101,878.
Direct Expenses	7	Food and beverages	117,166.			117,166.
۵		Entertement				
	8	Entertainment . Other direct expenses	118,658.			118,658.
	10	Direct expense summary. Add lines 4 through		L		337,702.
		Net income summary. Subtract line 10 from li	• •			0.
Pa	rt l	II Gaming. Complete if the organization a		990, Part IV, line 19, or re	eported more than	1
_		\$15,000 on Form 990-EZ, line 6a.		, , , ,		
_			(a) Pingo	(b) Pull tabs/instant	(a) Other genera	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col (c))
eve					•	
<u> </u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		•	
	8_	Net gaming income summary. Subtract line 7	from line 1, column (d)		. •	
_	_					
		er the state(s) in which the organization condu	_			
		he organization licensed to conduct gaming ac No," explain:		states?		Yes No
	_					
40-	10/0	yo any of the eventuation's some learness to	unked eveneded as to-			
		re any of the organization's gaming licenses re Yes," explain:			5au (Yes No
	_					
	_					
43208	32 08	-28-14			Schedule G (For	m 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-EZ) 2014 THE CHICAGO COUNCIL O	N GLOBAL AFF	<u> AIRS 36-2</u>	2181969	Page 3
11 Does the organization conduct gaming activities with nonmembers?			Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a	a partnership or other en	tity formed		
to administer charitable gaming?			Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:				
a The organization's facility			13a	%
b An outside facility			13b	%
14 Enter the name and address of the person who prepares the organization's ga	aming/special events bo	oks and records:		
Name ▶				
Address >		··.		
15a Does the organization have a contract with a third party from whom the organ	nization receives gaming	revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization	· \$	_ and the amount		
of gaming revenue retained by the third party > \$				
c If "Yes," enter name and address of the third party:				
Name				
Address >				
16 Garning manager information:				
Name				
Gaming manager compensation \$				
Description of services provided ▶				
Director/officer Employee Independ	dent contractor			
17 Mandatory distributions:				
a is the organization required under state law to make charitable distributions fr	rom the gaming proceed	s to		
retain the state gaming license?	om the gaming proceed	3 10	Yes	☐ No
b Enter the amount of distributions required under state law to be distributed to	o other exempt organizat	ions or spent in the	103	140
organization's own exempt activities during the tax year > \$	rother exempt organizat	ions or spent in the		
Rartiv Supplemental Information. Provide the explanations required by Pa	art I, line 2b, columns (iiī) and (v), and Part III, II	nes 9, 9b, 10	0b, 15b,
15c, 16, and 17b, as applicable Also provide any additional information	tion (see instructions)			···
				
		-		
432083 08-28-14		Schedule G (Form	- 000 00º	n EZ) 2014
TOESCO OU EU 17		Scriedule a reom	コンタマレ ひに かかり	<i>J-E2) 2</i> 0 14

Schedule G	(Form 990 or 990-EZ)	THE CHICAGO	COUNCIL ON	GLOBAL	AFFAIRS	36-2181969	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)					
			_				
							
 -	·				****	<u> </u>	
					·		
						 	
					**		
	<u>-</u>						
· ·			- · · · · · · · · · · · · · · · · · · ·				
	··· — ··						
		· · · · · · · · · · · · · · · · · · ·					
							
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	· · · · · · · · · · · · · · · · · · ·	-					

Schedule G (Form 990 or 990-EZ)

432084 05-01-14

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Employer identification number 36-2181969

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	i		
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	i		
		1		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	1		
	organization or a related organization	<u> </u>		
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		_X_
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2014

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

For each individual whose compensation must be reported 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, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
(1) IVO DAADLER	(i)	384,300.	57,500.	0.	0.	8,567.	450,367.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RACHEL BRONSON	(i)	175,160.	5,000.	0.	12,615.	911.	193,686.	0.
VP, STUDIES	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT CORDES	(i)	163,837.	15,000.	0.	13,144.	14,055.	206,036.	0.
VP, FINANCE AND ADMINISTRATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOSEPHINE HEINDEL	(i)	190,308.	15,000.	0.	13,179.	6,958.	225,445.	0.
VP, EXTERNAL RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) NIAMH KING	(i)	156,949.	15,000.	0.	12,295.	8,623.	192,867.	0.
VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LISA MOON	(i)	137,914.	15,000.	0.	10,739.	6,919.	170,572.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) NABEEL KHOURY	(i)	170,123.	0.	0.	0.	6,726.	176,849.	0.
SENIOR FELLOW, MIDDLE EAST AND NATIO	(ii)	0.	0.	0.	0.	. 0.	0.	0.
(8) PHILIP LEVY	(i)	138,765.	3,000.	0.	3,757.	7,304.	152,826.	0.
SENIOR FELLOW, GLOBAL ECONOMY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) DAWN MILLER	(i)	147,881.	3,000.	0.	10,601.	6,925.	168,407.	0.
DIRECTOR, MAJOR GIFTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MARSHAL BOUTON	(i)	116,666.	0.	0.	0.	0.	116,666.	0.
FORMER OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)	<u></u>						
	(i)		<u></u>					
	(ii)							
	(i)							
	(iı)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2014	THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	36-2181969	Page 3
Part III Supplemental Informatio	חכ		,
	n, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II	Also complete this part for any additional information.	
- · · ·			

Schedule J (Form 990) 2014

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

THE CHICAGO COUNCIL ON GLOBAL AFFAIRS

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.rs.gov/form990. **Employer identification number** 36-2181969

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INSIGHT AND INFLUENCES THE PUBLIC DISCOURSE ON CRITICAL GLOBAL ISSUES.
WE CONVENE LEADING GLOBAL VOICES AND CONDUCT INDEPENDENT RESEARCH TO
BRING CLARITY AND OFFER SOLUTIONS TO CHALLENGES AND OPPORTUNITIES
ACROSS THE GLOBE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SOLUTIONS TO CHALLENGES AND OPPORTUNITIES ACROSS THE GLOBE.
FORM 990, PART VI, SECTION A, LINE 6:
MEMBERS PAY DUES WHICH ENTITLE THEM TO ACCESS TO EVENTS, PUBLICATIONS AND
CERTAIN RESOURCES OF THE COUNCIL.
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED IN DETAIL BY THE AUDIT COMMITTEE. THIS COMMITTEE MET
WITH THE AUDITOR/PREPARER PRIOR TO APPROVING THE RETURN. COPIES OF THE
RETURN WERE THEN PROVIDED TO ALL MEMBERS OF THE EXECUTIVE COMMITTEE OF THE
BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
ON AN ANNUAL BASIS, BOARD MEMBERS ARE REQUIRED TO SIGN ANNUAL CONFLICT OF
INTEREST DISCLOSURE STATEMENTS, WHICH ARE SUBMITTED TO THE CHAIR OF THE
NOMINATING AND GOVERNANCE COMMITTEE.
FORM 990, PART VI, SECTION B, LINE 15:
THE COMPENSATION COMMITTER REVIEWS EXECUTIVE COMPENSATION ON AN ANNITAL.

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

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990 EZ) (2014)	Page 2
Name of the organization THE CHICAGO COUNCIL ON GLOBAL AFFAIRS	Employer identification number 36-2181969
BASIS. THIS REVIEW PERIODICALLY INCLUDES THE USE OF COMPE	ENSATION SURVEYS
AND DATA FROM COMPARABLE ORGANIZATIONS.	· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, SECTION C, LINE 18:	
FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION ON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINE	ANCIAL STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES - PROJECT:	
PROGRAM SERVICE EXPENSES	1,460,926.
MANAGEMENT AND GENERAL EXPENSES	27,473.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,488,399.
CONSULTING FEES - POLLING:	
PROGRAM SERVICE EXPENSES	130,884.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	130,884.
CONSULTING FEES - EDITORIAL:	
PROGRAM SERVICE EXPENSES	109,272.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	109,272.
432212 08-27-14 Sc!	hedule O (Form 990 or 990-EZ) (2014)

Form 990 THE CHIC	AGO COU	<u>IOI</u>	L	ON	<u> </u>	LO	BA	L AFFAIRS	36-218	<u> 19</u> 69
Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average		Position)		Reportable	Reportable	Estimated
	hours	(c	heck	all 1	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	۱.				oyee		the	organizations	compensation
	(list any	ecto]			em p		organization	(W-2/1099-MISC)	from the
	hours for	50	8			ated	ŀ	(W-2/1099-MISC)		organization
	related	ustee	trust		8	Suedo				and related
	organizations below	를	tional		형	E C G	_			organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ELLEN COSTELLO	1.00	∺	_		1	_	_			
BOARD MEMBER	1.00	x						0.	0.	_
(28) WILLIAM M. DALEY	1.00	^	\vdash		├			0.	0.	0.
BOARD MEMBER	1.00	₩.								
(29) MARILYN R. DIAMOND	1 00	X	_					0.	0.	0.
BOARD MEMBER	1.00	٠,								•
(30) CRAIG J. DUCHOSSOIS	1 00	X	-	<u> </u>				0.	0.	0.
•	1.00	١								_
BOARD MEMBER	1 00	X		H		<u> </u>		0.	0.	0.
(31) JOHN R. ETTELSON	1.00	۱								
BOARD MEMBER	1 00	X	<u> </u>	ļ	ļ			0.	0.	0.
(32) CHARLES L. EVANS	1.00	┨								
BOARD MEMBER	1 00	X		ļ				0.	0.	0.
(33) PAUL J. FINNEGAN	1.00	↓		١,					_	_
BOARD MEMBER	ļ <u>.</u>	X						0.	0.	0.
(34) MICHAEL M. FROY	1.00									
BOARD MEMBER		Х	Щ					0.	0.	0.
(35) CHRISTOPHER B. GALVIN	1.00	1								
BOARD MEMBER		X						0.	0.	0.
(36) J. DOUGLAS GRAY	1.00									
BOARD MEMBER		X						0.	0.	0.
(37) MICHAEL D. HALES	1.00								,	
BOARD MEMBER		X						0.	0.	0.
(38) CHARLES S. HALLAB	1.00	1								
BOARD MEMBER		X						0.	0.	0.
(39) CARYN HARRIS	1.00									
BOARD MEMBER		X						0.	0.	0.
(40) BRAD J. HENDERSON	1.00]								
BOARD MEMBER		X						0.	0.	0.
(41) MARK S. HOPLAMAZIAN	1.00	1								
BOARD MEMBER		X						0.	0.	0.
(42) VERNE G. ISTOCK	1.00									
BOARD MEMBER		X						0.	0.	0.
(43) DAVID JACOBSON	1.00									
BOARD MEMBER		X						0.	0.	0.
(44) RICHARD A. JOSEPH	1.00			\neg						
BOARD MEMBER		Х]	_	_	_	_	0.	0.	0.
(45) CHRISTOPHER M. KEOGH	1.00									
BOARD MEMBER		x		- [0.	0.	0.
(46) KIMBERLY J. KEYWELL	1.00					\neg				
BOARD MEMBER		х			_	_		0.	0.	0.
					•	•				
Total to Part VII, Section A, line 1c										
									I	

Part VII Section A Officers Directors To					_		BA			1969
Part VII Section A. Officers, Directors, Ti	rustees, Key Er	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average	(C) Position					(D) Reportable	(E) Reportable	(F) Estimated	
That is a second to the	hours	(cl			that		ly)	compensation	compensation from related	amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(47) PAUL KINSCHERFF BOARD MEMBER	1.00	x						0.	0.	0.
(48) AMBASSADOR FAY HARTOG LEVIN BOARD MEMBER	1.00	x						0.	0.	0.
(49) PETER M. LIEB BOARD MEMBER	1.00	x						0.	0.	0.
(50) ROBERT A. LIVINGSTON BOARD MEMBER	1.00	x						0.	0.	0.
(51) JOHN W. MADIGAN BOARD MEMBER	1.00	x						0.	0.	0.
(52) LIAM MCCARTHY BOARD MEMBER	1.00	x				-		0.	0.	0.
(53) LEO MELAMED BOARD MEMBER	1.00	X						0.	0.	0.
(54) MARCEL J. MOLINS BOARD MEMBER	1.00	X						0.	0.	0.
(55) CHARLES J. MOORE BOARD MEMBER	1.00	X						0.	0.	0.
(56) WAYNE L. MOORE BOARD MEMBER	1.00	X						0.	0.	0.
(57) CLARE MUNANA BOARD MEMBER	1.00	X			-	-		0.	0.	0.
(58) JEFFREY C. NEAL BOARD MEMBER	1.00	X						0.	0.	0.
(59) MICHELLE OBAMA BOARD MEMBER	1.00	X					<u> </u>	0.	0.	0.
(60) WILLIAM A. OSBORN BOARD MEMBER	1.00	X						0.	0.	0.
(61) SHEILA A. PENROSE BOARD MEMBER	1.00	X			-			0.	0.	0.
(62) DOUGLAS A. PERTZ BOARD MEMBER	1.00	x						0.	0.	0.
(63) RICHARD W. PORTER	1.00									
BOARD MEMBER (64) JOSE LUIS PRADO	1.00	X			-			0.	0.	0.
BOARD MEMBER (65) ANNE R. PRAMAGGIORE	1.00	X						0.	0.	0.
BOARD MEMBER (66) QUINTIN E. PRIMO, III	1.00	X			-	_		0.	0.	0.
BOARD MEMBER		Х	l		<u> </u>	<u> </u>	<u> </u>	0.	0.	0.

Form 990 THE CHIC	AGO COUL	IC I	<u>. L.</u>	ON	l G	'nΟ	BA	L AFFAIRS	36-218	1969
Pant VIII Section A. Officers, Directors, Tr	<u>ustees, Key Er</u>	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours			() Pos	C) Ition	1		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
67) MARGOT PRITZKER BOARD MEMBER	1.00	х						0.	0.	0
68) IMAD I. QASIM OARD MEMBER	1.00	X						0.	0.	0
69) KIMBERLY K. QUERREY OARD MEMBER	1.00	x						0.	0.	0
70) JOHN W. ROWE	1.00	x						0.	0.	0
71) E. SCOTT SANTI DARD MEMBER	1.00	x						0.	0.	0
72) JENNIFER F. SCANLON	1.00									
DARD MEMBER 73) MORTON O. SCHAPIRO	1.00	<u>X</u>						0.	0.	(
OARD MEMBER 74) PAUL E. SCHICKLER	1.00	X						0.	0.	(
DARD MEMBER 75) PAMELA SCHOLL	1.00	Х						0.	0.	(
OARD MEMBER 76) SAMUEL C. SCOTT, III	1.00	X						0.	0.	
DARD MEMBER 77) ALEJANDRO SILVA	1.00	Х						0.	0.	(
DARD MEMBER 78) ADELE SIMMONS	1.00	Х						0.	0.	(
DARD MEMBER 79) VIRGINIA SIMMONS	1.00	Х						0.	0.	(
DARD MEMBER 30) JAMES H.M. SPRAYREGEN	1.00	х						0.	0.	(
DARD MEMBER 31) AMBASSADOR LOUIS B. SUSMAN	1.00	X						0.	0.	
DARD MEMBER		x						0.	0.	(
32) KAY P. TORSHEN DARD MEMBER	1.00	х						0.	0.	(
CHARLES A. TRIBBETT, III CARD MEMBER	1.00	x						0.	0.	(
AA) DAVID J. VITALE DARD MEMBER	1.00	x						0.	0.	(
S) FREDERICK H. WADDELL DARD MEMBER	1.00	x						0.	0.	(
86) ANNE WEDNER	1.00	х						0.	0.	

	AGO COOL	<u>10 T</u>	<u>. L.</u>	OI	G	PО	BA	L AFFAIRS	<u>36-218</u>	1969
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck				ly)	compensation	compensation	amount of
	per	Ė						from	from related	other
	week			1		yee		the	organizations	compensation
	(list any	탾)jd W		organization	(W-2/1099-MISC)	from the
	hours for	9	8			ated		(W-2/1099-MISC)		organization
	related	ustee	trust		20	bens				and related
	organizations below	ual tr	guat		yoldr	tcon	_			organizations
	line)	Individual trustee or director	Institutional trustee	fficer	Key employee	Highest compensated employee	Former			
(87) MICHAEL E. WERNER	1.00	ļ. <u>Ē</u> .	<u> </u>	۳	_	-	_			
BOARD MEMBER	1.00	x						0.	0.	0.
(88) ERIC E. WHITAKER	1.00	^	-					0.		
BOARD MEMBER	1.00	x						0.	0.	0.
(89) KEITH E. WILLIAMS	1.00	Ĥ	-				_	0.	0.	
BOARD MEMBER	1.00	x						0.	0.	0.
(90) LINDA S. WOLF	1.00	┢╇		 -	 -	\vdash	_	- 0.		<u> </u>
BOARD MEMBER	1.00	x						0.	0.	0.
(91) ROBERT J. ZIMMER	1.00	 	 	-			ļ	<u>-</u>		
BOARD MEMBER		x						0.	0.	0.
(92) RACHEL BRONSON	40.00	<u> </u>	 	\vdash						
VP, STUDIES		1		l	х			180,160.	0.	13,526.
(93) ROBERT CORDES	40.00									
VP, FINANCE AND ADMINISTRATION		1		l	Х			178,837.	0.	27,199.
(94) JOSEPHINE HEINDEL	40.00							-		
VP, EXTERNAL RELATIONS		1			X			205,308.	0.	20,137.
(95) NIAMH KING	40.00									
VP, PROGRAMS					X			171,949.	0.	20,918.
(96) LISA MOON	40.00									
VP, GLOBAL AGRICULTURE AND FOOD		_			X			152,914.	0.	17,658.
(97) ANNA EDWARDS	40.00								_	
DIRECTOR, CORPORATE RELATIONS			ļ			Х		125,823.	0.	9,983.
(98) NABEEL KHOURY	40.00							450 400		6 706
SENIOR FELLOW, MIDDLE EAST AND NATIO	10.00	_	ļ			X		170,123.	0.	6,726.
(99) PHILIP LEVY	40.00							141 865	•	44 064
SENIOR FELLOW, GLOBAL ECONOMY	10.00	_				X		141,765.	0.	11,061.
(100) DAWN MILLER DIRECTOR, MAJOR GIFTS	40.00					х		150 001	0	17 526
(101) DINA SMELTZ	40.00		 -	_	-	^	-	150,881.	0.	17,526.
SENIOR FELLOW, PUBLIC OPINION AND FO	40.00	ł				х		116,662.	0.	14 790
(102) MARSHAL BOUTON	2.00	 	\vdash		\vdash			110,002.	· · · · · · · · · · · · · · · · · · ·	14,790.
FORMER OFFICER	2.00	1					x	116,666.	0.	0.
		\vdash	-		-			110,000.		<u>·</u>
		1								
	 	Г	Т						_	
	1	\Box			<u> </u>			· · · · · ·		
				L						
		l		<u>.</u>						<u> </u>
								4 844 555		150 501
Total to Part VII, Section A, line 1c	· ··	1,711,088.	<u> </u>	159,524.						