	-	~~	** PUBLIC DISCLOSURE COPY Return of Organization Exempt Fro	y ** om Ir	ncome Tax	OMB No. 1545-0047
Form 990 Department of the Treasury			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co	s) 2022		
			Do not enter social security numbers on this form as it	-		Open to Public
Interi	nal Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the			Inspection
AF	or th	e 2022 calend	ar year, or tax year beginning $ m JUL1$, 2022 and end	iding J	UN 30, 2023	
B (Check if pplicab	le:	organization		D Employer identific	ation number
	Addr	ge THE	ADLER PLANETARIUM			
	Name Name	ge Doing b	usiness as		36-621090)2
	Initial	Number	,	oom/suite	E Telephone number	
	Final returr termi		S. DUSABLE LAKE SHORE DRIVE		(312)922-	
_	ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	21,301,742.
	returr Appli		AGO, IL 60605	 .	H(a) Is this a group re	
	tion pend		nd address of principal officer: MICHELLE B. LARSON,	PH.D	for subordinates?	
	-	SAME	AS C ABOVE		H(b) Are all subordinates inc	
			X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or [ADLERPLANETARIUM.ORG	527		ist. See instructions
_	Nebs				H(c) Group exemption	State of legal domicile: IL
	orm o art l		X Corporation Trust Association Other	L Year o	of formation: 1930 M	State of legal domicile: 11
	1		e the organization's mission or most significant activities: ADLER '	'S MT	SSTON TS TO	CONNECT
e	1		TO THE UNIVERSE AND EACH OTHER UNDER	B THE	SKV WE ALL	SHARE
Governance	2	Check this bo				
/err	2	Number of vol	54			
ğ	4		54			
	5		ependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2022 (Part V, line 2a)		185	
ties	6				266	
Activities &					0.	
A			business taxable income from Form 990-T, Part I, line 11			0.
		Not unrelated		<u> </u>	Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)		15,348,637.	9,837,130.
Revenue	9		ce revenue (Part VIII, line 2g)		2,902,530.	6,176,636.
evel Svel	10	•	come (Part VIII, column (A), lines 3, 4, and 7d)		4,708,809.	1,035,581.
ň	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,282,982.	1,724,849.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		24,242,958.	18,774,196.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		o or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salarian atha	x companyation amployee banefits (Part IX, column (A), lines 5.10)		7,971,879.	9,369,139.
Ise	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraisi	undraising fees (Part IX, column (A), line 11e)	3.		
ŵ	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		6,491,999.	6,663,634.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		14,463,878.	16,032,773.
	19	Revenue less	expenses. Subtract line 18 from line 12		9,779,080.	2,741,423.
JO,				Beç	ginning of Current Year	End of Year
Net Assets or	20	Total assets (F	Part X, line 16)		62,060,707.	67,133,417.
tAS	21	Total liabilities	(Part X, line 26)		32,586,386.	30,954,818.
_			fund balances. Subtract line 21 from line 20		29,474,321.	36,178,599.
	art II	•				
Und	er pen	alties of perjury,	declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of my	knowledge and belief, it is
true	, corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which	n preparer l	has any knowledge.	

			ě
Sign Here	Signature of officer AUDRIS WONG, VP FOR FINANCE Type or print name and title	E & ADMIN/CFO	Date
Paid		Preparer's signature Date JU ANN TRAPP 02/2	6/24 Check PTIN if self-employed P01506476
Preparer	Firm's name PLANTE & MORAN, PL	LC	Firm's EIN 38-1357951
Use Only	Firm's address 10 S. RIVERSIDE PLA	AZA, 9TH FLOOR	
	CHICAGO, IL 60606		Phone no. (312) 207-1040
May the II	RS discuss this return with the preparer shown above	e? See instructions	X Yes No
			- 000 (*****

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

		ER PLANETARIUM	36-6210902 Page 2
Par	t III Statement of Program Se	•	
		sponse or note to any line in this Part III	X
1	Briefly describe the organization's missi	on: M ('ADLER') IS A NOT-FOR-PRO	
		SSION IS TO CONNECT PEOPLE T	
		SSION IS IC CONNECT PEOPLE I SKY WE ALL SHARE. IT ASPIRE	
		NGAGING IN ASTRONOMY AND SPA	
0		ficant program services during the year which were not	
2			
	If "Yes," describe these new services or	Schodulo O	
3		or make significant changes in how it conducts, any pro	ogram services?
	If "Yes," describe these changes on Sch		
4		vice accomplishments for each of its three largest progr	ram services, as measured by expenses
		ions are required to report the amount of grants and allo	
	revenue, if any, for each program servic	· · · ·	
4a		557,245. including grants of \$	0.) (Revenue \$ 6,159,636.
		ANETARIUM IS INTRODUCING A G	
	NEBULA, A NEIGHBORHO	OD SCHOOL TO A COMMUNITY PAR	TNER, A RESEARCH TEAM
	TO A NETWORK OF CITI	ZEN SCIENTISTS, OR ONE STAFF	MEMBER TO ANOTHER, THE
	MUSEUM'S FOCUS ON ME	ANINGFUL CONNECTIONS DATES B	BACK NEARLY A CENTURY.
		HOSTS APPROXIMATELY A HALF	
		LIONS MORE THROUGH YOUTH STE	•
		HING EVENTS, PEOPLE-POWERED	-
		ODAY, THE ADLER IS ALSO BRIN	· · ·
		C EXPLORATION ROOTED IN COMM	
		D THE WORLD WHO CAN ENJOY TH RARIES, SCHOOLS OR OFFICES.	IE DIGITAL ADLER FOR
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$
4.0			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
4d	Other program services (Describe on Sc	hedule O.)	
	(Expenses \$	including grants of \$ (Revenu	ue \$)
4e	Total program service expenses	11,557,245.	
			Form 990 (2022
32002	12-13-22	SEE SCHEDULE O FOR CONTIN	NUATION (S)
	26 147228 105845	2022.05060 THE AI	DLER PLANETARIUM 1058

 Form 990 (2022)
 THE
 ADLER
 PLANETARIUM

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
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		Х
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	Х	
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		Х
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes." complete			
	Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
d		28a		x
L	"Yes," complete Schedule L, Part IV	20a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	00-		x
20	"Yes," complete Schedule L, Part IV	28c 29	х	
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> " <i>Yes</i> ," <i>complete Schedule M</i>	29	- 72	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
~	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
~~	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	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			v
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? 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?			v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-		v
	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 on Schedule O for Part VI, lines 11b and 19?		v	
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Fa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	X	
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 46 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b U Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
С		10	Х	
02000		Eorm		(2022)
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Form	990 (2022) THE ADLER PLANETARIUM 36-6210	902	Р	age 5		
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
			Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return 2a 185					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	Зb				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X		
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit					
	any contributions that were not tax deductible as charitable contributions?	6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts					
	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х			
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required					
	to file Form 8282?	7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d					
е	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		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?					
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?					
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12 10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders 11a					
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans 13b					
С	Enter the amount of reserves on hand					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>x</u>		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		──		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or					
	excess parachute payment(s) during the year?	15		X		
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X		
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17				
	If "Yes," complete Form 6069.					
232005	12-13-22	Form	990	(2022)		

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Form 99	0 (2022)
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THE ADLER PLANETARIUM

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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 on Schedule O. See instructions.

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

X

Sect	ion A. Governing Body and Management							
					Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	54					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent 1b 54							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other					
	officer, director, trustee, or key employee?			2	X			
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision					
	of officers, directors, trustees, or key employees to a management company or other person?			3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X		
6	Did the organization have members or stockholders?			6		X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			_		37		
_	more members of the governing body?			7a		X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					v		
•	persons other than the governing body?			7b		X		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	-	-	0-	х			
	The governing body?			8a 0h	X			
	Each committee with authority to act on behalf of the governing body?			8b				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			9		х		
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		21		
	This Section B requests mormation about policies not required by the internal Re-	venue	Code.)		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a	100	X		
	If "Yes," did the organization have written policies and procedures governing the activities of such ch							
	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	befor	e filing the form?	11a	X			
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		-					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х			
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," d	escribe					
	on Schedule O how this was done			12c	Х			
13	Did the organization have a written whistleblower policy?			13	X			
14	Did the organization have a written document retention and destruction policy?			14	Х			
15	Did the process for determining compensation of the following persons include a review and approval	l by ind	dependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official			15a	<u>X</u>			
b	Other officers or key employees of the organization			15b	X			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem					37		
	taxable entity during the year?			16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	-						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			101				
Sec	exempt status with respect to such arrangements?			16b				
	—							
17 18	List the states with which a copy of this Form 990 is required to be filed	4 000	T (section 501(c)(3)s		availat			
10	for public inspection. Indicate how you made these available. Check all that apply.	iu 990	-1 (Section 301(c)(3)8	orny)	avallar	JIE		
	X Own website Another's website X Upon request Other (explain	on Sc	hadula ()					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, col		,	l financ	cial			
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records					
	AUDRIS WONG - (312) 322-0327							
	1300 S. DUSABLE LAKE SHORE DRIVE, CHICAGO, IL 6060	5						
232006	12-13-22			Form	990	(2022)		
	7					. ,		

2022.05060 THE ADLER PLANETARIUM

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Con	npensated
	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 the instructions for definition of "key employee."

List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

• List the organization's five current nighest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B) (C)							(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					one	Reportable	Estimated	
	hours per	box,		ss per	son i	on is both an ector/trustee)		compensation	compensation	amount of
	week			uau	recio	i/irus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	fee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		/ee	npen		1099-NEC)	1099-NEO)	and related
	below	ndividual trustee or director	nstitutional trustee	L	nploy	st col	ar.	1000 1120/		organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
(1) MICHELLE B. LARSON, PH.D.	35.00									
PRESIDENT AND CEO	0.00			Х				422,733.	0.	12,695.
(2) RYUTARO MIZUNO	35.00									
VP, MARKETING & COMMUNICATIONS	0.00				Х			207,246.	0.	26,135.
(3) CATHLEEN BRUEGGEMANN	35.00									
VP, DEVELOPMENT - FORMER (THRU 09/22	0.00				Х			182,558.	0.	12,332.
(4) MARCIA HEUSER	35.00									
VP, FINANCE AND ADMINISTRATION/CFO (0.00			Х				167,412.	0.	10,889.
(5) LAURA TROUILLE	35.00									
VP, CITIZEN SCIENCE	0.00				Х			156,919.	0.	6,560.
(6) ANDREW JOHNSTON	35.00									
VP, ASTRONOMY & COLLECTIONS	0.00				X			156,457.	0.	6,560.
(7) JENEAN FEATHERSON	35.00							100.000	•	0 0 7 4
SENIOR DIRECTOR OF HUMAN RESOURCES	0.00					X		128,836.	0.	9,871.
(8) RANDALL LEAVER	35.00							100 460	0	11 000
CONTROLLER	0.00					X		122,469.	0.	11,296.
(9) ERIN WILSON	35.00							100 046	0	20.004
SENIOR DIRECTOR OF MARKETING	0.00					X		100,046.	0.	20,064.
(10) LEVAL JONES	35.00					37		101 100	0	10 000
LEAD BUILDING ENGINEER	0.00					X		101,159.	0.	12,068.
(11) ANN GRANT	35.00					x		100 606	0	10 270
SENIOR DIRECTOR OF DEVELOPMENT (12) AUDRIS WONG	0.00							100,696.	0.	10,372.
VP_ FINANCE AND ADMINISTRATION/CFO (0.00			х				61,005.	0.	2,315.
(13) KECIA STEELMAN	1.00			Δ				01,003.	0.	2,313.
BOARD CHAIR	0.00	х		х				0.	0.	0.
(14) NANCY S. GERRIE	1.00									
BOARD VICE CHAIR	0.00	х		х				0.	0.	0.
(15) JONATHAN H. HERBST	1.00									
BOARD TREASURER	0.00	х		х				0.	0.	0.
(16) DANIEL T. MUELLER	1.00									<u>, , , , , , , , , , , , , , , , , </u>
BOARD SECRETARY	0.00	х		х				0.	0.	0.
(17) RAJ BHATIA	1.00			_						
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	х						0.	0.	0.
222007 12 12 22								•••	• •	Form 990 (2022)

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232007 12-13-22

Form 990 (2022)

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2022.05060 THE ADLER PLANETARIUM

Form	990	(2022)
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Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	l Hig	ghes	st C	ompensated Employees	(continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average (do not				ition		ne	Reportable	Reportable	E	stimate	ed
	hours per	box	, unles	s per	rson i	s both	n an	compensation	compensation		nount	of
	week (list any			uau	reciu	i/irus	lee)	- from	from related		other	
	hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC/		npensa rom th	
	related	se or (stee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)	1	ganizat	
	organizations	truste	Institutional trustee		yee	ompei		1099-NEC)	,	۲ ×	d relat	
	below	/idual	tution	er	Key employee	loyee	ner			org	anizati	ons
	line)	Indiv	Insti	Officer	Key (High emp	Former					
(18) MUHAMMAD GIGANI	1.00											
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.	<u> </u>		0.
(19) LINDA P. JOJO	1.00								•			•
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.	──		0.
(20) CATHERINE KENWORTHY	1.00								•			•
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.			0.
(21) STEVEN S. LOUIS, MD	1.00								•			•
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.			0.
(22) AARON C. RUDBERG	1.00											
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.	<u> </u>		0.
(23) SCOTT C. SWANSON	1.00											
BOARD EXECUTIVE COMMITTEE MEMBER	0.00	Х						0.	0.	<u> </u>		0.
(24) PRADIP K. PATIATH	1.00											
BOARD EXECUTIVE COMMITTEE MEMBER (TH	0.00	Х						0.	0.	<u> </u>		0.
(25) CYNTHIA L. BALLEW	1.00											
BOARD MEMBER	0.00	Х						0.	0.	<u> </u>		0.
(26) RUSSELL F. BARTMES	1.00											
BOARD MEMBER	0.00	Х						0.	0.	\downarrow		<u> </u>
1b Subtotal								1,907,536.	0.		1,1	
c Total from continuation sheets to Part VI								0.	0.			<u>0.</u>
d Total (add lines 1b and 1c)								1,907,536.	0.	14	1,1	57.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	00 of reportable			
compensation from the organization											Vee	11
											Yes	No
3 Did the organization list any former officer,												v
line 1a? If "Yes," complete Schedule J for su										3		X
4 For any individual listed on line 1a, is the su	•								•		v	
and related organizations greater than \$150										4	X	
5 Did any person listed on line 1a receive or a	•							•		-		х
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	e J fo	or su	<u>ich p</u>	oers	on .				5		Δ
1 Complete this table for your five highest con	monsated ind		ndor	nt co	ontre	actor	ro th	ant received more than \$	00 000 of componen			
the organization. Report compensation for t	-											
(A)	ne calendar ye		nun	y w				(B)	ai.		C)	
رم) Name and business	address							Description of se	ervices	Compe		n
A-1 ROOFING COMPANY, 1425	CHASE	AV	ENI	JE	_			CONSTRUCTION				
							2 3	27.				
ELK GROVE VILLAGE, IL 60007SERVICES862,327DIVERSE FACILITY SOLUTIONS, INC.								<u> </u>				
12838 S. CICERO AVE, ALSI	-	08	03					JANITORIAL SE	RVICES	33	8,2	02.
TROOP CONTRACTING	<u>, 11 0</u>	00	0.5				_	CONSTRUCTION			0,2	02.
648 EXECUTIVE DRIVE, WILL	OWBROOK		ΤT.	6	05	27		SERVICES		21	7,0	86
TK ELEVATOR CORPORATION	<u>5</u> 5.00K	/	<u> </u>	0		- 1	_	CONSTRUCTION			<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u>
940 W. ADAM STREET, CHICA	GO. TT.	60	60'	7				SERVICES		17	0,4	32.
TOTAL ELEVATOR SERVICE	, 10			-			_	CONSTRUCTION		<u> </u>	5,2	
10064 CLOW CREEK ROAD, PL	AINFIEL	D.	IJ	ь	60	58				16	0,9	17.

Total number of independent contractors (including but not limited to those listed above) who received more than 2

\$100,000 of compensation from the organization 7 SEE PART VII, SECTION A CONTINUATION SHEETS 232008 12-13-22

Form 990 (2022)

	ER PLANET								36-621	0902
Jection A. Onicers, Directors,		nplo	yee			lighe	est (```	()
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average	(-		Pos			ь. Л	Reportable	Reportable	Estimated
	hours	(C	neck I	all t	Inat	app	iy)	compensation from	compensation from related	amount of other
	per week					ee ee		the	organizations	compensation
	(list any	ctor				y old r		organization	(W-2/1099-MISC)	from the
	hours for	or director				ed en		(W-2/1099-MISC)		organization
	related	tee oi	ustee			ensat		· · · · ·		and related
	organizations	ul trus	nal tr		loyee	omp				organizations
	below	Individual trustee	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
	line)	Ind	su	0ff	Key	Hig	For			
(27) NEIL W. BOOK	1.00							0	0	
BOARD MEMBER (28) LIAM CAFFREY	0.00	Х						0.	0.	0.
BOARD MEMBER	0.00	x						0.	0.	0.
(29) DAVID A. CROWN, PH. D.	1.00	~						0.	0.	0.
BOARD MEMBER	0.00	х						0.	0.	0.
(30) DANIEL R. EDER	1.00							· · · ·	•	
BOARD MEMBER	0.00	x						0.	0.	0.
(31) JOHN W. ESTEY	1.00									
BOARD MEMBER	0.00	х						0.	0.	0.
(32) LILLY FARAHNAKIAN	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(33) TACY F. FLINT	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(34) RYAN GARINO	1.00								•	
BOARD MEMBER	0.00	Х						0.	0.	0.
(35) WILLIAM J. GRUBER	1.00							0.	0.	0
BOARD MEMBER (36) RAJ P. GUPTA, P.E.	0.00	Х						0.	0.	0.
BOARD MEMBER	0.00	x						0.	0.	0.
(37) CAROL HIBBARD	1.00									
BOARD MEMBER	0.00	x						0.	0.	0.
(38) AMELIA A. HUNTINGTON	1.00								•••	
BOARD MEMBER	0.00	x						0.	0.	0.
(39) SETH E. JACBOSON	1.00									
BOARD MEMBER	0.00	x						0.	0.	0.
(40) PETER J. LANGAS	1.00									
BOARD MEMBER	0.00	х						0.	0.	0.
(41) LISA H. LEWIS	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(42) ELIZABETH W. MCKENNA	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(43) MICHAEL J. MCMURRAY	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(44) MARYANN N. MCNALLY	1.00								-	_
BOARD MEMBER	0.00	Х						0.	0.	0.
(45) JAMES C. MURRAY	1.00								•	_
BOARD MEMBER	0.00	Х						0.	0.	0.
(46) RANDY NORNES	1.00								^	
BOARD MEMBER	0.00	х	l I		l			0.	0.	0.

Part VII Section A. Officers, Directors,	<u> Frustees, Key Er</u>	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	al trus		yee	m pen				organizations
	below	Individual trustee or director	Institutional trustee	л.	Key employee	Highest com pen sated em ployee	er			er gamzaner ie
	line)	Indiv	Instit	Officer	Keye	High	Former			
(47) JAMES J. O'CONNER, JR.	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0
(48) JACKSON PALLAS	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0
(49) IAN C. RADOMSKI	1.00							0	0	0
BOARD MEMBER (50) BRAD SERLIN	0.00	X						0.	0.	0
SOARD MEMBER	0.00	x						0.	0.	0
(51) BROOKE GRAYDON SLADE	1.00		-					0.	0.	0
BOARD MEMBER	0.00	x						0.	0.	0
(52) KEVIN THOMPSON	1.00									U
BOARD MEMBER	0.00	х						0.	0.	0
(53) TINA M. TROMICZAK	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0
(54) CHRIS RAUCH	1.00									
BOARD MEMBER	0.00	Х						0.	0.	0
(55) CAPT. JAMES A. LOVELL, JR.	1.00							0	0	•
SOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(56) CAROLYN BOWMAN 30ARD LIFE TRUSTEE	1.00	x						0.	0.	0
(57) LINDA I. CELESIA	1.00	^						0.	0.	0
BOARD LIFE TRUSTEE	0.00	x						0.	0.	0
(58) FRANK M. CLARK	1.00							0.	0.	0
BOARD LIFE TRUSTEE	0.00	х						0.	0.	0
(59) DONALD C. CLARK, JR.	1.00								0.	0
BOARD LIFE TRUSTEE	0.00	x						0.	0.	0
(60) BRYAN C. CRESSEY	1.00									
BOARD LIFE TRUSTEE	0.00	x						0.	0.	0
(61) J. DOUGLASS DONENFELD	1.00									
BOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(62) MICHAEL J. FELDMAN	1.00									
BOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(63) DAVID W. FOX, SR.	1.00									_
SOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(64) HOWARD S. GOSS	1.00								•	<u>^</u>
BOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(65) DAVID MINTZER, PH. D.	1.00	v							0	
BOARD LIFE TRUSTEE	0.00	Х						0.	0.	0
(66) EDWARD J. WILLIAMS 30ARD LIFE TRUSTEE	1.00	x						0.	0.	0
WIND DIFE INCOIDE		Δ						0.	0.	0

Form 990 THE ADLER	R PLANEI	'AR	UIU	Μ					36-621	0902		
Part VII Section A. Officers, Directors, Tru	istees, Key Er							Compensated Employe	es (continued)			
(A)	(B)	(B) (C)						(D)	(E)	(F)		
Name and title	Average			Pos				Reportable	Reportable	Estimated		
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of		
	per							from	from related	other		
	week	_				oyee		the	organizations	compensation		
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the		
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related		
	organizations	Individual trustee or director	l trus		/ee	m pen				organizations		
	below	dual t	ution	<u> </u>	n plo	st co	J.			organizationio		
	line)	Indivi	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former					
(67) EARLE M. COMBS III	1.00											
BOARD LIFE TRUSTEE (THRU 11/23)	0.00	Х						0.	Ο.	0.		
(68) JAMES J. O'CONNER, SR.	1.00											
BOARD LIFE TRUSTEE (THRU 7/23)	0.00	x						0.	Ο.	0.		
(69) HAROLD BYRON SMITH	1.00											
BOARD LIFE TRUSTEE (THRU 10/22)	0.00	x						0.	0.	0.		
(70) JOHN E. CARLSTROM, PH. D.	1.00	- -							J ·			
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
(71) WENDY FREEDMAN, PH. D	1.00											
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
(72) NANCY EMRICH FREEMAN	1.00							• •				
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
(73) ASHLEY HEMPHILL NETZKY	1.00							•••	•••			
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
(74) SEAN B. REYNOLDS	1.00											
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
(75) ROSA ESCARENO	1.00											
BOARD EX-OFFICIO TRUSTEE	0.00	x						0.	0.	0.		
		ł										
		1										
		1										
		1										
		1										
		1										
		1										
		1										
		1										
		1										
		1										
Total to Part VII, Section A, line 1c												
								•				

232201 04-01-22

	t VIÌ	2022) THE Statement of Re	ven	ue						_
		Check if Schedule O	conta	ins a respo	onse (or note to any line		(5)		
							(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue exclue
							Total revenue		business revenue	from tax und
										sections 512 -
ŝ	1 a	Federated campaigns		1a						
on	b	Membership dues		1b		396,956.				
Am		Fundraising events				1,143,073.				
ar	d	Related organizations		1d						
Ē	е	Government grants (contr	ibutio	ons) 1e		3,239,662.				
š	f	All other contributions, gifts,	grant	s, and						
Ę		similar amounts not included	abov	e 1f		5,057,439.				
and Other Similar Amounts	g	Noncash contributions included in	lines 1	a-1f 1g	\$	141,236.				
an	h	Total. Add lines 1a-1f					9,837,130.			
						Business Code				
	2 a	ADMISSIONS				900099	5,944,504.	5,944,504.		
e	b	SKY SHOWS				900099	139,036.	139,036.		
enu	С	OTHER PROGRAM REVEN	ĴΕ			900099	93,096.	93,096.		
Revenue	d									
1	e									
		All other program service					6 176 626			
╉	g						6,176,636.			
	3	Investment income (includ	•				1,039,069.			10390
	4	other similar amounts)					1,000,000.			10350
	4 5	Income from investment of				F				
	5	Royalties		(i) Rea		(ii) Personal				
	6 2	Gross rents	6a	1,386,9		(ii) i cisonai				
		Gross rents Less: rental expenses	6b	1,000,1	0.					
		Rental income or (loss)	6c	1,386,9						
		Net rental income or (loss)	<u> </u>				1,386,973.			13869
		Gross amount from sales of	,,	(i) Securit		(ii) Other	-,,			10007
	<i>i</i> a	assets other than inventory	7a	2,270,2		() C				
	h	Less: cost or other basis	74	_,,	•					
,	D D	and sales expenses	7b	2,273,	707.					
	c	Gain or (loss)		-3,4						
		Net gain or (loss)					-3,488.			-3,4
		Gross income from fundraisi					,			,
	0 4	including \$ 1,								
		contributions reported on								
		Part IV, line 18		,	8a	68,550.				
	b				8b	253,839.				
		Net income or (loss) from				· · · · · · · · · · · · · · · · · · ·	-185,289.			-185,2
		Gross income from gamin		-						
		Part IV, line 19			9a					
	b	Less: direct expenses			9b					
		Net income or (loss) from			s					
		Gross sales of inventory,								
		and allowances			10a					
	b	Less: cost of goods sold			10b					
	с	Net income or (loss) from	sales	of invento	ry					
						Business Code				
e	11 a	FOOD SERVICE AND CO	NCES	SIONS		900099	495,830.			495,8
enu	b	MISCELLANEOUS				900099	27,335.			27,3
Revenue	с									
٦		All other revenue								
		Total. Add lines 11a-11d					523,165.	C 1 - C	_	
	12	Total revenue. See instruction	nne				18,774,196.	6,176,636.	0.	27604

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Form 990 (2022)

THE ADLER PLANETARIUM Part IX Statement of Functional Expenses

Do no	Check if Schedule O contains a response t include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8Ł	o, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1 (Grants and other assistance to domestic organizations				
а	and domestic governments. See Part IV, line 21				
2 (Grants and other assistance to domestic				
i	ndividuals. See Part IV, line 22				
3 (Grants and other assistance to foreign				
c	organizations, foreign governments, and foreign				
i	ndividuals. See Part IV, lines 15 and 16				
4 E	Benefits paid to or for members				
5 (Compensation of current officers, directors,				
t	rustees, and key employees	1,386,631.	589,991.	527,404.	269,236
6 (Compensation not included above to disqualified				
р	persons (as defined under section 4958(f)(1)) and				
р	persons described in section 4958(c)(3)(B)				
7 (Other salaries and wages	6,426,746.	4,364,464.	1,568,447.	493,835
B F	Pension plan accruals and contributions (include				
S	section 401(k) and 403(b) employer contributions)	291,255.	112,530.	166,314.	<u>12,411</u> 62,863
	Other employee benefits	673,829.	427,898.	183,068.	62,863
) F	Payroll taxes	590,678.	390,476.	148,477.	51,725
1 F	Fees for services (nonemployees):				
a M	Management				
bι	_egal	66,814.		66,814.	
c A	Accounting	124,800.		124,800.	
d L	_obbying				
e P	Professional fundraising services. See Part IV, line 17				
f l	nvestment management fees	60,485.		60,485.	
g (Other. (If line 11g amount exceeds 10% of line 25,				
C	column (A), amount, list line 11g expenses on Sch 0.)	1,110,437.	641,835.	343,770.	124,832 9
2 /	Advertising and promotion	22,579.	15,661.	6,909.	9
3 (Office expenses	470,019.	418,100.	44,465.	7,454
4 l	nformation technology	204,511.	156,860.	34,951.	12,700
5 F	Royalties				
6 (Decupancy	462,508.	449,679.	10,002.	2,827
7 7	Fravel	77,282.	65,252.	8,355.	3,675
3 F	Payments of travel or entertainment expenses				
f	or any federal, state, or local public officials \dots				
9 (Conferences, conventions, and meetings				
-	nterest	678,666.	678,666.		
1 F	Payments to affiliates				
2 [Depreciation, depletion, and amortization	2,124,300.	2,110,788.	10,535.	2,977
	nsurance	219,941.	211,335.	6,710.	1,896
a li	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If ine 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
	CLEANING AND MAINTENANC	472,845.	454,664.	14,175.	4,006
_	EQUIPMENT, LEASES AND R	415,596.	382,148.	30,164.	3,284
-	FOOD SERVICE AND CONCES	16,834.	3,828.	7,857.	5,149
d =					,
-	All other expenses	136,017.	83,070.	51,263.	1,684
	Total functional expenses. Add lines 1 through 24e	16,032,773.	11,557,245.	3,414,965.	1,060,563
	Joint costs . Complete this line only if the organization		,,,		_,:::;;::;::
	eported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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232010 12-13-22

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Form 990 (2022)

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THE ADLER PLANETARIUM Part X Balance Sheet

36-6210902 Page 11

		Check if Schedule O contains a response or note	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			954,945.	1	153,562.
	2	Savings and temporary cash investments			5,415,060.	2	10,337,573.
	3	Pledges and grants receivable, net		Г	3,110,585.	3	1,821,396.
	4	Accounts receivable, net		363,762.	4	356,091.	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa		· · · ·			
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualifi	•	F			
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net		· · · · · · · · · · · · ·		7	
Assets	8	Inventories for sale or use				8	
As	9	_			323,827.	9	324,732.
	10a	Land, buildings, and equipment: cost or other			· ·		
		basis. Complete Part VI of Schedule D	10a	81,313,549.			
	b	Less: accumulated depreciation		61,488,899.	21,101,575.	10c	19,824,650.
	11		-		29,203,580.	11	32,150,648.
	12	Investments - other securities. See Part IV, line 1		Г	1,587,373.	12	2,164,765.
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			62,060,707.	16	67,133,417.
	17	Accounts payable and accrued expenses			1,375,107.	17	1,667,050.
	18	Grants payable				18	
	19	Deferred revenue			1,229,705.	19	998,247.
	20				27,000,000.	20	27,000,000.
	21	Escrow or custodial account liability. Complete F				21	
s	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa					
lide		controlled entity or family member of any of thes				22	
Li	23	Secured mortgages and notes payable to unrelate	-	F		23	
	24	Unsecured notes and loans payable to unrelated		Г		24	
	25	Other liabilities (including federal income tax, pay		Г			
		parties, and other liabilities not included on lines	17-24).	Complete Part X			
		of Schedule D			2,981,574.	25	1,289,521.
	26	_			32,586,386.	26	30,954,818.
		Organizations that follow FASB ASC 958, chee	ck here	X			
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			19,594,466.	27	24,445,100.
Ba	28	Net assets with donor restrictions			9,879,855.	28	11,733,499.
pur		Organizations that do not follow FASB ASC 95	58, chec	k here			
гF		and complete lines 29 through 33.					
S S	29					29	
set	30	Paid-in or capital surplus, or land, building, or eq	uipment	fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc		Г		31	
Nei	32	Total net assets or fund balances			29,474,321.	32	36,178,599.
	33	Total liabilities and net assets/fund balances			62,060,707.	33	67,133,417.
							Form 990 (2022)

Form 990 (2022)

Form	990 (2022) THE ADLER PLANETARIUM	36-	-6210902	2 P	_{age} 12
	t XI Reconciliation of Net Assets				<u>.u</u>
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,7	74,1	L96.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,0		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,74	41,4	123.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	29,4	74,3	321.
5	Net unrealized gains (losses) on investments	5	1,93	12,9	941.
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 on Schedule O)	9	2,04	49,9)14.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	36,1	78,5	<u>599.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ı	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?		2 b		
	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				
	review, or compilation of its financial statements and selection of an independent accountant?			: X	+
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3</u> a		—
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

Form **990** (2022)

232012 12-13-22

Department of the Treasury Internal Revenue Service

(Form 990)

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

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Nan	ne or	ne organization	אגזם משזחג						
Pa	art I	Reason for Public (ADLER PLAN		omplete th	nie nart) S	ee instruction		6-6210902
								13.	
	organ	nization is not a private found	-	-	•		()(A)(;)		
1 2	\square	A church, convention of ch A school described in sect					I)(A)(I).		
2	\square					/h///////	::)		
3 4	\square	A hospital or a cooperative A medical research organiz						Viii) Enter	the hospital's name
4		city, and state:	ation operated in col	njunction with a nospital	described	III Sectio			the hospital s hame,
5		An organization operated for	or the benefit of a co	llege or university owned	or operat	ed by a do	vernmental u	nit describe	ad in
5		section 170(b)(1)(A)(iv). (C			or operation	ca by a go	vonnontara		
6		A federal, state, or local gov		nental unit described in	section 17	70(h)(1)(A)	(1)		
	X	An organization that norma	-					ne deneral r	ublic described in
'		section 170(b)(1)(A)(vi). (C		That part of its support if	onna gove			ie general j	
8		A community trust describe		(1)(A)(vi) (Complete Par	• II)				
9	\square	An agricultural research org				ed in coniu	inction with a	land-grant	college
Ŭ		or university or a non-land-g	-			-		-	-
		university:	grant conogo or agno			lame, eny	, and state of	the conege	
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns. membersh	ip fees, and	d gross receipts from
		activities related to its exer							
		income and unrelated busir							
		See section 509(a)(2). (Con				eee aequi		,aa	
11		An organization organized a		ively to test for public sat	etv. See	section 50)9(a)(4).		
12	\square	An organization organized a	-	•	•			rrv out the	purposes of one or
		more publicly supported or	•	•	•			•	• •
		lines 12a through 12d that							
а		Type I. A supporting orga						-	aivina
		the supported organization	-	-	• • • •	-			
		organization. You must c							.99
b	,	Type II. A supporting org	-		ion with its	s supporte	ed organizatio	n(s), by hay	rina
-		control or management o	-				-		-
		organization(s). You mus			and percent			90o oo.pr	
с	: [Type III functionally inte	-		in connect	tion with. a	and functional	lv integrate	d with.
-		its supported organization							,
d	ı 🗆	Type III non-functionally	.,.				-	ted organiz	zation(s)
		that is not functionally int	• •				• •	•	
		requirement (see instructi	•	e ,	•		•		
е		Check this box if the orga						II. Type III	
		functionally integrated, or					JI , JI	, ,,	
f	Ent	er the number of supported of							
g	Pro	vide the following information							
		(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi		(v) Amount o	-	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions)
- -									
Tota	al						1		

Part II

THE ADLER PLANETARIUM

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	8820471.	7776817.	7801112.	13194712.	7690963.	45284075.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf	1663289.	1753493.	1757932.	2153925.	2146167.	9474806.		
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge		0 = 0 0 0 1 0						
4	Total. Add lines 1 through 3	10483760.	9530310.	9559044.	15348637.	9837130.	54758881.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,						2040041		
	column (f)						3747041.		
	Public support. Subtract line 5 from line 4.						51011840.		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a)2018 10483760.	(b) 2019	(c) 2020	(d)2021 15348637.	(e) 2022	(f) Total 54758881.		
	Amounts from line 4	10483/60.	9530310.	9559044.	15348637.	983/130.	54/50001.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	0000040	1 5 0 4 0 6 7		100000	0406040	0520756		
	and income from similar sources	2227347.	1524067.	682,964.	1679336.	2426042.	8539756.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital			10 000	202 040		1040000		
	assets (Explain in Part VI.)	616,167.	369,645.	1/,0/6.	323,240.				
	Total support. Add lines 7 through 10						65147930.		
	Gross receipts from related activities,	•	,				,211,139.		
13	First 5 years. If the Form 990 is for the		rst, second, third, f	fourth, or fifth tax y	year as a section 5	01(c)(3)			
800	organization, check this box and sto					<u></u>			
	ction C. Computation of Public						78.30 %		
	Public support percentage for 2022 (14			
	Public support percentage from 2021					15			
108	33 1/3% support test - 2022. If the						T		
Ľ	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
47.					10 10a au 10b a				
1/8	17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,								
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
p.		-			-	7a, and line 15 is			
C	10% -facts-and-circumstances test more and if the organization mosts the providence of the providen	-							
	more, and if the organization meets the								
18	organization meets the facts-and-circ Private foundation. If the organization		-						
10				a, 100, 17a, 01 17b			<u>s</u>		
						Solicadio A			

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	Schedule A	Form	990) 2022
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THE ADLER PLANETARIUM

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

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

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	? (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disgualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support		•		•	•	•
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	? (f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organ	nization,
		-					
Sec	tion C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2022 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2021		-			16	%
	tion D. Computation of Inves					• •	· · · · · ·
	Investment income percentage for 20			ne 13. column (fi)		17	%
	Investment income percentage from					18	% %
	33 1/3% support tests - 2022. If the					· · · ·	
154	more than 33 1/3%, check this box a						
h	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization						
		T GIG HOL CHECK A	JUA UN III E 14, 19	a, or reb, check l	THIS DUN ATTU SEE ITS		lule A (Form 990) 2022
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902	226 147228 105845				ADLER PL	ANETARI	UM 10584

THE ADLER PLANETARIUM

1

2

3a

Yes No

Part IV Supporting Organizations

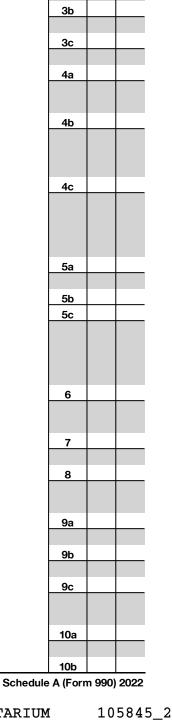
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

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	(Form 990) 2022		ADLER
Part IV	Supporting Org	janizations	(continued)

THE ADLER PLANETARIUM

1

2

1

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If the describe in Part VI how the supported organization()			

directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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

<u> </u>	Dervis		JIIIOIIEU	uie supp		yanizalion.	
Sectio	n C.	Type I	I Suppo	orting	Organi	zations	

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

Section D.	All Type III	Supporting	Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the	- vear	(see instructions).
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the	s your	(

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

c 🗌	The or	ganization suppor	ted a governme	ntal entity.	Describe in F	Part VI how	you supported	a governmental entit	y (see instruction	s).
-----	--------	-------------------	----------------	--------------	----------------------	-------------	---------------	----------------------	--------------------	-----

21

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

2a 2b 3a 3b Schedule A (Form 990) 2022

Yes No

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

THE ADLER PLANETARIUM

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

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

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

THE ADLER PLANETARIUM

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continue	<u>ed)</u>	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	6	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(ii) Underdistributions Pre-2022	;	(iii) Distributable Amount for 2022	
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
	From 2021				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
•	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
Ū	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
· ·					

Schedule A (Form 990) 2022

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS IN	ICOME		
2018 AMOUNT: \$	23,176.		
2019 AMOUNT: \$	16,129.		
2020 AMOUNT: \$	0.		
2021 AMOUNT: \$	6,864.		
2022 AMOUNT: \$	27,335.		
FUNDRAISING			
2018 AMOUNT: \$	128,130.		
2019 AMOUNT: \$	95,550.		
2020 AMOUNT: \$	0.		
2021 AMOUNT: \$	0.		
2022 AMOUNT: \$	0.		
FOOD SERVICE AND	CONCESSIONS		
2018 AMOUNT: \$	464,861.		
2019 AMOUNT: \$	257,966.		
2020 AMOUNT: \$	17,076.		
2021 AMOUNT: \$	316,376.		
2022 AMOUNT: \$	495,830.		
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Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

36-6210902

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

THE ADLER PLANETARIUM Organization type (check one):

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

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

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

General Rule

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

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

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THE ADLER PLANETARIUM

36-6210902

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$2,146,167.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>2,050,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	, , , , , , , , , , , , , , , , ,	\$439,254.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$401,131.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$340,944.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$308,957.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

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Schedule B (Form 990) (2022)

THE ADLER PLANETARIUM

Name of organization

Employer identification number

36-6210902

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X Person Payroll 250,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 8 X Person Payroll 250,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 9 X Person Payroll 225,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

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Schedule B (Form 990) (202

Name of organization

Employer identification number

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THE ADLER PLANETARIUM

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
 		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

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Name of o	organization		Employer identification number				
THE A	DLER PLANETARIUM		36-6210902				
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	 h) through (e) and the following line entry. charitable, etc., contributions of \$1,000 or less 	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations				
(a) No. from Part I	Use duplicate copies of Part III if additional (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(a) Transfer of sitt					
	Transferee's name, address, a	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee				
(a) No. from			(d) Description of how gift is held				
Part I	(b) Purpose of gift	(c) Use of gift					
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(h) D						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		1					
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
223454 11-15	5-22		Schedule B (Form 990) (2022)				

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				<u>.</u> .					45 00 47
SC	HEDULE D	Supplementa					-	OMB No. 15	045-0047
(Forn	n 990)		nization answered "Yes" on Form 990,), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.					ZUZ	ZZ
	ment of the Treasury	А	ttach to Form 990.					Open to	
	Revenue Service	Go to www.irs.gov/Form99	o for instructions an	na the	e latest information.	Em	alovor	Inspecti identificatio	
Nam	e of the organizatio	THE ADLER PLANETAR	TUM					6-62109	
Par	t I Organiza	tions Maintaining Donor Advise	-	er Si	milar Funds or Ac	cour			
	organizatior	n answered "Yes" on Form 990, Part IV, lin	e 6.					·	
			(a) Donor ac	lvised	d funds	(b) Fur	nds and	l other accou	ints
1	Total number at en	ld of year							
2		f contributions to (during year)							
3	Aggregate value of	f grants from (during year)							
4	Aggregate value at	end of year							
5	-	n inform all donors and donor advisors in v	-						
		n's property, subject to the organization's						Yes	No No
6	•	n inform all grantees, donors, and donor a	•	Ū		-			
		oses and not for the benefit of the donor o			• •	Ũ			<u> </u>
Par	impermissible priva							Yes	No
		ation Easements. Complete if the org			" on Form 990, Part IV,	line 7.			
1		ervation easements held by the organization of land for public use (for example, recrea		Siy).	Dressnution of a hist	ricolly	import	ant land area	
		f natural habitat	lion of education)	\square	Preservation of a histo Preservation of a certi	-			1
		of open space			Freservation of a certi	neu m	SLONC S	liuciure	
2		through 2d if the organization held a qualif	ied conservation cor	otribut	tion in the form of a co	neorva	tion pa	soment on th	no last
~	day of the tax year	o o .		iti ibu				t the End of th	
а		nservation easements				2a			
b						2b			
с	•	ation easements on a certified historic stru				2c			
d		vation easements included in (c) acquired a							
	historic structure li	sted in the National Register	• • •			2d			
3	Number of conserv	vation easements modified, transferred, rel				zation	during	the tax	
	year								
4	Number of states v	where property subject to conservation eas	ement is located						
5	Does the organizat	ion have a written policy regarding the per	iodic monitoring, ins	pectio	on, handling of				
	,	prcement of the conservation easements it						Yes	No
6	Staff and volunteer	r hours devoted to monitoring, inspecting,	handling of violation	s, and	d enforcing conservatio	n ease	ements	during the ye	ear
7	Amount of expense	es incurred in monitoring, inspecting, hanc	lling of violations, and	d enfo	orcing conservation eas	semen	ts durir	ng the year	
-						<i>(</i>)			
8		vation easement reported on line 2(d) abov	, ,		()()()	.,			
9	and section 170(h)	(4)(B)(ii)? he how the organization reports conservation						Yes	└── No
9		c			•			ho	
		I include, if applicable, the text of the footr punting for conservation easements.	iote to the organizati	0151	ההמווטומו שנמנכווופוונש נוומ	ai 0850	รามช่อ ไ		
Par	t III Organiza	tions Maintaining Collections of	Art, Historical	Trea	sures, or Other S	imila	r Ass	ets.	
		the organization answered "Yes" on Form							
1a		elected, as permitted under FASB ASC 95		rever	nue statement and bala	ance sl	heet wo	orks	
		asures, or other similar assets held for put	•						
		Part XIII the text of the footnote to its finar							
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its rev	enue	statement and balance	sheet	works	of	
	-	ures, or other similar assets held for public							
		ng amounts relating to these items:							
	(i) Revenue includ	ded on Form 990, Part VIII, line 1					\$		
							\$		
2	If the organization	received or held works of art, historical tre					e		
	the following amou	ints required to be reported under FASB A	SC 958 relating to th	nese it	tems:				

					-			-				-		
а	Re	/en	ue	inc	luc	ded	on	Forn	n 99	0, I	Part	VIII,	line 1	
							-	-	~~ .	_				

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22 \$ \$

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Sche		ER PLANETAR						210902		age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or C	Other S	Similar	Asse	ts _{(contir}	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that m	ake sigr	nificant u	ise of its	5		
	collection items (check all that apply):									
а	X Public exhibition	d	X Loan or excl	nange program						
b	X Scholarly research	e	Other							
с	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's	s exemp	ot purpos	se in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations of	f art, historical treas	ures, or other s	imilar a	ssets	_	_		_
	to be sold to raise funds rather than to be ma					<u></u>		Yes		No
Par			te if the organization	n answered "Ye	es" on F	orm 990	, Part IV	, line 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi						Г		_	٦.,
	on Form 990, Part X?						L	Yes		No
D	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:					Amoun	+	
	Designing belongs					10		Amoun		
	Beginning balance					1c 1d				
	Additions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo					· · · · ·		Yes		No
	If "Yes," explain the arrangement in Part XIII.						······ —			1
Par).				-
		(a) Current year	(b) Prior year	(c) Two years b		d) Three y	ears back	(e) Four	' years	back
1a	Beginning of year balance	5,246,002.	5,927,790.	5,385,8	364.	5,5	95,246	. 4	,508,	543.
b	b Contributions 1,050,800.									
с	c Net investment earnings, gains, and losses 391, 411388, 126. 638, 4639, 606. 246, 5									559.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	219,948.	293,662.	96,5	537.	1	99,776	•	210,	656.
f	Administrative expenses									
g	End of year balance	5,417,465.	5,246,002.		790.	5,3	85,864	. 5	,595,	246.
2	Provide the estimated percentage of the curr		(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment	.0000	_%							
b	Permanent endowment 85.8100	%								
с		%								
•	The percentages on lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that are held an	a administered	for the			l	Yes	No
	organization by:							3a(i)	X	
	(i) Unrelated organizations									x
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related organiza	tions listed as require	nd on Schedule R?					3a(ii)		
4	Describe in Part XIII the intended uses of the							00		
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, P	art X, lir	ne 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other	(c) Acc	cumulate	d	(d) Boo	k valu	e
		basis (investm	ent) basis	(other)	• •	reciation		. ,		
1a	Land									
	Buildings		41,84	9,999. 3	30,3:	23,23	31.	11,52	6 <u>,</u> 7	68.
	Leasehold improvements		7,93	6,320.		05,20)1.	4,83	1,1	19.
	Equipment			3,611.		84,49		1,46		
	Other		23,27	3,619. 2	21,2	75,97		1,99		
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	(, column (B), line 10)c.)				19,82	4,6	50.
						:	Schedu	le D (Forn	n 990)	2022

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	(Form 990) 2022			PLANETARIUM
Part VII	Investments -	Other Se	curities.	

Complete if the organization answered "Yes" o	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DEFERRED PENSION BENEFIT P	LAN		
(3) LIABILITY			1,245,510.
			11 011
(4) CAPITAL LEASE OBLIGATIONS			44,011.
			44,011.
(4) CAPITAL LEASE OBLIGATIONS			44,011
(4) CAPITAL LEASE OBLIGATIONS (5)			44,011.
(4) CAPITAL LEASE OBLIGATIONS (5) (6)			44,011.
 (4) CAPITAL LEASE OBLIGATIONS (5) (6) (7) 			1,289,521.

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

Schedule D (Form 990) 2022

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Sche	dule D (Form 990) 2022 THE ADLER PLANETARIUM			36-	6210902	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wit	h Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total revenue, gains, and other support per audited financial statements			1	23,024	,429.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	1,912,941.			
b	Donated services and use of facilities	2b	94,024.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d	2,303,753.			
е	Add lines 2a through 2d			2e	4,310	<u>,718.</u>
3	Subtract line 2e from line 1			3	18,713	<u>,711.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	60,485.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		<u>,485.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	18,774	<u>,196.</u>
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents Wi	th Expenses per I	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total expenses and losses per audited financial statements			1	16,320	<u>,151.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	. 2a	94,024.	4		
b	Prior year adjustments	2b		4		
с	Other losses	2c		4		
d	Other (Describe in Part XIII.)	2d	253,839.			
е	Add lines 2a through 2d			2e		,863.
3	Subtract line 2e from line 1			3	15,972	,288.
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	60,485.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		,485.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	16,032	,773.
Pa	rt XIII Supplemental Information.					

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

PART III, LINE 1A:

IN CONFORMITY WITH THE ACCOUNTING PRACTICES GENERALLY FOLLOWED BY MUSEUMS,	
THE ADLER'S COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND	
CONTRIBUTIONS SINCE THE ADLER'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS ON	
THE STATEMENT OF FINANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE	
RECORDED AS DECREASES IN NET ASSETS WITH DONOR RESTRICTIONS IN THE YEAR IN	
WHICH THE ITEMS ARE ACQUIRED. THE ADLER'S COLLECTIONS ARE MADE UP OF MORE	
THAN 7,000 ARTIFACTS AND ARCHIVAL WORKS OF HISTORICAL SIGNIFICANCE THAT	
ARE HELD FOR EDUCATIONAL, RESEARCH, SCIENTIFIC, AND CULTURAL PURPOSES.	
THE COLLECTIONS ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM THEIR	
SALES TO BE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS OR TO SUPPORT THE	
DIRECT CARE OF COLLECTIONS. DIRECT CARE OF COLLECTIONS IS DEFINED BY THE	_
232054 09-01-22 Schedule D (Form 990) 2022 33	
12590226 147228 105845 2022.05060 THE ADLER PLANETARIUM 10584	5_2

ADLER AS COSTS THAT PROLONG THE LIFE AND USEFULNESS OF THE COLLECTION, COSTS PROVIDING BENEFITS THAT ENHANCE THE QUALITY AND PROTECTION OF THE COLLECTION, AND COSTS THAT MAKE A PHYSICAL IMPACT ON COLLECTIONS OBJECTS, INCREASING OR RESTORING THEIR CULTURAL OR SCIENTIFIC VALUE. ROUTINE AND ONGOING EXPENDITURES ARE NOT CONSIDERED DIRECT CARE OF COLLECTIONS.

PART III, LINE 4:

FROM ITS INCEPTION, THE ADLER PLANETARIUM HAS HELD ONE OF THE WORLD'S FOREMOST COLLECTIONS OF INSTRUMENTS RELATED TO ASTRONOMY. TODAY, THE ADLER POSSESSES A MAJOR COLLECTION OF HISTORIC SCIENTIFIC INSTRUMENTS; RARE BOOKS AND OF WORKS ON PAPER DEALING WITH ASTRONOMY, SCIENTIFIC INSTRUMENTS AND RELATED SUBJECTS; A COLLECTION OF REPLICAS AND SIMILAR "HANDS-ON" OBJECTS USED FOR EDUCATIONAL PURPOSES; AND ARCHIVES PERTAINING TO THE HISTORY OF THE ADLER ITSELF. THE ADLER'S HISTORIC SCIENTIFIC INSTRUMENT COLLECTION CONTAINS MORE THAN 2,800 THREE-DIMENSIONAL ARTIFACTS DATING FROM THE 12TH THROUGH THE 20TH CENTURIES, RANGING FROM MEDIEVAL ASTROLABES AND ARMILLARY SPHERES TO SUNDIALS, PLANETARIA, AND TELESCOPES FROM THE SCIENTIFIC REVOLUTION TO CONTEMPORARY INSTRUMENTS FOR CELESTIAL NAVIGATION. THE RARE BOOK COLLECTION (NUMBERING ABOUT 2,700) AND WORKS ON PAPER COLLECTION (MORE THAN 750 WORKS) COVER SUBJECTS RELATED TO ASTRONOMY AND SPACE SCIENCE. THE EDUCATIONAL COLLECTION FURNISHES REALISTIC MODELS AND REPLICAS FOR USE BY THE EDUCATORS ON THE MUSEUM FLOOR AND OFF-SITE, IN SITUATIONS WHERE THE USE OF DELICATE ARTIFACTS WOULD BE INAPPROPRIATE.

PART V, LINE 4: THE ENDOWMENT FUNDS ARE TO BE USED PRIMARILY FOR THE MAINTENANCE AND OPERATION OF THE FACILITIES OF THE ADLER PLANETARIUM. THE ADLER PLANETARIUM HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT Schedule D (Form 990) 2022 232055 09-01-22 34

Schedule D (Form 990) 2022 THE ADLER PLANETARIUM Part XIII Supplemental Information (continued)	36-6210902 Page 5
ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUN	
SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE P	
OF THE ENDOWMENT ASSETS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EVENT DIRECT EXPENSES	253,839.
CHANGE IN VALUE OF DEFINED BENEFIT PENSION PLAN	1,472,522.
UNREALIZED LOSS ON INTEREST RATE SWAP	577,392.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES	253,839.
	Schedule D (Form 990) 2022

12590226 147228 105845

THE ADLER PLANE				36-62109	
Part I General Infor	mation on A	ctivities Out	side the United States. Compl	lete if the organization answered "	'Yes" on
Form 990, Part IV	/, line 14b.				
1 For grantmakers. Does	the organizatior	n maintain record	ds to substantiate the amount of its gra	ants and other assistance,	
the grantees' eligibility for	or the grants or a	assistance, and t	he selection criteria used to award the	e grants or assistance?	Yes 🗌 No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
United States.					
· · · ·	ne following Part		n be duplicated if additional space is r		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		(f) Total expenditures
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	for and
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)	describe specific type of service(s) in the region	investments
		in the region	recipients located in the regiony		in the region
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,					
AUSTRIA, BELGIUM	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	2,325.
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,					
AUSTRIA, BELGIUM	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	5,687.
NORTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	1,468.
NORTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	3,143.
NORTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	7,354.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	2,816.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	2,579.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	300.
3 a Subtotal	0	0			25,672.
b Total from continuation					
sheets to Part I	0	0			2,753.
c Totals (add lines 3a					
and 3b)	0	0			28 425

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

Schedule F (Form 990) 2022

232071 10-17-22

12590226 147228 105845

SCHEDULE F	Statement of Activities Outside the United States
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Schedule F (Form 990)	THE ADLE	R PLANET	ARIUM	36-621090	2 Page 1
Part I Continuatio	n of Activitie	s per Region	• (Schedule F (Form 990), Part I, line 3		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	 (e) If activity listed in (d) is a program service, describe specific type of service(s) in region 	(f) Total expenditures for region
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE TRAVEL	2,753.
Totals					2,753.

232181 04-01-22

Schedule F (Form 990) 2022

THE ADLER PLANETARIUM

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 needed.

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ecognized as charities by the f					1
			or counsel has provided a sect					
3 Enter total number of other organizations or entities								

Page 2

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Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. n ha duplicated if additional a Dout III o . . .

Schedule F (Form 990) 2022

THE ADLER PLANETARIUM

Part III can be duplicated if ac	in a space is needed			I			
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see</i> <i>Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

JU	neu	uie	
D	ort	V	

THE ADLER PLANETARIUM 36-6210902 Schedule F (Form 990) 2022 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. See instructions.

SCHEDULE G	Supplemental Information Regarding Fundraising or Gaming Activities								
(Form 990)	Complete if the	or if the	2022						
Department of the Treasury			Open to Public						
Internal Revenue Service Name of the organization		o www.irs.gov/Form990 for instru	ctions	and tl	ne latest information	n.	Employer ide	Inspection entification number	
	THE ADL	ER PLANETARIUM					36-6210	902	
	complete this par	Complete if the organization answe t.	ered "Y	es" or	n Form 990, Part IV, I	ine 17	7. Form 990-E2	Z filers are not	
 a X Mail solicitat b X Internet and c Phone solici d X In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written c ed in Form 990, P highest paid indiv	f X Solicita g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	ition of tion of I fundra (includ	non-g gover iising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Ye		
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser :ed in col. (i)	(vi) Amount paid to (or retained by) organization	
CCS FUNDRAISING - S	527 MADISON	CONSULTING ON CAPITAL	Yes	No					
AVENUE, 5TH FLOOR,	NEW YORK,	CAMPAIGN		X	0.		96,323.	96,323.	
							96,323.		
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from re	egistration	
IL									
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form 9	990 or	990-E	Ζ.		Schedul	e G (Form 990) 2022	

SEE PART IV FOR CONTINUATIONS

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THE ADLER PLANETARIUM

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

		of fundraising event contributions and gro	oss income on ⊦orm 990-	EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			CELESTIAL		NONE	(add col. (a) through
			BASH			col. (c)
a)			(event type)	(event type)	(total number)	
nue						
Revenue	1	Gross receipts	1,211,623.			1,211,623.
æ						
	2	Less: Contributions	1,143,073.			1,143,073.
	3	Gross income (line 1 minus line 2)	68,550.			68,550.
	4	Cash prizes				
	5	Noncash prizes				
ses						
Direct Expenses	6	Rent/facility costs				
Ä						
ščt	7	Food and beverages				
Dire						
	8	Entertainment				
	9	Other direct expenses	253,839.			253,839.
	10	Direct expense summary. Add lines 4 through	9 in column (d)			253,839.
		Net income summary. Subtract line 10 from li				-185,289.
Pa	irt I	Gaming. Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.				
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
nue				bingo/progressive bingo		col. (a) through col. (c))
Revenue						
£	1	Gross revenue				
s	2	Cash prizes				
Expenses						
é	3	Noncash prizes				
Ê						
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	── Yes %	Yes %	
	6	Volunteer labor	Νο	No	Νο	
	7	Direct expense summary. Add lines 2 through	1 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	the organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No
b	If "	No," explain:				
10a						
	We	ere any of the organization's gaming licenses re	voked, suspended, or te	rminated during the tax y	ear?	Yes No
		ere any of the organization's gaming licenses re Yes," explain:			/ear?	Yes No
					ear?	YesNo
					ear?	Yes No
t) If "					Yes No

Sch	edule G (Form 990) 2022	THE ADLER	PLANETARI	UM	36-6210902 Page 3
11	Does the organization conduct ga	aming activities with	nonmembers?		Yes No
				r of a partnership or other entity formed	
	to administer charitable gaming?				YesNo
13	Indicate the percentage of gaming				
a	The organization's facility				13a %
k	An outside facility				13b %
14	Enter the name and address of th	e person who prepa	res the organization	's gaming/special events books and reco	ords:
	Name				
	Address				
15a	Does the organization have a con	tract with a third pa	rty from whom the c	rganization receives gaming revenue?	Yes 🗌 No
k	If "Yes," enter the amount of gam	ina revenue receive	d bv the organizatio	n \$ and the a	amount
	of gaming revenue retained by the		, ,		
c	If "Yes," enter name and address				
	Name				
	Address				
40	O main a man and information.				
16	Gaming manager information:				
	Name				
	Coming manager companyation	¢			
	Gaming manager compensation	\$			
	Description of services provided				
	Director/officer	Employee		pendent contractor	
17	Mandatory distributions:				
a	Is the organization required under	state law to make	charitable distributio	ns from the gaming proceeds to	
	retain the state gaming license?				Yes 🗌 No
k	Enter the amount of distributions	required under state	e law to be distribute	ed to other exempt organizations or spen	t in the
	organization's own exempt activit				
Pa				uired by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,
	150, 150, 16, 810 170, 85	applicable. Also pr	ovide any additional	information. See instructions.	
SC	HEDULE G, PART I,	LINE 2B,	LIST OF TE	N HIGHEST PAID FUNDRA	AISERS:
(I) NAME OF FUNDRAL	SER: CCS F	UNDRAISING		
<u> </u>	,				
(I) ADDRESS OF FUND	RAISER:			
52	7 MADISON AVENUE,		NEW VORK	, NY 10022	
<u>52</u>	, MADIDON AVENUE,	<u> </u>	, NEW TORR	, 11 10022	
0000	23 10 27 22				Schedule G (Form 990) 2022

232083 10-27-22

Part IV	Supplemental Information	(continued)	
232084 04-01-	-22		Schedule G (Form 990)

12590226 147228 105845

SC	HEDULE J	Compensation Information	I	OMB No. 1	1545-004	47
(Fo	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			20	20	
•		Compensated Employees		20	22	,
Dana	terrant of the Treesury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Nam	e of the organization	1	Employer i			mber
		THE ADLER PLANETARIUM	36-6	5210902	2	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com		sidence			
		ation and gross-up payments Health or social club dues or initiation fee	S			
	Discretionary s	spending account Personal services (such as maid, chauffer	ır, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
-		rovision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
~	he all a she will be to be the					
3		ny, of the following the organization used to establish the compensation of the organization's				
		ctor. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Eventive Director, but eveloping the Det III.	Shito			
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.				
		committee Written employment contract ompensation consultant X				
	X Form 990 of o		ommittaa			
			ommittee			
4	During the year dic	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
•	organization or a re					
а	•	e payment or change-of-control payment?		4a		X
b		eive payment from a supplemental nonqualified retirement plan?				X
с	-	eive payment from an equity-based compensation arrangement?		1.		X
		les 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 of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the r	evenues of:				
а	The organization?			5a		X
		ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the n	5				
						X
b		ation?		6b		X
		r 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	10			
_				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		53.4958-6(c)?				<u> </u>
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	lule J (Forn	n 990)	2022

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36-6210902

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MICHELLE B. LARSON, PH.D.	(i)	422,145.	0.	588.	12,200.	495.	435,428.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RYUTARO MIZUNO	(i)	207,246.	0.	0.	8,872.	17,263.	233,381.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CATHLEEN BRUEGGEMANN	(i)	182,558.	0.	0.	7,456.	4,876.	194,890.	0.
VP, DEVELOPMENT - FORMER (THRU 09/22	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARCIA HEUSER	(i)	167,048.	0.	364.	5,811.	5,078.	178,301.	0.
VP, FINANCE AND ADMINISTRATION/CFO ((ii)	0.	0.	0.	0.	0.	0.	0.
(5) LAURA TROUILLE	(i)	156,919.	0.	0.	6,277.	283.	163,479.	0.
VP, CITIZEN SCIENCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANDREW JOHNSTON	(i)	156,439.	0.	18.	6,277.	283.	163,017.	0.
VP, ASTRONOMY & COLLECTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

22

ſ

ΖU **Open to Public**

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

	Inspection			
Employer identification number				
3	6-6210902			

THE ADLER PLANETARIUM

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 10	(d) Method of de noncash contribu	etermini	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	4	70,330	FAIR MARKET	VAI	υE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (FOOD FOR EVENTS)	Х	1	70,906	FAIR MARKET	VAI	'nΕ	
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement				
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of t	he initial co	ntribution, and whi	ch isn't required to be used	l for			
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	quires the review o	of any nonstandard contrib	utions?	31	Х	
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	r for which column (a) is ch	ecked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see t	the Instruct	tions for Form 990).	Schedule N	/I (Form	990)	2022

Schedule M (Form 990) 2022 THE ADLER PLANETARIUM Part II Supplemental Information. Provide the information relations

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE AMOUNT LISTED IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS

RECEIVED.

Schedule M (Form 990) 2022

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Supplemental Information to Form 990 or 990-EZ



36-6210902

THE ADLER PLANETARIUM

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

WITH ADLER'S SUPPORT, PEOPLE OF ALL AGES, BACKGROUNDS, AND ABILITIES GAIN THE CONFIDENCE TO EXPLORE THEIR UNIVERSE TOGETHER AND RETURN TO THEIR COMMUNITIES READY TO THINK CRITICALLY AND CREATIVELY ABOUT ANY CHALLENGE THAT COMES THEIR WAY.

IN 2022, THE PHYSICAL MUSEUM WAS REOPENED TO THE PUBLIC ON MARCH 4, AFTER A 2-YEAR BUILDING CLOSURE DUE TO COVID. THE MUSEUM HAS A NEW ONLINE TICKETING PLATFORM, AND A REINVENTED OPERATING MODEL THAT HAS SIGNIFICANTLY IMPROVED PER CAPITA TICKET REVENUE. THIS INCLUDES A NEW SCHEDULE OF PUBLIC HOURS EVERY WEDNESDAY EVENING FOR OUR EXHIBITIONS, SKY SHOWS, AND TELESCOPE VIEWING. NEW CONTENT OFFERINGS, LIKE THE TEMPORARY DISPLAY OF A FULL-SIZE REPLICA OF THE MARS PERSEVERANCE ROVER, DROVE GOOD ATTENDANCE. NEW, SCHOOL-GROUP-ONLY DAYS ARE PROVIDING MEANINGFUL EXPERIENCES AT THE MUSEUM FOR EDUCATORS AND THEIR STUDENTS.

ADLER IS ALSO CONTINUING ITS ENGAGEMENT IN ONLINE SPACES, WELCOMING MILLIONS OF PEOPLE AROUND THE WORLD INTO ADLER EXPERIENCES, THROUGH STORYTELLING AND ENGAGING DIRECTLY IN SCIENCE AND DISCOVERY.

 THROUGH ZOONIVERSE.ORG, AN ONLINE CITIZEN-SCIENCE PLATFORM CO-FOUNDED

 BY ADLER, OVER 2.6 MILLION VOLUNTEERS AROUND THE WORLD - MANY OF WHOM

 HAVE NO FORMAL SCIENTIFIC TRAINING - CONTRIBUTE TO REAL SCIENTIFIC

 RESEARCH PROJECTS. TO DATE, ZOONIVERSE VOLUNTEERS HAVE CLASSIFIED

 MILLIONS OF GALAXIES, INSPECTED HUNDREDS OF THOUSANDS OF TUBERCULOSIS

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

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THE ADLER PLANETARIUM

BACTERIA TO FIGHT ANTIBIOTIC RESISTANCE, DISCOVERED NEW EXOPLANETS, AND

HELPED RESEARCH TEAMS ACROSS DISCIPLINES TACKLE HUGE DATA SETS.

THROUGH A RICH ARRAY OF DIGITAL PROGRAMMING, FROM OUR SKYWATCH WEDNESDAY ONLINE PLANETARIUM SHOW TO OUR SKY OBSERVER'S HANGOUT YOUTUBE LIVESTREAM EVENTS WITH OUR PUBLIC OBSERVING TEAM TO OUR WOW! SIGNAL SCIENCE SKETCH COMEDY AND MUSICALS TO OUR ONLINE GOOGLE ARTS & CULTURAL EXHIBITIONS, THE ADLER HAS CONTINUED TO PROVIDE A RICH ARRAY OF OPPORTUNITIES TO FOSTER CONNECTIONS AND CREATE SPACE FOR THE WONDERS OF OUR UNIVERSE AND CASTING SCIENCE AS THE STORIES OF HUMANITY.

ADLER TEENS CONTINUED TO WORK WITH OUR SCIENTISTS AND ENGINEERS TO CARRY OUT THE FIRST-EVER LIGHT-POLLUTION SURVEY OF CHICAGO. THEY ALSO HELPED CHICAGO'S PALO FOREST PRESERVE SUCCESSFULLY EARN THE DESIGNATION AS THE WORLD'S LARGEST URBAN NIGHT SKY PLACE FROM THE INTERNATIONAL DARK SKY ASSOCIATION AND ORGANIZED TO EDUCATE OTHERS AND ADDRESS LIGHT POLLUTION IN THEIR OWN COMMUNITIES. WE ALSO CONTINUE TO NURTURE OUR PARTNERSHIP WITH CHILDREN'S HOSPITALS THROUGH OUR VIRTUAL FIELD TRIPS PROGRAM TO ENGAGE PEDIATRIC PATIENTS IN THE WONDERS OF OUR SOLAR SYSTEM AND CORE CONCEPTS AROUND SIZE SCALE.

MAKING CONNECTIONS BETWEEN PEOPLE, IDEAS, AND OUR UNIVERSE DOESN'T JUST FEEL GOOD - IT DRIVES SCIENTIFIC PROGRESS. WHEN PEOPLE FEEL WELCOME IN THE SCIENTIFIC COMMUNITY, THEY DELIVER REAL RESULTS. THROUGH THE WONDER OF SPACE SCIENCE, THE ADLER CONNECTS PEOPLE, COMMUNITIES AND INSTITUTIONS SO WE CAN EXPLORE OUR UNIVERSE TOGETHER AND USE OUR COLLECTIVE KNOWLEDGE AND SKILLS TO CREATE A BETTER WORLD FOR EVERYONE.

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Schedule O (Form 990) 2022	Page 2	
Name of the organization THE ADLER PLANETARIUM	Employer identification number 36-6210902	
FORM 990, PART VI, SECTION A, LINE 1A:		
AN "EXECUTIVE COMMITTEE" CONSISTING OF THE CHAIR, VICE CHA	IRS, TREASURER,	
SECRETARY, PRESIDENT AND CEO, AND SIX (6) ADDITIONAL TRUST	EES (ONE OF WHICH	
MAY BE THE IMMEDIATE PAST CHAIR) ELECTED BY THE BOARD OF T	RUSTEES AT THE	
REGULAR ANNUAL MEETING OF THE BOARD OF TRUSTEES SHALL, WHEN THE BOARD OF		
TRUSTEES IS NOT IN SESSION, HAVE AND EXERCISE ALL OF THE A	UTHORITY OF THE	
BOARD OF TRUSTEES IN THE MANAGEMENT OF THE CORPORATION EXC	EPT AS PROVIDED	
IN THE ILLINOIS NOT FOR PROFIT CORPORATION ACT. THE EXECUT	IVE COMMITTEE	
SHALL REPORT ON ITS ACTIVITIES TO THE BOARD OF TRUSTEES AT	THE BOARD'S	
LEGALLY CONVENED MEETINGS. THE PRESIDENT AND CEO SHALL SER	VE AS EXECUTIVE	
SECRETARY TO THE EXECUTIVE COMMITTEE.		

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS JAMES J. O'CONNOR, SR. AND JAMES J. O'CONNOR, JR. HAVE A FAMILY RELATIONSHIP.

BOARD MEMBERS JOHN ESTEY AND AMELIA HUNTINGTON HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY MANAGEMENT OF THE ORGANIZATION AND IF ANY

QUESTIONS ARISE DURING THEIR REVIEW, THEY ARE ADDRESSED WITH THEIR PAID TAX

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PREPARER. A PRESENTATION OF THE FORM 990 IS PRESENTED TO THE FINANCE

COMMITTEE WHO HAS BEEN DELEGATED THE REVIEW RESPONSIBILITY. ALL BOARD

MEMBERS RECEIVE A COPY OF THE FINAL FORM 990, INCLUDING ALL APPLICABLE

SCHEDULES, PRIOR TO FILING THE FORM WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

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Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Name of the organization THE ADLER PLANETARIUM	Page : Employer identification number 36-6210902
IT IS THE POLICY OF THE ADLER PLANETARIUM, ITS BOARD OF	ŀ
· · · · · · · · · · · · · · · · · · ·	
COMMITTEES TO ENSURE THAT BOARD MEMBERS AND EMPLOYEES IN	
ACTIVITIES AVOID CONFLICTS OF INTEREST-ACTUAL, POTENTIAL	OR PERCEIVED-WHILE
PERFORMING THEIR MUSEUM-RELATED DUTIES. IN PARTICULAR, N	O PERSONS SHOULD
OBTAIN OR APPEAR TO OBTAIN SPECIAL ADVANTAGES FOR THEMSE	LVES, THEIR
RELATIVES, OR THEIR CLOSE ASSOCIATES AS A RESULT OF THEI	R AFFILIATION AS A
BOARD MEMBER OR EMPLOYEE. ALL OFFICERS, DIRECTORS AND KE	Y EMPLOYEES ARE
REQUESTED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE	ANNUALLY. THE
DISCLOSURES ARE REVIEWED BY EXECUTIVE STAFF AND IF A CON	FLICT IS DETERMINED
TO EXIST, THE MATTER IS BROUGHT TO THE EXECUTIVE COMMITT	EE FOR FURTHER
REVIEW. THE IMPLICATIONS IN PRACTICE FOR THIS POLICY VAR	Y FROM ACTIVITY TO
ACTIVITY AND THIS GENERAL POLICY SHOULD NOT LIMIT THE CO	OPERATION AND
MUTUAL ASSISTANCE THAT IS NECESSARY FOR THE EFFECTIVE FU	NCTIONING OF THE
ORGANIZATION. IN ADDITION, THE ADLER IS A MEMBER OF THE	AMERICAN
ASSOCIATION OF MUSEUMS AND SUBSCRIBES TO THE CODE OF ETH	ICS FOR MUSEUMS. IN
SUBSCRIBING TO THIS CODE, THE ADLER ASSUMES RESPONSIBILI	TY FOR THE ACTIONS
OF EMPLOYEES OF THEIR GOVERNING AUTHORITY AND VOLUNTEERS	IN THE PERFORMANCE
OF MUSEUM-RELATED DUTIES. A COPY OF THE CODE OF ETHICS F	OR MUSEUMS IS GIVEN
TO ALL NEW EMPLOYEES. IF A CONFLICT IS DETERMINED BETWEE	N A BOARD MEMBER
AND THE ORGANIZATION, THE CONFLICT IS NOTED AND THE BOAR	D MEMBER IS ASKED
TO ABSTAIN FROM ANY DISCUSSION OF OR VOTING ON ISSUES RE	LATED TO THAT
CONFLICT.	

FORM 990, PART VI, SECTION B, LINE 15:
THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES OF THE ADLER PLANETARIUM
IS RESPONSIBLE FOR THE ANNUAL REVIEW AND APPROVAL OF COMPENSATION FOR THE
PRESIDENT & CEO. IN JULY 2022, THE COMMITTEE ALSO REVIEWED THE SALARIES
FOR OTHER OFFICERS AND KEY EMPLOYEES. A COMPREHENSIVE SALARY BENCHMARKING
232212 10-28-22 Schedule O (Form 990) 2023

2022.05060 THE ADLER PLANETARIUM 105845_2

Name of the organization THE ADLER PLANETARIUM	Employer identification number 36-6210902
STUDY WAS COMPLETED IN 2023 FOR ALL STAFF POSITIONS, INCLU	DING OFFICERS AND
KEY EMPLOYEES, THAT CONSIDERED DATA FROM LOCAL AND NATIONA	L MUSEUM AND
CULTURAL INSTITUTIONS, AND PROFESSIONAL-BASED SERVICES FIR	MS. COMPARATIVE
INFORMATION FROM SIMILAR SIZED AND LOCATED NOT-FOR-PROFIT	PEER INSTITUTIONS
WAS ALSO REVIEWED FOR THE PRESIDENT & CEO AND OTHER OFFICE	RS AND KEY
EMPLOYEES. BASED ON THIS BENCHMARKING DATA, SALARIES WERE	THEN ADJUSTED
ACCORDING TO A STANDARDIZED FORMULA. THE PRESIDENT & CEO D	O NOT TAKE PART
IN ANY DECISIONS REGARDING THEIR OWN COMPENSATION. CONTEM	IPORANEOUS
DOCUMENTATION OF THE DELIBERATIONS AND DECISIONS ARE KEPT.	

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE NOT REQUIRED DISCLOSURES PURSUANT TO INTERNAL REVENUE CODE (IRC) SECTION 6104. THESE DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC AT THIS TIME. THE ADLER MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF DEFINED BENEFIT PENSION PLAN	1,472,522.
UNREALIZED LOSS ON INTEREST RATE SWAP	577,392.
TOTAL TO FORM 990, PART XI, LINE 9	2,049,914.

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