Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury internal Revenue Service

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

		nue Service	′ ▶ ⊺	he organization may have to use a copy of this return to satisfy state reporting req	uirem	ents.	Inspection	on
A	For th	ne 2009 ca	lendar	year, or tax year beginning July 1 , 2009, and ending Jul	ne 30		20 10	
В	Check if	applicable:	Please	C Name of organization Harvard Club of Chicago	DE	mployer i	identification i	number
1		change	use IRS	Doing Business As		36	611023	9
	Vame c		print or	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	ET	elephone	number	
	nitial re		type. See	P. O. Box 350	(8	47)	256-121	1
***************************************	ermina		Specific Instruc-	City or town, state or country, and ZIP + 4		***************************************	~~~	***************************************
		ed return	tions.	Kenilworth, IL 60043-0350	G G	ross receip	ts \$ 16	68,450
		on pending	F Nan	e and address of principal officer:	—		affiliates? Yes	
^	philogic	on hending	Paul			,	uded? Yes	(moreout)
1	Tax-ex	empt status					. (see instruction	
-				vardclubchicago.org H(c) Group				
				ration ☐ Trust ☐ Association ☐ Other ►	T		al domicile: []	
****	art I	Summ		ration [2] That [2] Association [2] Other [2] [2]	141 0	tato or log	jui dominono. 1	1
				The primary pur	nose	s of the	Club are t	0
	1	Briefly de	escribe	the organization's mission or most significant activities: The primary pur erests of Harvard University in the Chicago area; to interest students i	n the	aroa te	attand Ha	mard:
e				and engage in educational and community service activities for members				
au		and to p	romou	and engage in educational and community service activities for memi	Jei 5	and the	Comminging	y
Activities & Governance				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
્રે	1			if the organization discontinued its operations or disposed of more than 25% of its net ass	ets.	•		4.5"
બ્ ઇ				g members of the governing body (Part VI, line 1a)		3		45
ties				pendent voting members of the governing body (Part VI, line 1b)		4	***************************************	44
ξį				employees (Part V, line 2a)		5		0
Ac	6	Total nur	nber of	volunteers (estimate if necessary)	. -	6	•	350
				lated business revenue from Part VIII, column (C), line 12		7a		0
	b	Net unrel	ated b	isiness taxable income from Form 990-T, line 34		7b		n/a
				Prior Y			Current Ye	
ø	8	Contribut	tions ar	d grants (Part VIII, line 1h)		881		68,694
aug	9	Program	service	revenue (Part VIII, line 2g)		472		98,027
Revenue	10	0 Investment income (Part VIII, column (A), lines		me (Part VIII, column (A), lines 3, 4, and 7d)		880	1,459	
ш.				Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0		0
	12	Total reve	enue—a	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	141,	213	1	68,450
	13	Grants ar	nd simi	ar amounts paid (Part IX, column (A), lines 1-3)	35,	600		28,250
	14	Benefits	paid to	or for members (Part IX, column (A), line 4)		0		0
ses	15	Salaries,	other co	mpensation, employee benefits (Part IX, column (A), lines 5-10)		0		0
Expenses		,		draising fees (Part IX, column (A), line 11e)		0		0
ă				expenses (Part IX, column (D), line 25) ▶			A STATE OF S	
	1		_	(Part IX, column (A), lines 11a-11d, 11f-24f)	115,	513	1:	50,102
				Add lines 13-17 (must equal Part IX, column (A), line 25).	141,	113	1	78,352
				penses. Subtract line 18 from line 12		100	<	9,902>
o ses		···		Beginning of C	urrent	Year	End of Yea	ar
Assets or	20	Total ass	ets (Pa	rt X, line 16)	143,	047	1	12,018
t Ass	21			Part V line 26)	76.	867	,	55,455
		Net asse	ts or fu	nd balances. Subtract line 21 from line 20	66.	180		56,563
	rt II		ature					
		Under pe	nalties of	perjury, I declare that I have examined this return, including accompanying schedules and state	ments	, and to th	ne best of my k	nowledge
		and belie	f. it is tru	e, correct, and complete. Declaration of preparer (other than officer) is based on all information	of wh	nich prepa	irer has any kn	owledge.
Sig	ın		55	test hude	2 -	9-1	1	
He		Sign	ature of	fficer Da	te			***************************************
•••			St	ephen Lucado Treasurer				
		Type		name and title				
	**********	+		Date Check if self-	Prep	arer's ident	tifving number	
		Preparer' signature			instruction			
Paid				Letto L. Neat, 2/1// employed ►		pr	00503143	
	oarer's	Firm's na	me (or v	ours Alumni & Association Services, Inc.				
Use	Only	if self-em	ployed),	Addition of Association Control of Association		(847)	256-12	11
110	v the	address,		return with the preparer shown above? (see instructions)	10.	. 0-1/	✓ Yes	No
ivid	y uie	in to disci	GOO HIR	Total Tital the proparor shown above (see mandellong)	<u> </u>		v 100	., .10

Form 990 (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	The primary purposes of the Club are to promote the interests of Harvard University in the Chicago area; to interest
	students in the area to attend Harvard; and to promote and engage in educational and community service activities for members and the community.
	for members and the community.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
4	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: n/a) (Expenses \$ 86,266 including grants of \$ 0) (Revenue \$ 92,229)
	Member Educational Programs During the course of the fiscal year all alumni/ae (about 8,000+ individuals, including parents and guests are invited
	to participate in Club activities. Actual paid membership in the Club ranges from 1,200 to 1,300 each year. Programs
	are planned to provide continuing educational opportunities in a broad range of areas, including current affairs, the
	humanities, history, culture, sports, etc. In FY10 the Club offered over 30 different programs with attendance
	ranging from 18 to almost 300 participating and totaling almost 2,000 total attendees. Programs are planned for the
	membership at large as well as for specific segments of the membership, including recent graduates and women.
	Programs are held at different times and venues throughout the year to attract different segments of the
	membership.
4b	(Code: n/a) (Expenses \$ 21,236 including grants of \$ 20,000) (Revenue \$ 18,473)
	Scholarship Contributions:
	Each year the Club solicits contributions from alumni/ae, combined with funds from the Club's net income, to
	provide scholarship assistance to Chicago-area undergraduate students to pursue their education at Harvard. Over the last decade the Club has contributed \$25,000 or more each year to The Harvard Club of Chicago Scholarship
	Endowment Fund administered by Harvard University. Scholarship recipients are selected by Harvard University
	based on financial need in the name of and on behalf of the Club. During FY10 a contribution for \$20,000 was made.
	Income from this fund is used by Harvard to fund scholarships for the above students. In the last few years the Club
	has also allocated \$10,000 per year for financial assistance for a Chicago area graduate student(s) at Harvard who
	will be working in the non-profit sector upon graduation. This additional allocation was not made in FY10 due to
	lack of appropriate recipients.
4c	(Code: n/a) (Expenses \$ 3,415 including grants of \$ 0) (Revenue \$ 0)
	School Admissions Committee:
	Volunteer alumni/ae serve as interviewers of prospective undergraduate students applying to Harvard College. As
	alumni/ae they can answer students questions about Harvard as well as get an idea of the student's potential. About
	250 alumni/ae serve as interviewers each year for over 800+ student applicants, of whom approximately 50 or more
	are usually admitted by Harvard.
4d	Other program services. (Describe in Schedule O.)
40	(Expenses \$ 38,781 including grants of \$ 0) (Revenue \$ 5,798) Total program service expenses \$ 149,698

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	rt IV Checklist of Required Schedules		•	age .
	Chocklist of Hodalisa contaction		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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		✓
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		✓
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 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? <i>If "Yes," complete Schedule D, Part X.</i>			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		√
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
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		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓	
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		√
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 25	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		√
	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		<u>√</u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
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		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		√
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	√	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	✓	
		_	000	(0000)

-	The state of the s			9-			
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance		Yes	No			
	5 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		103	140			
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable						
h	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable						
Ŭ	gaming (gambling) winnings to prize winners?	1c	✓				
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 0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see						
	instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	3a		√			
L	this return?	3b		V			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	0.5					
₹a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial						
	account)?	4a		✓			
b	If "Yes," enter the name of the foreign country: ▶ n/a						
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank						
	and Financial Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V			
b	, , , , , , , , , , , , , , , , , , , ,	5b		V			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding						
62	Prohibited Tax Shelter Transaction?	5с 6а		1			
va	organization solicit any contributions that were not tax deductible?						
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	70					
	and services provided to the payor?	7a 7b					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year						
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal						
	benefit contract?	7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f					
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g					
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h					
	required?	/11					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
	organization, have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders						
a	aross meetine from members of shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b						

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	√	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		V
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		V
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_	,	
	of the governing body?	7a	V	
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	V	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	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 reached			_
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓
	tion B. Policies (This Section B requests information about policies not required by the Internation Control	ernal		
Rev	enue Code.)			
		40	Yes	No /
	Does the organization have local chapters, branches, or affiliates?	10a		V
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	406		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11		
11 /	form?			•
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a		/
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	124		_
b	rise to conflicts?	12b		
_				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		√
14	Does the organization have a written document retention and destruction policy?	14		√
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	/	
	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	V	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		1
	with a taxable entity during the year?	10a		_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	401		
800	the organization's exempt status with respect to such arrangements?	16b		<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None	-\(0\		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or 1024 if applicable), 100-100 (or 1024 if applicable), 10)(3)s (only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
10	Own website Another's website Upon request	of !==	0 K 0 - 1	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
20	policy, and financial statements available to the public.	rde e	f tha	
20	State the name, physical address, and telephone number of the person who possesses the books and reco organization: ► Winnie Lu, 2514 Laurel Lane, Wilmette, IL 60091; 847-256-1211		e	

Form 990 (2009)

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(C)						(D)	(F)	
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week	악	Ins	오	₩ ₩	en Hi	Fo	compensation from	compensation from related	amount of other
	Week	Individual trustee or director	Institutional trustee	Officer	Key employee	ghes	Former	the	organizations	compensation
		lual	tion	,	nplo	st co	1	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		Trus	a <u>t</u>		уеє) mg		(44-2/1099-141130)		and related
		stee	uste			ens				organizations
			ф			Highest compensated employee				
Arekapudi, Smitha										
Director	1	✓						0	0	0
Baird, Stephen W.	3							0	0	0
Vice President	3	✓		✓				0	0	
Berman, Nancy	2							0	0	0
Director	2	✓						U	0	
Bialek, Richard W.	1							0	0	0
Director	I	✓						U	U	0
Challenger, John A.	1							0	0	0
Director	I	✓						U	U	0
Chan, Shu Yan	1							0	0	0
Director	1	✓						U	0	
Choi, Paul L.	3							0	0	0
President	3	✓		✓				0	U	
Clark, Allison B.	1							0	0	0
Director		✓						0	U	<u> </u>
Cronin, Michael J.	2							0	0	0
Secretary		✓		✓				•	· ·	
Cupps, Danielle C.	1							0	0	0
Director	•	✓						•	·	
Doshi, Sameer H.	2							0	0	0
Director	_	✓						•	·	
Estep, Andrew	1							0	0	0
Director	•	✓						•	Ů	
Fairbank, III, Kellogg	3							0	0	0
Director	•	✓						•	Ů	
Falcon, Deon D.	2							0	0	0
Director	_	✓						•	·	
Gabbert, John C.	1							0	0	0
Director	•	✓								
Golla, Clare	1							0	0	0
Director		✓								

Page 7

Part VII Section A. Officers, Directors, Tru	ıstees, Key	Emp	loye	es,	and	d Hig	hest	Compensated	l Employees (co	ntinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	P or director	c Institutional trustee	officer	key employee	Highest compensated employee	Pormer Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Hammerman, Alan H. Vice President	3	/		>				0	0	0
Hastings, Robert A. Director	1	1						0	0	0
Hochstadt, Bruce A. Director	1	✓						0	0	0
Jacobs, J. Ethan Director	1	1						0	0	0
Keats, Walter L. Director	1	1						0	0	0
Knoebel, Jr., John E. Director	1	/						0	0	0
Lothan, Avram Director	1	✓						0	0	0
Lucado, Stephen P. Treasurer	2	1		✓				0	0	0
Mann, David E. Director	1	1						0	0	0
Mathias, Jr., John H. Director	1	✓						0	0	0
McCullagh, Suzanne F. Director	1	✓						0	0	0
McCurry, Margaret I. Director	1	✓						0	0	0
(see continuation on Schedule J-2)										
1b Total							>	0	0	0
2 Total number of individuals (including but reportable compensation from the organization)			ose	liste	ed a	bove) wh	no received mo	ore than \$100,00	0 in

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
None		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► None

Par	t VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns	0 50,491 0 0 0				
Contrik and ot	g	and similar amounts not included above Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	18,473 0	68,964			
	2a	Educational Programs Board Fees	Business Code 900099 900099	93,542 4,485	93,542 4,485	0	0
Program Service Revenue	c d			,,,,,,	,,,,,,		
Progra	f g	All other program service revenue . Total. Add lines 2a–2f	•	98,027	0	0	0
	3 4 5	Investment income (including dividend other similar amounts)	► Ind proceeds ►	1,459	1,459 0	0 0	0 0
	b	Gross Rents Less: rental expenses Rental income or (loss)	(ii) Personal				
		Net rental income or (loss) Gross amount from sales of assets other than inventory	(ii) Other	0	0	0	0
	С	Less: cost or other basis and sales expenses . Gain or (loss)		0	0	0	0
Other Revenue		Gross income from fundraising events (not including \$					
₹	С	Net income or (loss) from fundraising of		0	0	0	0
	b	Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses b					
	10a	Net income or (loss) from gaming active Gross sales of inventory, less returns and allowances		0	0	0	0
	С	Less: cost of goods sold b Net income or (loss) from sales of invent Miscellaneous Revenue		0	0	0	0
	b c	n/a 					
	е	All other revenue	🕨	0 168,450	99,486	0	0

Part IX Statement of Functional Expenses

Pai	Part IX Statement of Functional Expenses								
	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	28,250	28,250						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0						
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0						
4	Benefits paid to or for members	0	0						
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0				
7	Other salaries and wages	0	0	0	0				
8	Pension plan contributions (include section 401(k)								
	and section 403(b) employer contributions) .	0	0	0	0				
9	Other employee benefits	0	0	0	0				
10	Payroll taxes	0	0	0	0				
11	Fees for services (non-employees):								
а	Management	0	0	0	0				
b	Legal	10	0	10	0				
С	Accounting	10,171	5,261	4,910	0				
d	Lobbying	0	0	0	0				
е	Professional fundraising services. See Part IV, line 17	0			0				
f	Investment management fees	0	0	0	0				
g	Other	0	0	0	0				
12	Advertising and promotion	0	0	0	0				
13	Office expenses	43,927	41,557	2,370					
14	Information technology	13,803	1,635	12,168	0				
15	Royalties	0	0	0	0				
16	Occupancy	720.	0	720	0				

6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	_		_	
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				
	Management	0	0	0	0
	Legal	10	0	10	0
	Accounting	10,171	5,261	4,910	0
		0	0	0	0
	Lobbying	0			0
		0	0	0	0
	Investment management fees	0	0	0	0
g	Other	0	0	0	0
12	Advertising and promotion	43,927	41,557	2,370	
13	Office expenses	13,803			
14	Information technology	13,803	1,635	12,168	0
15	Royalties	720.	0		0
16	Occupancy		0	720	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses			_	
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	77,194	72,810	4,384	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization.	0	0	0	0
23	Insurance	500	0	500	0
24	Other expenses. Itemize expenses not				
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Misc. Expenses	3,777	185	3,592	0
b				,	
~					
d					
0					
f	All other expanses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	178,352	149,698	28,654	
26	Joint costs. Check here ▶ ☐ if following	170,002	1 10,000	20,001	
	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation	0	0	0	0
	iditation , , , , , , ,	U	U	U	
					Form 990 (2009)

Part X Balance Sheet

	נאַ	Balance Sneet	(A) Beginning of year		(B) End of year
\Box	1	Cash—non-interest-bearing	9,542	1	<5,594>
	2	Savings and temporary cash investments	110,940		102,699
	3	Pledges and grants receivable, net	0		0
	4	Accounts receivable, net	305	4	1,000
	5	Receivables from current and former officers, directors, trustees, key			·
	3	employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	0	6	0
ţ	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	20,394	8	12,258
۲	9	Prepaid expenses and deferred charges	0	9	1,655
.	10a	Land, buildings, and equipment: cost or 10a 0			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities		11	0
•	12	Investments-other securities. See Part IV, line 11		12	0
	13	Investments—program-related. See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11		15	0
-	16		143,047		112,018
	17	Accounts payable and accrued expenses	55,566		42,238
	18	Grants payable		18	0
	19	Deferred revenue	21,301		13,217
	20	Tax-exempt bond liabilities	0	20 21	0
ţi ţi	21	Escrow or custodial account liability. Complete Part IV of Schedule D	U	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key			
Lia		employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	^
١.	00			23	<u>0</u> 0
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0	24	0
	2 4 25	Other liabilities. Complete Part X of Schedule D	0		0
-	26	Total liabilities. Add lines 17 through 25	76,867		55,455
ses		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			53,100
auc	27	Unrestricted net assets	60,931	27	55,229
Bal	28	Temporarily restricted net assets	5,249		1,334
<u> </u>	29	Permanently restricted net assets	0	29	0
ੌΠ,		Organizations that do not follow SFAS 117, check here ▶ □			
or		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
; کِ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne :	33	Total net assets or fund balances	66,180		56,563
;	34	Total liabilities and net assets/fund balances	143,047	34	112,018

Pai	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: <a> Cash <a> Accrual <a> Other <a> Other <a> Cash <a>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b		√
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	За		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		<u> </u>

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

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. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Harvard Club of Chicago 36 6110239 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii), A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I **b** Type II **c** Type III-Functionally integrated e 🗌 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 119(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (ii) EIN (i) Name of supported (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support above or IRC section. governing document? col. (i) of your (i) organized in the (see instructions)) support? No Yes No Yes Yes Total

Sched	dule A (Form 990 or 990-EZ) 2009						Page 2
Par	Support Schedule for Org (Complete only if you chec	anizations l ked the box	Described in on line 5, 7,	Sections 17 or 8 of Part I	0(b)(1)(A)(iv) .)	and 170(b)(1)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		10 T C C C C C C C C C C C C C C C C C C	1000 at 1000 at 1000		E4-363-12-12-12-12	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					1	
6	Public support. Subtract line 5 from line 4.	HER RALL			1663.67360	E. WALLETTE	
	tion B. Total Support	() 0005	#1,0000	18000	/ 5 0000	() 0000	10.7
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4		ļ	/			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .		100074125760		在4个种类的	Secretary of the	1
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	ere	* * * * * * * * * * * * * * * * * * * *				
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2009 (line					14	%
15	Public support percentage from 2008 Sc						6/0
16a	33½ % support test – 2009. If the organiand stop here. The organization qualifies	as a publicly	supported orga	nization			▶ □
b	331/4 % support test - 2008. If the organi box and stop here. The organization qua						
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "forganization meets the "facts-and-circumstances" and the companization meets the compani	acts-and-circu	mstances" test,	check this box	and stop here	. Explain in Par	t IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstance organization meets the private foundation. If the organization did	acts-and-circur ances" test. The	mstances" test, organization qu	check this box alifies as a publi	and stop here. cly supported or	Explain in Particular ganization	IV how the

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

0	(Complete only if you checke	d the box of	I IIII 5 OI Fa	(L I.)			
	tion A. Public Support	() 6367	(1.) 0000	(1) 6555	(4) 0000	() 5000	10 T-1
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	79,630	79,063	64,032	60,861	66,694	350,280
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	40,637	22,892	32,232	79,472	98,027	273,260
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	o	0
6	Total. Add lines 1 through 5	120,267	101,985	96,264	140,333	164,721	623,570
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	0	0	0	0	0	0
	amount on line 13 for the year	0	0	0	0	0	0
8	Add lines 7a and 7b		out.				623,570
Sec	tion B. Total Support						020,070
************	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	120,267	101,985	96,264	140,333	164,721	623,570
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,771	5,160	4,376	880	1,459	14,646
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	2,771	5,160	4,376	880	1,459	14,646
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	123,038	107,145	100,640	141,213	166,180	638,216
14	First five years. If the Form 990 is for organization, check this box and stop			nd, third, fourth			` ' ' '
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2009 (lin	e 8, column (f)	divided by lin	e 13, column	(f))	15	98 %
16	Public support percentage from 2008 S	Schedule A, Pa	art III, line 15			16	98 %
Sec	tion D. Computation of Investmer	nt Income Pe	ercentage				
17	Investment income percentage for 200	9 [line 10c, col	umn (f) divided	by line 13, co	olumn (f)) .	17	2 %
18	Investment income percentage from 20	008 Schedule A	A, Part III, line	17		18	2 %
19a	33% % support tests—2009. If the organic is not more than 33% %, check this b	ox and stop he	ere. The organi	zation qualifies	as a publicly s	supported orga	nization 🕨 🗹
b	33% % support tests - 2008. If the organ						
20	line 18 is not more than 33%%, check this Private foundation . If the organization						
20	rivate inditidation. Il the organization	ala Hot CHECK	a box off file	T, 13a, UI 19D	LINE DE	V alla 200 115	TUGLIOTIS 📂 📖

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

2009

OMB No. 1545-0047

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

Open to Public Inspection

Name of the organization						Employer ider	Employer identification number
Harvard Club of Chicago						36	6110239
Part I General Information on Grants and Assistance	on Grants and	Assistance					
1 Does the organization maintain records to substantiate the	ain records to sub	stantiate the amou	int of the grants or as	le amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s' eligibility for the gr	rants or assistance, a	pu
the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	award the grants ization's procedur	or assistance? es for monitoring t	he use of grant funds	in the United States.			Yes No
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	ssistance to Go le 21, for any rec I-1 (Form 990) i	vernments and sipient that received additional spacers	Organizations in ti led more than \$5,0 e is needed	he United States. (00. Check this box	Somplete if the orgif no one recipient	anization answered received more that	"Yes" to
1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1) Harvard University Cambridge, MA 02138	Unknown	501(c)3	20,000	0	<u> </u>	n/a	Scholarships
							-
2) Harvard University Cambridge, MA 02138	Unknown	501(c)3	8,250	0	n/a	n/a	Internships
	1		1 T T T T T T T T T T T T T T T T T T T				
			TELEVISION OF THE PROPERTY OF		-		
	e e				- Construction of the Cons		
			A STATE OF THE STA		The same of the sa		
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	The state of the s			The same of the sa		The same of the sa	Antipologica de la constanta d
2 Enter total number of section 501(c)(3) and government organizations3 Enter total number of other organizations	01(c)(3) and govern rganizations .	ment organizations					1
For Privacy Act and Panerwork Beduction Act Notice see the Instructions for Form 990	uction Act Notice	see the Instructions	for Form 990	homitorio de contra de con	Cat No 50055P	With the distribution of the state of the st	Schedule I (Form 990) 2009
the control of the case of the second of the case of t				,			

Schedule I (Fo	Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(b) Number of (c) Amount of (d) Amount of recipients (f) Description of non-cash assistance (E) Method of valuation (book, recipients cash grant non-cash assistance (f) Description of non-cash assistance (f) Descr					Somplete this part to provide the information required in Part I, line 2, and any other additional information.	Part II; Grant #1: In FY10 the Club made a donation of \$20,000 to Harvard University to The Harvard Club of Chicago Scholarship Endowment Fund, currently	stered by Harvard. The annual earnings of this fund are then used to provide partial scholarships for Chicago area	undergraduates in line with Harvard's need-based financial aid criteria. The Club has been making scholarship donations to Harvard for over 100 years.
(b) Number of recipients		AND			ete this part to	on of \$20,000 to	by Harvard. The	d financial aid cr
(a) Type of grant or assistance	ıı'a				Part V Supplemental Information. Complete this part	Part II; Grant #1: In FY10 the Club made a donation	totaling several million dollars and administered by Harvard.	undergraduates in line with Harvard's need-based

Records of actual disbursements are kept at Harvard in the student's filles.

internships, and Harvard graduate students to perform full-year fellowships at Chicago area non-profit organizations. The actual financial grants are made by Part II; Grant #2: For more than a decade the Club has provided local organizational and financial assistance to Harvard undergraduates to perform summer Harvard. In FY10 the Club contributed \$8,250 to Harvard for this purpose. Records are kept both at Harvard and at the Club.

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

Inspection

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

Name of the Organization

Harvard Club of Chicago

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A)	(B)	(C)						(D)	(E)	(F)	
Name and title	Average hours	Posit	ion (d	checl	k all	that ap		Reportable	Reportable	Estimated	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
McGee, Leonard E.											
Director	1	✓						0	0		
McNitt, III, Willard C.											
Director	1	✓						0	0		
Messer, Joseph V.											
Director	1	✓						0	0		
Nagle, James											
Director	1	✓						0	0		
Offutt, Gerald M.	_										
Director	1	✓	_					0	0		
Onyeagoro, Chinwe Linda	-										
Director	1	✓						0	0		
Palay, Robert J.	1										
Director	1	✓						0	0		
Palmer, Julie Gage											
Director	1	/						0	0		
Ristic, Blasko C. Director	1	1						0	0		
Rozner, Elory A. Director	1	1						0	0		
Schneider, Joel H. Director	1	/						0	0		
Shepro, Richard W.	-	<u> </u>									
Director	1	1						0	0		
Star, James A. Director	1	/						0	0		
Stone, Jame H.	•	-						•			
Director	1	1						0	0		
Troy, Anne B.	-										
Assistant Secretary	1	1		1				0	0		
Zopp, Andrea L.		ľ		Ť							
Director	1	1						0	0		
										•	

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions With Interested Persons

► Complete if the organization answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047

Employer identification number

Harvard Club of Chicago						3	6		61	10239)	
Part I Excess Benefit Transactions												
Complete if the organization answer	red "Yes	on Fo	rm 990, Par	IV, line 2	5a or 25b, o	r Form 990)-EZ,	Part V,	, line 4	10b.∙		
1 (a) Name of disqualified person				(b) l	Description of	transaction						rected?
		-									Yes	No

				*************		******	-					
2 Enter the amount of tax imposed on to under section 4958	ne orgar	nization 	_		alified pers		ng the	year	> \$			
3 Enter the amount of tax, if any, on line	2, abo	ve, rein	nbursed by	the orga	anization				▶ \$			
Part II Loans to and/or From Interes	ted Per	reone								·····		
Complete if the organization ar			on Form 99	90, Part l'	V, line 26,	or Form 9	90-E	Z, Pai	rt V, I	ine 38	За.	
(a) Name of interested person and purpose	(b) Loan	to or from inization?		ginal	(d) Balan			default?	(f) App	(f) Approved by board or committee?		/ritten ment?
	То	From	-				Yes No		Yes	No	Yes	No
	,											

~										-2-31-37		
Total Part III Grants or Assistance Benefit	<u> </u>	<u> </u>	Davasas	. ▶ \$	***************************************	······						25
Part III Grants or Assistance Benefit Complete if the organization ar	-			00 Part I	V line 27							
						10	\ Amai	unt and	tuno o	f aggint		
(a) Name of interested person	(D) Ne	auonsni	between inte organizat		son and the	σ)	Amou	ınt and	type o	assisi	ance	
			····									
									······································			
	-		***									
Part IV Business Transactions Involv	_								• • • • • • • • • • • • • • • • • • • •			
Complete if the organization ar	swered	"Yes"	on Form 9	90, Part 1	V, line 28a,	, 28b, or :	28c.				I	
(a) Name of interested person			p between son and the ation		mount of (d)		(d) Description of transaction			on ·	organia	aring of zation's nues?
											Yes	No
Alumni & Association Services, Inc.			alter L.		\$50,340	12 mths						√
and a second			ector of			services						
	the Cl	dui				account				i		-
			, xiikorun-u-i	<u> </u>		member						
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Department of the Treasury

Internal Revenue Service Ogden UT 84201

3642 60043

K IRS USE ONLY 29404-324-64178-0 366110239

A0115320

For assistance, call: 1-877-829-5500

Notice Number: CP211A Date: December 20, 2010

Taxpayer Identification Number:

36-6110239 Tax Form: 990

Tax Period: June 30, 2010

006324.802374.0025.001 1 AT 0.357 375

HARVARD CLUB OF CHICAGO PO BOX 350

KENILWORTH

ΙL 60043-0350504



006324

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is February 15, 2011.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.