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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

		the Treasur	The organization may have to use a copy of this return to satisfy state	reporting requirements	Open to Public Inspection
			endar year, or tax year beginning JUL 1, 2008 and ending	UN 30, 2009	
Bo	heck if	Please	C Name of organization	D Employer identificati	ion number
	Addres		AMERICAN RESEARCH CENTER IN EGYPT, INC.		
\vdash	_change ¬Name	type	Doing Business As	04-231	9500
	_ change Initial return	See	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number	. 3 3 0 0
<u> </u>	Termin-	0	8700 CROWNHILL, SUITE 507	•	6-8027
7=	⊒atron ⊒Amend ⊒return		City or town, state or country, and ZIP + 4	G Gross receipts \$	8,034,165.
	Applica	1-	SAN ANTONIO, TX 78209	H(a) Is this a group retur	
	pendin	<u> </u>	ne and address of principal officer.GERRY SCOTT, III	for affiliates?	Yes X No
			E AS C ABOVE	H(b) Are all affiliates include	
11	ax-exe		ıs· X 501(c) (3	If "No," attach a list	
JV	Vebsit	e: NW	W.ARCE.ORG	H(c) Group exemption n	•
<u>K 1</u>				of formation: 1948 M St	tate of legal domicile: MA
Pa	art I	Summ	ary		
ø	1 6	3nefly de	scribe the organization's mission or most significant activities. SUPPORT RE	ESEARCH IN EGY	PT AND TO
Governance]	PROMO	<u>TE AND STRENGTHEN AMERICAN - EGYPTIAN CUI</u>	LTURAL TIES.	
Ĕ	2 (Check thi	s box 🕨 📖 if the organization discontinued its operations or disposed of more	e than 25% of its assets	
Š	1 8	Number o	f voting members of the governing body (Part VI, line 1a)	3	33
<u>م</u>	4 1	Number c	f independent voting members of the governing body (Part VI, line 1b)	4	33
es	5	Total num	ber of employees (Part V, line 2a)	5	18
Viti.	6	Total num	ber of volunteers (estimate if necessary)	6	12
Activities &	7a -	Total gros	s unrelated business revenue from Part VIII, Inc 12, Epiupin (C)	7a	0.
_	ы	Net unrei	ated business taxable income from Form 990 T, toe 34 V E U	7b	0.
				Prior Year	Current Year
ο (8 (Contribut	nons and grants (Part VIII, line 1h)	9,225,911.	6,191,935.
ָב <u>ָ</u>	9 1	orogram :	241,610.	295,991.	
Revenue		_	nt income (Part VIII, column (A), lines 3, 4, and 7d)	1,848,024.	1,532,415.
2 00			enue (Part VIII, column (A), lines 5, ed, 8c (9c 10c Ency 1e)	71,611.	13,824.
7¦ =•}			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,387,156.	8,034,165.
<i></i>			d similar amounts paid (Part IX, column (A), lines 1-3)	2,382,497.	1,855,855.
:	l		paid to or for members (Part IX, column (A), line 4)		
ົ້		•	other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,051,836.	2,489,637.
∭Uί " Expenses	16a l	•	nal fundraising fees (Part IX, column (A), line 11e)		=15/150/1
∌ĕ	h.		Iraising expenses (Part IX, column (D), line 25) 194,083.		
<u>3</u> ŏ	17		enses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,898,463.	2,454,430.
3	18	· ·	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,332,796.	6,799,922.
	l	•	less expenses Subtract line 18 from line 12	5,054,360.	1,234,243.
es es		TOVCHUO	ode expendes dubridas into remonitirio 12	Beginning of Year	End of Year
ets (20	Fotal acc	ets (Part X, line 16)	65,57 <u>4</u> ,076.	63,184,318.
ASS	21		lities (Part X, line 26)	17,244,149.	18,342,935.
Net Assets or Fund Balances	22 1		s or fund balances. Subtract line 21 from line 20	48,329,927.	44,841,383.
	art II		ture Block	±0,000,001.	44,041,303.
تنا			lites of perjury, I declare that I have examined this return, including accompanying schedules and statements, the Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	and to the best of my knowledge a	nd belief, it is true, correct,
	1	and comple	te Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
e:-	_	1	Athanu Sol- (darin)	5-17-1	'n
Sig	- 1	Sign	pature of officer	Date	<u> </u>
Her	e		THANN E. EL-AMIN, CFO		
	ì		e or print name and title		
		' ''	I Poto	neck if Preparer's	identifying number
Paid		Preparer's signature		elf- (see instruc	ctions)
Prep	parer's	Firm's nam		nployed	
Use	Only	yours if	VCARNEIRO, CHOMMEI & CO., L.C.	EIN -	
	1	self-employ address, an	d at the poor aro, porre and	5	3 3 4 3 0 0 0 0 0
	l	ZIP + 4	SAN ANTONIO, TX 78216-5876	Phone no. ► 210	0-342-8000
Mav	/ the IF	S discus	s this return with the preparer shown above? (see instructions)		X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

	990 (2008) AMERICAN RESEARCH CENTER IN EGYPT, INC. 04-2319500 Page 2
Pa	t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: SUPPORT RESEARCH IN EGYPT AND TO PROMOTE AND STRENGTHEN AMERICAN - EGYPTIAN CULTURAL TIES.
2	Did the organization undertake any significant program services during the year which were not listed on
2	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?
	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	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) (Expenses \$ 4,512,488. including grants of \$ 1,855,855.) (Revenue \$)
	PROMOTION AND PRESERVATION OF ANTIQUITIES - THE AMERICAN RESEARCH
	CENTER IN EGYPT IS COMMITTED TO HELPING EGYPT PRESERVE ITS RICH CULTURAL HERITAGE FOR THE BENEFIT OF FUTURE GENERATIONS WORLDWIDE. IN
	CULTURAL HERITAGE FOR THE BENEFIT OF FUTURE GENERATIONS WORLDWIDE. IN COLLABORATION WITH EGYPT'S SUPREME COUNCIL OF ANTIQUITIES, ARCE WORKS
	TO PRESERVE THE COUNTRY'S ANTIQUITIES THROUGH DOCUMENTATION,
	CONSERVATION, TRAINING, AND PUBLICATION. THE SCOPE OF OUR WORK HAS
	INCLUDED MORE THAN 50 MAJOR CONSERVATION PROJECTS THROUGHOUT EGYPT THAT
	SPAN THE ENTIRE RANGE OF THE COUNTRY'S RICH CULTURAL HISTORY, FROM
	PREHISTORY TO THE LATE OTTOMAN PERIOD, INCLUDING MASTERPIECES OF
	PHARAONIC, GRAECO-ROMAN, COPTIC, JEWISH, AND ISLAMIC ART AND
	ARCHITECTURE.
	0.51 400
4b	(Code) (Expenses \$ 251,490 including grants of \$) (Revenue \$)
	RESEARCH FELLOWSHIPS - OVER THE COURSE OF FIVE DECADES, ARCE'S FELLOWSHIP PROGRAM HAS BENEFITED MORE THAN 600 SCHOLARS, WHOSE RESEARCH
	INTERESTS SPAN THE DIVERSITY OF EGYPT'S PERIODS AND CULTURES. THE GOAL
	OF ARCE'S FELLOWSHIP PROGRAM IS TO PROMOTE A MORE PROFOUND KNOWLEDGE OF
	EGYPT AND THE NEAR EAST THROUGH STUDY AND RESEARCH AND TO AID IN THE
	TRAINING OF AMERICAN SPECIALISTS IN ACADEMIC DISCIPLINES THAT REQUIRE
	FAMILIARITY WITH EGYPT. PROGRAM ALUMNI INCLUDE DIRECTORS AND FACULTY OF
	MIDDLE EASTERN STUDIES DEPARTMENTS AT LEADING UNIVERSITIES IN THE
	UNITED STATES AND ABROAD, AND CURATORS OF EGYPTIAN AND NEAR EASTERN ART
	AT MAJOR MUSEUMS AND RESEARCH INSTITUTIONS.
4c	(Code:) (Expenses \$ 917,344. including grants of \$) (Revenue \$ 295,991.)
	PUBLIC PROGRAMS - AMERICAN-EGYPTIAN RELATIONS ARE AT THE CORE OF WHAT
	ARCE DOES. PUBLIC PROGRAMS CONSTITUTE A VITAL LINK IN CARRYING OUT
	ARCE'S MISSION OF FOSTERING BROADER KNOWLEDGE AND APPRECIATION OF EGYPT
	AMONG THE GENERAL PUBLIC IN THE UNITED STATES. WE CARRY OUT THIS
	MISSION BY SUPPORTING 13 LOCAL CHAPTERS, OFFERING CAIRO LECTURES AND
	EDUCATIONAL EXCURSIONS, HOSTING AN ANNUAL CONFERENCE, AND PROVIDING
	PUBLICATIONS ABOUT ARCE-SPONSORED PROJECTS IN EGYPT TO OUR MEMBERS.
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶\$ 5,681,322. (Must equal Part IX, Line 25, column (B).)
	Form 990 (2008)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	İ '	Ì '	
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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? If "Yes," complete Schedule C, Part II	4		_X_
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	l	
6	Did the organization maintain any donor advised funds or any 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		_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_	_X_	<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	<u> </u>	X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13_		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a	_X_	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S ? If "Yes," complete Schedule F, Part I	14b	X	
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		X
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? If "Yes," complete Schedule F, Part III	16	X_	ļ
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	L	X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19_		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	_20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X_	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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	1	1	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.]
	If "No", go to question 25	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	}	1	
	any tax-exempt bonds?	24c	 	<u> </u>
	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) 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	 -	X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
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	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			_
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> X</u>
		Form	990	(2008)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee	ļ		İ
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other	(1
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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	Ĺ	X

Form **990** (2008)

	•	ı		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable				
b	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?	1	1c	<u> </u>	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1.0			
	filed for the calendar year ending with or within the year covered by this return	2a 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	·	_	İ	47
_	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by this return?	3a_		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		_3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	• •		v	
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accounty?	<u>4a</u>	_X_	
b	If "Yes," enter the name of the foreign country: EGYPT See the matter than for expendence and filter requirements for Form TD 5 00 00 1. Becaut of Foreign to				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign B	sank and			
E.	Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		En		X
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5a 5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	· · · · · · · · · · · · · · · · · · ·	JU		
·	Tax Shelter Transaction?	riegarding i forlibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or aifts		_	_==
_	were not tax deductible?	.	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than \$75?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?		7e		_X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f		X
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 1098-0	as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	•			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	ganization, have			
	excess business holdings at any time during the year?		8_		
9	Section 501(c)(3) and other 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 N/A	40.			
a	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 N/A Gross income from members or shareholders	110			
a	Gross income from other sources (Do not net amounts due or paid to other sources against	11a			
D	amounts due or received from them)	11b			
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	12.0	 	
<u>,</u>	11/A	150	Form	990	(2008)
			. 31,11		(/

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,		_ [
	processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body 1a 33			
b	Enter the number of voting members that are independent 1b 33]		
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		<u>X</u>
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		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	_ 5		<u>X</u>
6	Does the organization have members or stockholders?	6	<u>X</u>	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	1		
	governing body?	7a	<u>X</u>	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<u>7b</u>		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following.			
а	The governing body?	<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?	8b	<u>X</u> _	
9a	Does the organization have local chapters, branches, or affiliates?	_9a_	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		ا	
	and branches to ensure their operations are consistent with those of the organization?	9b_	X_	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		3,	
44	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	٠	•	v
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies	11	L	<u> </u>
<u> </u>	tion b. 1 onoics		Yes	No
122	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	140
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120	 -	
	to conflicts?	12b	\mathbf{x}_{-}	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.0		
•	in Schedule O how this is done	12c	_x_	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	х	
b	Other officers or key employees of the organization?	15b		Х
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>x</u>
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 the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who person of the per	tion 🕽	-	
	THE ORGANIZATION - 202 516-8027			
83200	8700 CROWNHILL, SUITE 507, SAN ANTONIO, TX 78209			
		Earm	aan	(2008)

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. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee, or key employee

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

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

(A)	(B)	<u>, o.</u>	11001		<u> </u>	, ti	4310	(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
,	hours	(c	hecl	k all	that	app	ıly)	compensation	compensation	amount of
	per	cţo						from	from related	other
	week	dre				2	i	the organization	organizations (W-2/1099-MISC)	compensation from the
		stee o	ruste	ł	_	ensa	1	(W-2/1099-MISC)	(44-27 1099-141130)	organization
		al tru	onalt		oloye	E 85		(** =* ********************************		and related
		individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Ē			organizations
			Ξ	L	¥	Ξ 5	<u> </u>			
RICHARD MARTIN	- 00	3,5		,,					0	
PRESIDENT	5.00	X	-	X	_	-	_	0.	0.	0.
EMILY TEETER	- 00	37	1	١,,			1		0	
VICE PRESIDENT	5.00	X	├	X	\vdash	-	-	0.	0.	0.
BRIENNE LOFTIS	5.00	x		x				0.	0.	_
TREASURER CAROL A. REDMOUNT	3.00	Λ	╁─	^		┝		0.	<u> </u>	0.
IMMEDIATE PAST PRESIDENT	5.00	х		x				0.	0.	_
ROBERT BUSSEY	3.00	Λ	┢	^	-	╁╌		0.		0.
CHAPTER REPRESENTATIVE	5.00	x	l	X				0.	0.	0.
JAMES P. ALLEN	3.00	^	t	^	-	\vdash	-	 	0.	
GOVERNOR	1.00	v						0.	0.	0.
JONATHAN BERKEY	1.00	^	┢	┼		┝	 			<u> </u>
GOVERNOR	1.00	X		ŀ				0.	0.	o.
BETSY M. BRYAN	1.00		<u> </u>	1		 	1			
GOVERNOR	1.00	$ _{\mathbf{x}}$					1	0.	0.	0.
KARA COONEY			┪			\vdash		† 		
GOVERNOR	1.00	X		ļ	ļ			0.	0.	0.
JOHN DARNELL						<u> </u>	t			
GOVERNOR	1.00	X						0.	0.	0.
PETER DORMAN						Г				
GOVERNOR	1.00	X			1			0.	0.	0.
MARJORIE FISHER										
GOVERNOR	1.00	X			1			0.	0.	0.
WILLIAM GRANARA			-							
GOVERNOR	1.00	X					L	0.	0.	0.
W. BENSON HARER										
GOVERNOR	1.00	X						0.	0.	0.
SARAH HARTE										
GOVERNOR	5.00	X					L	0.	0.	0.
JAMES K. HOFFMEIER				1	1					
GOVERNOR	1.00	X		L		L		0.	0.	0.
THOMAS EMIL HOMERIN	-									
GOVERNOR	5.00	X		<u> </u>		<u> </u>	<u></u>	0.	0.	0.
832007 12-18-08					_					Form 990 (2008)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
· (A)	(C)						(D)	(E)	(F)	
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per week	ctor]			}		from the	from related organizations	other
	Week	ordire	83		Ì	ted		organization	(W-2/1099-MISC)	compensation from the
		nstee	truste	1	يو	bens		(W-2/1099-MISC)	(** 2) (60060)	organization
		ual tri	bonal		gloye	t co m				and related
		individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	orme.			organizations
SALIMA IKRAM			-	-	-	-	<u> </u>	 		
GOVERNOR	1.00	х	ļ					0.	0.	0.
JANET IRWINE	1.00		\vdash		\vdash	\vdash	╁			<u>U•</u>
GOVERNOR	1.00	X	1					0.	0.	0.
JANET H. JOHNSON										
GOVERNOR	5.00	X			L	<u> </u>	<u> </u>	0.	0.	0.
CHRIS KARCHER										
GOVERNOR	5.00	X	<u> </u>	_		<u> </u>	<u> </u>	0.	0.	0.
DAVID O'CONNOR										
GOVERNOR	5.00	X	<u> </u>	_	_	L	<u> </u>	0.	0.	0.
DIANA CRAIG PATCH										
GOVERNOR	5.00	X				ļ	 	0.	0.	0.
CATHARINE ROEHRIG								_		_
GOVERNOR	1.00	X	-			-	├-	0.	0.	0.
JOHN SHEARMAN	1 00				ĺ			1		
GOVERNOR	1.00	X	├	-	-	├-	-	0.	0.	0.
SUSAN SLYOMOVICS	1 00	٠,		ļ						
GOVERNOR BANKOND CMITTH	1.00	X	-		 	-	╀	0.	0.	0.
RAYMOND SMITH GOVERNOR	1.00	\ ,						0.	0.	
1b Total	1.00	Δ	Ц	Щ.	L	_		347,642.	0.	32,962.
ID TOTAL			 -					J=1,044.	<u> </u>	1 34,304.

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

Yes No
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
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

Yes No

X

X

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

Section B. Independent Co	ntractors
---------------------------	-----------

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
CLEMENTS INTERNATIONAL, ONE THOMAS CIRCLE NW, 8TH FLR, WASHINGTON, DC 20005	INSURANCE	169,189

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ► 1

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form **990** (2008)

				SARCH_CEN	TER IN EGY	PT, INC.	04-2319	500 Page 9
Pa	rt V	III Statement of Rever	านe		r			
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats its	1	a Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts		b Membership dues	1b					
ts, am		c Fundraising events	1c					
<u>e</u>		d Related organizations	1d	-054000				
Sim		e Government grants (contribut		<u> 5964298.</u>				
ig e		f All other contributions, gifts, gran		227 627				
급형		sımılar amounts not ıncluded abo		<u> 227,637.</u>				
Se		g Noncash contributions included in linesh Total. Add lines 1a-1f	: 1a-1f \$		6,191,935.			
-	_	IT Total, Add lines 1a-11		Business Code		 		
0	2	a MTGS, LECTURES	& PUBS.	900099	158,610.	158,610.		
٤		b MEMBERSHIP DUES		900099	137,381.			
S E		c						
e A		d						
Program Service Revenue		e						
<u>-</u>		f All other program service reve	enue	L				
\rightarrow		g Total, Add lines 2a-2f			295,991.			
	3	Investment income (including	dividends, inte	rest, and	1 400 272			1400272
	4	other similar amounts) Income from investment of ta	v avamnt hand	pracoda	1,480,373.			1480373.
	4 5	Royalties	x-exempt bond	proceeds				
I	3	Noyames	(i) Real	(II) Personal				
	6	a Gross Rents	(y : 10 <u>5</u>	1,77, 0,00,00	1	-		
- {		b Less rental expenses			1	{		Į
		c Rental income or (loss)]			
		d Net rental income or (loss)		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
ŀ	7	a Gross amount from sales of	(i) Securities	(II) Other	-	ļ		
		assets other than inventory	52,042	•	4			
		b Less cost or other basis						
		and sales expenses	52,042	 	†			
1		c Gain or (loss) d Net gain or (loss)	32,042	•	52,042.			52,042.
		a Gross income from fundraisin	a events (not		32,042.			32,032.
Other Revenue		including \$		1				1
e		contributions reported on line				1		
<u>بر</u> ا		Part IV, line 18						ļ
훈		b Less direct expenses	1	·L	1			
		 Net income or (loss) from fund 	draising events					
	9	a Gross income from gaming ac	ctivities. See					
- {		Part IV, line 19		·	-	ł		
		b Less direct expenses	 	·	+			
1		 Net income or (loss) from gam Gross sales of inventory, less 	-					
	10	and allowances						
- 1		b Less: cost of goods sold			1			
		c Net income or (loss) from sale		•	1			
Ī		Miscellaneous Revenu		Business Code				
	11	a OTHER		900099	13,824.			13,824.
		b						
		c						
		d All other revenue	•	L	 	 		<u> </u>
		e Total. Add lines 11a 11d			13,824.			
83200	<u>12</u>	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c,	10c, and 11e	8,034,165.	295,991.	0.	
02-02	-00							Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	lete column (A) but are (A)	not required to comple (B)	ete columns (B), (C), and ((C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	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	285,439.	285,439.		
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22	680,555.	680,555.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	889,861.	889,861.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	387,296.	193,648.	193,648.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 555 001	1 000 500	211 400	40.000
7	Other salaries and wages	1,555,001.	1,203,599.	311,402.	40,000.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	F 47 240	260 177	104 220	00.004
9	Other employee benefits	547,340.	362,177.	104,339.	80,824.
10	Payroll taxes				
11	Fees for services (non-employees).				
a	Management				
b	Legal	45,908.	46,629.	-2,643.	1,922.
	į	43,300.	40,049.	-2,043.	1,344.
d	· · · · · · · · · · · · · · · · · ·				
e					
f -	Investment management fees Other	517,711.	461,281.	52,457.	3,973.
g 40	Advertising and promotion	<u> </u>	401,201.	34,431.	3,313.
12 13	Office expenses	411,631.	304,964.	92,592.	14,075.
14	Information technology	411,031.	304,304.	74,374.	14,0/3.
15	Royalties				
16	Occupancy	175,606.	107,035.	68,571.	
17	Travel	339,908.	288,683.	44,349.	6,876.
18	Payments of travel or entertainment expenses	3377303	200,003.	21/3131	0,0,00
10	for any federal, state, or local public officials	Ì			
19	Conferences, conventions, and meetings	197,264.	197,218.	26.	20.
20	Interest		137,72200		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	169,002.	108,923.	36,691.	23,388.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
_	expenses shown on line 25 below.) FACILITIES AND FELLOWSH	435,718.	434,089.	1,629.	
	CAPITAL EXPENDITURE	82,390.	68,195.	11,761.	2,434.
b	LIBRARY AND ACQUISITION	39,831.	39,831.	11,/01.	6,434.
C	ENTERTAINMENT	23,714.	1,822.	1,321.	20,571.
d	VEHICLE	7,897.	1,044.	7,897.	40,311.
e •	All other expenses	7,850.	7,373.	477.	· · · · · · · · · · · · · · · · · · ·
95	Total functional expenses. Add lines 1 through 24f	6,799,922.	5,681,322.	924,517.	194,083.
<u>25</u> 26	Joint Costs. Check here J if following	0,100,000	J, 001, J22.	J44,J11 •	T) 4,000.
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
82201	0 12-18-08				Form 990 (2008)

832010 12-18-08

Pai	rt X	Balance Sheet					
•			(A) Beginning of year		(B) End of		
	1	Cash - non-interest-bearing	10,757,121.	1 1	12,68	5,1	02.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net	8,390,449.	3	8,59	3,4	24.
	4	Accounts receivable, net	168,663.	4	14	4,9	45.
	5	Receivables from current and former officers, directors, trustees, key					
		employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section					
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete					
		Part II of Schedule L		6			
sts	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
•	9	Prepaid expenses and deferred charges	172,000.	9	16	0,0	00.
	10a	Land, buildings, and equipment cost basis 10a 664,827.		. [
	b	Less accumulated depreciation. Complete	050 206			- ^	
		Part VI of Schedule D 10b 397, 619.	252,386.	10c		<u>7,2</u>	
	11	Investments - publicly traded securities	44,998,017.		40,49	8, <u>T</u>	99.
	12	Investments - other securities See Part IV, line 11		12			
	13	Investments - program-related See Part IV, line 11		13			
	14	Intangible assets Other assets See Rest IV line 11	835,440.	14 15	03	5,4	40
	15	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)	65,574,076.		63,18		
	16 17	Accounts payable and accrued expenses	476,099.	17		$\frac{1}{6}, 0$	
	18	Grants payable	4,273,817.	18	4,60		
	19	Deferred revenue	2,932,453.	19	4,92		
	20	Tax-exempt bond liabilities	2/302/2031	20		<u>, , , , , , , , , , , , , , , , , , , </u>	
Ø	21	Escrow account liability Complete Part IV of Schedule D		21			
Liabılities	22	Payables to current and former officers, directors, trustees, key employees,					
ap		highest compensated employees, and disqualified persons. Complete Part II					
:3		of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		23			<u>.</u>
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D	9,561,780.	25	8,44		
	26	Total liabilities. Add lines 17 through 25	17,244,149.	26	18,34	<u>2,9</u>	<u>35</u>
		Organizations that follow SFAS 117, check here X and complete		l 1			
Ses		lines 27 through 29, and lines 33 and 34.	4 000 000		4 4 5		
ă	27	Unrestricted net assets	4,902,387.		4,15		
Ва	28	Temporarily restricted net assets	13,197,091. 30,230,449.		$\frac{10,45}{30,33}$		
Net Assets or Fund Balances	29	Permanently restricted net assets	30,430,449.	29	<u>30,23</u>	0,4	49
Ę		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.					
s S	20	Capital stock or trust principal, or current funds		30			
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		31			
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32			
Š	33	Total net assets or fund balances	48,329,927.	! 	44,84	1.3	83
	34	Total liabilities and net assets/fund balances	65,574,076.		63,18		
Pa	rt XI	Financial Statements and Reporting		1 - 1	<u> </u>	<u> </u>	
L						Yes	No
1	Acco	ounting method used to prepare the Form 990 . Cash X Accrual	Other				
2a	Were	the organization's financial statements compiled or reviewed by an independent	accountant?		2a		X
b	Were	the organization's financial statements audited by an independent accountant?			2b	X	
С	If "Ye	es" to lines 2a or 2b, does the organization have a committee that assumes respo	onsibility for oversight of the	audıt,	1		
	revie	w, or compilation of its financial statements and selection of an independent acco	ountant? .		2c	X	<u> </u>
За		result of a federal award, was the organization required to undergo an audit or au	idits as set forth in the Sing	gle Audıt			
	Act a	ind OMB Circular A-133?			3a	X	1

832011 12-18-08

b_if "Yes," did the organization undergo the required audit or audits?

Form **990** (2008)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008 Open to Public Inspection

Name of the organization

Employer identification number

		AMERICA	N RESEARCH C	ENTER	IN E	GYPT,	INC.		04	<u>-2319</u>	500	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	e this part) (see ins	tructions)				
The organ	zation is not a	private foundation	because it is: (Please ch	eck only o	ne organiz	ation)						
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗔	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii). (Att	tach Sched	dule H)			
4 🗔	A medical res	search organization o	operated in conjunction	with a hos	pital descr	ribed in se	ction 170	(b)(1)(A)(iii). Enter th	e hospital	's nam	e,
	city, and stat	e										
5 🗀	An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	erated by	a governi	nental unit	described	nı t		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6 🔲	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d ın sectio	n 170(b)(1	I)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general pu	ublic desc	ribed i	n
	section 170(b)(1)(A)(vi). (Comple	te Part II.)									
8 🔙	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	s support f	rom contri	butions, m	nembershi	fees, and	i gross red	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	aın exceptı	ons, and (2	2) no more	than 33 1	/3% of its	support fr	om gross	ınvest	ment
	income and i	unrelated business to	axable income (less sec	tion 511 ta	ax) from bu	sinesses a	acquired b	y the orga	nization af	ter June 3	0, 197	'5
	See section	509(a)(2). (Complete	e the Part III.)									
10	An organizati	on organized and of	perated exclusively to te	st for publ	lic safety. S	See sectio	n 509(a)(4	1). (see ins	tructions)			
11 📖	•	•	perated exclusively for the						•	•		or
	more publicly	supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se c	ction 509(a	a)(3). Chec	k the box	that	
		-··	organization and compl		_							
	a Type				e III - Func	•	•			Type III - (
e L	-	-	at the organization is not		-	-	-					n
_			han one or more publicl						(a)(1) or se	ection 509	(a)(2)	
f	_		ten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
		rganization, check th				_			_			لـــا
g	_		organization accepted a			•						
		•	irectly controls, either a	ione or tog	jetner with	persons o	iescribed	ın (ii) and (i	ii) below,	[44 m]	Yes	No
	-	• •	upported organization?	,						11g(i)		
	• •	•	n described in (i) above?		-0					11g(ii)		
_	` .	•	person described in (i)							11g(iii)		—
h	Provide the i	ollowing information	about the organizations	s the organ	iization suj	pports.						
			(iii) Type of	(iv) Is the	organization	(v) Did vo	u notify the	(vi) Is	the			
	of supported	(ii) EIN	organization		sted in your		ion in col.	Lorganizatio	n in col. I	(iiv)		f
urya	ınızatıon		(described on lines 1-9 above or IRC section		document?		r support?	(i) organız U.S	ea in the i	Sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
						-						
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Total]						
	rivacy Act an	nd Paperwork Redu	ction Act Notice, see t	he Instruc	tions for I	Form 990.		Schedul	e A (Form	990 or 99	30-EZ	2008

Schedule A (Form 990 or 990-EZ) 2008 AMERICAN RESEARCH CENTER IN EGYPT, INC. 04-2319500 Page 2

Part II 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.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	848,780.	3897902.	4576083.	9357903.	6329316.	25009984.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						T
	furnished by a governmental unit to						1
	the organization without charge						
4	Total. Add lines 1 - 3	848,780.	3897902.	4576083.	9357903.	6329316.	25009984.
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,						1
	column (f)						}
6	Public Support. Subtract line 5 from line 4						25009984.
	ction B. Total Support				<u> </u>		200025011
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 4	848,780.	3897902.	4576083.	9357903.		25009984.
8	Gross income from interest,				200,200		
_	dividends, payments received on				[ļ
	securities loans, rents, royalties						
	and income from similar sources	1721511.	1618464.	1490126	1848024	1480373	8158498.
9	Net income from unrelated business						02001
_	activities, whether or not the						İ
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	22,771.	16,940.	17,997.	25,514.	13,824.	97,046.
11			20/5200	2,,,,,,	23/3111	1370210	33265528.
12	Gross receipts from related activities,	etc (see instruction	ons)		L	12	599,357.
13	First five years. If the Form 990 is for		•	d fourth or fifth ta	ax vear as a sectio		<u> </u>
	organization, check this box and stor	=		a, roara, or mar to	ax your do a coolio	1,001(0)(0)	
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2008 (column (fl)		14	75.18 %
	Public support percentage from 2007		•	(7)		15	63.95 %
	33 1/3% support test - 2008. If the o	· ·	•	n line 13. and line	14 is 33 1/3% or n		
	stop here. The organization qualifies	•		·		,	▶ X
b	33 1/3% support test - 2007. If the o		=		l ime 15 is 33 1/3%	or more, check t	
	and stop here. The organization qual	-					▶ []
17a	10% -facts-and-circumstances tes	•			e 13. 16a. or 16b. a	and line 14 is 10%	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	· · · · · · · · · · · · · · · · · · ·		▶ 🗀
j.	10% -facts-and-circumstances tes					17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-cire				•		<u> </u>
18	Private foundation. If the organization		-	•			ns 🕌
<u></u>	realization in the enganization	S.S. T.S. OHOOK U		<u>., ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			0 or 990-EZ) 2008
					Cone		

Part III Support Schedule for	Organizations	Described in	Section 509(a)(2) (Complete onl	y if you checked the bo	ox on line 9 of Part I.)
Section A. Public Support	, _			,		·
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
 Gifts, grants, contributions, and 						
membership fees received (Do not						ı
include any "unusual grants ")				<u> </u>		
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		1				
are not an unrelated trade or bus-						
iness under section 513		 		 		
4 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						
6 Total. Add lines 1 · 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons		<u> </u>				
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b					1	
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008_	(f) Total
9 Amounts from line 6					<u> </u>	
10a 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					1	
acquired after June 30, 1975	<u> </u>	<u> </u>	<u> </u>	ļ	 	
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in 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 IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	r the organization	's fırst, second, thi	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organiz	zation,
check this box and stop here						▶□
Section C. Computation of Pub	lic Support Pe	ercentage			·	
15 Public support percentage for 2008	(line 8, column (f) o	divided by line 13,	column (f))		15	%
16 Public support percentage from 200					16	%
Section D. Computation of Inve	stment Incom	<u>ne Percentage</u>				
17 Investment income percentage for 2	008 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from	2007 Schedule A,	Part IV-A, line 27h	l		18	%
19a 33 1/3% support tests - 2008. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line 1	17 is not
more than 33 1/3%, check this box a	•	•		•		
b 33 1/3% support tests - 2007. If the	organization did	not check a box or	n line 14 or line 19	a, and line 16 is n	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch		-	•		· -	▶∟_
20 Private foundation. If the organization	on did not check a	1 box on line 14, 19	a, or 19b, check t		nstructions chedule A (Form 99	0 or 990-EZ) 2008

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public

Inspection

Name of the organization Employer identification number AMERICAN RESEARCH CENTER IN EGYPT, 04-2319500 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the

	organization answered "Yes" to Form 990, Part IV, line	e 6					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	organization answered Tes to Com 330, Factor, in		onor advised funds	(1	o) Fund	s and othe	er accou	ints
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year					·		
5	Did the organization inform all donors and donor advisors in	writing that th	ne assets held in donor adv	vised fund	ds			
-	are the organization's property, subject to the organization's	_					Yes	No
6	Did the organization inform all grantees, donors, and donor a	-	•	be used o	only			
•	for charitable purposes and not for the benefit of the donor of		-		-		Yes	☐ No
Pa	rt II Conservation Easements. Complete if the org						199	110
1	Purpose(s) of conservation easements held by the organization							
	Preservation of land for public use (e.g., recreation or p	pleasure)	Preservation of an I	historicall	y impor	tant land a	area	
	Protection of natural habitat		Preservation of cert					
	Preservation of open space							
2	Complete lines 2a-2d if the organization held a qualified cons	servation conf	tribution in the form of a co	onservatio	on ease	ment on th	ne last d	lav
	of the tax year							•
	•					leld at the	e End o	f the Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easements				2b			
С	Number of conservation easements on a certified historic str	ructure includ	ed in (a)	•	2c			
d			, ,		2d			
3	Number of conservation easements modified, transferred, re			the organ	ızatıon	during the	taxable	
	year >		,	J.		J		
4	Number of states where property subject to conservation ea	asement is loc	ated >					
5	Does the organization have a written policy regarding the pe			and				
_	enforcement of the conservation easements it holds?		,,				Yes	☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing	easements during the vea	r 🕨				
7	Amount of expenses incurred in monitoring, inspecting, and		_					
8	Does each conservation easement reported on line 2(d) above	_	= -		1)(1)			
_	and section 170(h)(4)(B)(ii)?			- ()(-)(-	7.7		Yes	No
9	In Part XIV, describe how the organization reports conservat	tion easement	ts in its revenue and expen	se stater	nent. ar	nd balance		
_	include, if applicable, the text of the footnote to the organiza		·				-	
	conservation easements				,			
Pa	rt III Organizations Maintaining Collections o	of Art, Histo	orical Treasures, or	Other S	Simila	r Asset	S.	
ι	Complete if the organization answered "Yes" to Form	990, Part IV,	line 8					
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in	its revenue statement and	balance	sheet v	vorks of ar	t, histor	ical
	treasures, or other similar assets held for public exhibition, e	ducation, or r	esearch in furtherance of p	public sei	vice, pi	ovide, in F	art XIV	the text of
	the footnote to its financial statements that describes these	ıtems						
b	If the organization elected, as permitted under SFAS 116, to	report in its r	evenue statement and bal	ance she	et work	s of art, hi	storical	treasures,
	or other similar assets held for public exhibition, education, of	or research in	furtherance of public servi	ice, provi	de the 1	ollowing a	mounts	relating to
	these items:		·	-		_		_
	(i) Revenues included in Form 990, Part VIII, line 1				▶ \$			0.
	(ii) Assets included in Form 990, Part X				▶ \$		83	0. 5,440.
2	If the organization received or held works of art, historical tre	easures, or oth	ner sımılar assets for financ	cial gain.				
	the following amounts required to be reported under SFAS 1			J 11				
а					▶ \$			
b			•		▶ \$			
_					- Ψ			
LHA	For Privacy Act and Paperwork Reduction Act Notice, see	e the Instruc	tions for Form 990.		s	chedule [) (Form	990) 2008

832051 12-23-08

	dule D (Form 990) 2008 AMERICAL Till Organizations Maintaining C	N RESEARCH collections of A						04-23 ar Asse			
3	Using the organization's accession and other	r records, check any	of the f	ollowing tha	t are a signifi	cant use	of its col	ection ite	ms (ched	k ali	
	that apply)										
а	Public exhibition	d		Loan or excl	hange progra	ıms					
b	X Scholarly research	е		Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	nev further th	ne organizatio	on's exe	mot purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit o				_						
-	to be sold to raise funds rather than to be ma								Yes	X	No
Par	t IV Trust, Escrow and Custodial					red "Yes	s" to Form	990. Par		9. or	
	reported an amount on Form 990, Par								,	-, -	
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for	contribution	s or other as	sets not	ıncluded				
-	on Form 990, Part X?		,						Yes		No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowina	table:							
_									Amoun		
c	Beginning balance						1c				
q	Additions during the year						1d				
-	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990. Part X. line	21?						Yes]	No
	If "Yes," explain the arrangement in Part XIV							<u> </u>	00		
Par		f organization answe	ered "Ye	s" to Form 9	90, Part IV, I	ine 10.					
		(a) Current year		Prior year	(c) Two year		(d) Three	ears back	(e) Four	vears	back
1a	Beginning of year balance	30230449.				1				7.5	
b	Contributions										
C	Investment earnings or losses										
d	Grants or scholarships										
_	Other expenditures for facilities										
ŭ	and programs								ļ		
f	Administrative expenses	· · · · · · · · · · · · · · · · · · ·							 		
g g	End of year balance	30230449.					· · · · ·				
2	Provide the estimated percentage of the year		as.						l		
_ a	Board designated or quasi-endowment	. Cha balanco nola l	%								
h	Permanent endowment ► 100.00	%									
c		<u></u> /°									
	Are there endowment funds not in the posse		ation th	at are held a	nd administe	red for t	he organi	zation			
Ou	by.	oolon or the organiz	anon in	at are riele a	ina daniiniote		no organi	Lation		Yes	No
	(i) unrelated organizations								3a(i)	163	No X
	(ii) related organizations								3a(ii)		X
h	If "Yes" to 3a(ii), are the related organizations	s listed as required a	n Sche	dula B2					3b		
4	Describe in Part XIV the intended uses of the								00		
Par	t VI Investments - Land, Building				Part X. line	10					
L	Description of investment	(a) Cost or c		T	or other		epreciation	\n_	(d) Boo	k valu	
	boschpilon of invocation.	basis (investi			(other)	(0) 5	Срісовин	~~	(u) 500	K Valo	•
1a	Land				1						
	Buildings									·	
	Leasehold improvements					_					
d	Equipment										
	Other			66	4,827.		397,6	19.	26	7,2	08.
	. Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, colu	ımn (B),							7,2	

Schedule D (Form 990) 2008

Schedule D	(Form 990) 2008	AMERICAN RE	SEARCH	CENTER	IN EGYPT,	INC.	04-2319500	Page 3
		Other Securities. Se	e Form 990,	Part X, line 12				
, (a	a) Description of sec including name)		(b) Boo	ok value	Cos		of valuation: ear market value	
Financial de	erivatives and other	financial products						
Closely-held	d equity interests		L					
Other	····							
								
								
								
								
	 							
								
Total. (Col (b) should equal Form 9	990, Part X, col (B) line 12.)						
Part VIII	Investments -	Program Related. S	ee Form 990 I	Part X, line 1	3			
	(a) Description of in	nvestment type	(b) Boo	ok value	Co		of valuation. ear market value	
						St 01 6110-01-y	ear market value	
								
								
								
								
					· · ·			
								
		· · · · · · · · · · · · · · · · · · ·	ļ				-	
				<u> </u>				
	No. 11-1-15 1	200 P- 4V1/D) I 40 \ >	ļ					
Dort IV	Othor Assets	990, Part X, col (B) line 13.) ► See Form 990, Part X, line	15		L			
Partix	Other Assets.		Description				(b) Book val	не
			Description				(b) Book var	
								
-								
				<u> </u>				
Tabal (Calu	(h) should says	J. Corm 000. Part V. col /D) Is	no 15 \					
Part X		I Form 990, Part X, col (B) In es. See Form 990, Part X,						
Liuitx		Description of liability	1116 20.		(b) Amount	Γ		_
Federal inco		· · · · · · · · · · · · · · · · · · ·			_ 			
	DIAL FUND I	PAVARIE	<u> </u>		8,435,196.	†		
	ABLE ADVA				9,662.			
KIST ONL	MDDE NDVM	.10110			5,002.			
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						1		
						1		
						1		
				-		1		
				 -		1		
Total (O=f)	imp (b) should save	I Form 990 Port V and (O) I	25 l		8 111 050	1		
		l Form 990, Part X, col (B) li			8,444,858.		ability far was art - 1 to	
		the footnote to the organiza	won s iinanc	iai statements	mai reports the org	jai iizalion 'S II	ability for uncertain tax po	JSILIONS
under FIN 4 832053	10			· · · · · · · · · · · · · · · · · · ·			Cabadala Direcció	
12-23-08							Schedule D (Form 99	90) 2008

Total revenue (Form 990, Part IX) Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1	22. 243. 24. 663. 787. 644. 041.
2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 1, 234, Net unrealized gams (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 6 Investment expenses 7 Proor period adjustments 7 Other (Describe in Part XIV) 9 Total adjustments (net). Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 -3, 488, Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recovenes of pnor year grants d Other (Describe in Part XIV) 2 Add lines 2a through 2d 3 Subtract line 2e from line 1 1 Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue, Add lines 3 and 4c, (This should equal Form 990, Part I, line 12) 5 Ronated services and use of facilities b Pnor year adjustments 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 1 Total expenses and losses per audited financial statements 2 Amounts included on Form 990, Part IX, line 25: a Donated services and use of facilities b Pnor year adjustments 2 2a 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25: a Donated services and use of facilities b Pnor year adjustments 2 2b 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25. b Pnor year adjustments 2 2b 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25. b Pnor year adjustments 5 Cases reported on Form 990, Part IX, line 25, but not on line 1. a Investment expenses to included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 3 and 46, (This should equal Form	22. 243. 24. 663. 787. 644. 041.
3	243. 24. 663. 787. 644. 041.
4	24. 663. 787. 644. 041. 0. 165.
5 Donated services and use of facilities 6 6 Investment expenses 7 Prior period adjustments 8 7 Prior period adjustments 7 7 8 8 — -4.54, 9 7 Prior period adjustments 7 7 8 8 — -4.54, 9 7 Total adjustments (net). Add lines 4-8 9 — -4.7.722, 9 10 Excess or Ideflectly for the year per financial statements Combine lines 3 and 9 10 — -3.488, 10 — -3.488, 10 Excess or Ideflectly for the year per financial statements 8 10 — -3.488, 10 —	0. 165.
Solution Company Com	0. 165.
7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net). Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 -3, 488 , Part XII Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue, Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 8, 034, Part XIII Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 6 6,799,	0. 165.
8	0. 165.
9	0. 165.
10 Caccess or (deficit) for the year per financial statements Combine lines 3 and 9 10 -3,488, Part XII Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1 3,766, Amounts included on line 1 but not on Form 990, Part VIII, line 12 A Net unrealized gains on investments 2a -4,268,124. Donated services and use of facilities 2b 2c 2d Color (Describe in Part XIV) 2d 2e -4,268, Add lines 2a through 2d 3 8,034, Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b 4c Total expenses and loses per audited financial Statements With Expenses per Return Total expenses and loses per audited financial Statements With Expenses per Return Total expenses and loses per audited financial Statements With Expenses per Return Total expenses and loses per audited financial Statements 2a 5,799, Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a 5,799, Add lines 2a through 2d 2e 3 6,799, Amounts included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part IX, line 25, but not on l	0. 165.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 3 Net unrealized gains on investments b Donated services and use of facilities c Recovenes of prior year grants d Other (Describe in Part XIIV) Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 8,034, Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 6 6,799,	0. 0. 0.
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Part XIV Supplemental Information	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4	Part
X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b	,
PART III, LINE 4: ARCE HOUSES A LIBRARY LOCATED BESIDE THE MAIN CAIRO	
OFFICE WITH A COLLECTION OF 30,000 VOLUMES SERVING A WIDE VARIETY OF	
<u> </u>	
USERS. THE COLLECTION CONTAINS RARE SETS OF ARCHAELOGICAL REPORTS,	
bblid 1111 condition continue land barb of informational intronsity	
MONOGRAPH SERIES, CATALOGUES, AND PERIODICAL SERIES. NEW AREAS OF	
MONOGRAFII DERIED, CAIMEDOUED, MED TERIODICAD DERIED. MEN AREMO OI	
COLLECTION DEVELOPMENT INCLUDE PHYSICAL ANTHROPOLGY, OSTEOARCHAEOLOGY A	1D
ARCHITECTURAL CONSERVATION; MEDIEVAL ISLAMIC PHILOSOPHY AND SCIENCE; AN	<u> A</u>
COLLECTION OF SECONDARY SOURCES, DISCUSSIONS, AND ANALYSIS IN EGYPTOLOG	Υ,
ANTHROPOLGY, AND MODERN EGYPTIAN HISTORY. Schedule D (Form 99	

Schedule D (Form 990) 2008 AMERICAN RESEARCH CENTER IN EGYPT, INC. 04-2319500 Page 5 Part XIV Supplemental Information (continued)
ACQUISITIONS OF SIGNIFICANT VALUE ARE INCLUDED IN THE STATEMENT OF
FINANCIAL POSITION AT COST; ARCE EXPENSES OTHER ADDITIONS TO THE LIBRARY
COLLECTION WHEN EXPENSES ARE INCURRED. ARCE DOES NOT DEPRECIATE ITS
LIBRARY COLLECTION IN RECOGNITION OF ITS COMMITMENT TO ACT AS A CUSTODIAN
OF THE COLLECTION AND BECAUSE THE VALUE OF THE COLLECTION IS NOT
DECLINING.
PART V, LINE 4: THE ENDOWMENT FUNDS ARE USED FOR FELLOWSHIPS AND
GRANTS, EGYPTIAN ANTIQUITIES CONSERVATION, GENERAL OPERATIONS, PUBLIC
PROGRAMS, FELLOWSHIPS, AND PUBLICATIONS.
PART XI, LINE 8 - OTHER ADJUSTMENTS:
FOREIGN EXCHANGE LOSS: -571569.
ADJUSTMENT FOR INTEREST INCOME RECOGNIZED IN 2008: 116906.

Schedule D (Form 990) 2008

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047 Open to Public

Department of the Treasury

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

terrial nevertue del vice	1 01111 990,	rareiv, line 140, line 15, or line 16.		<u>-</u>	nspection
lame of the organization				Employer identi	fication number
AMERICAN RESEARCH CENTE	R IN EGY	PT, INC.		04-23195	00
Part I General Information on A	ctivities Out	tside the United States. Comp	lete if the orgai	nization answered '	'Yes"
to Form 990, Part IV, line 14b.					
1 For grantmakers. Does the organization	n maintain record	ds to substantiate the amount of the g	rants or assista	ance, the	
grantees' eligibility for the grants or assis		-			Yes No
2 For grantmakers. Describe in Part IV th	e organization's	procedures for monitoring the use of	grant funds out	tside the United St	ates
3 Activities per Region (Use Schedule F-1	(Form 990) if ad	dditional space is needed)			
(a) Region (b) Number of offices in the region		(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to	is a pro	vity listed in (d) gram service, e specific type	(f) Total expenditures in region
	region	recipients located in the region)		ce(s) in region	
			ARCHAEOLOGI EXCAVATIONS CONSERVATIONS		
GYPT 2	70	PROGRAM SERVICES	AND TRAINII	1 <u>G</u>	5,681,323,
					
			<u> </u>		
					

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

Schedule F (Form 990) 2008

5 681 323.

Page 2 (i) Method of valuation (book, FMV, Schedule F (Form 990) 2008 appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of non-cash assistance 04 - 2319500Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a cash disbursement WIRE TRANSFER WIRE TRANSFER (f) Manner of 918. of cash grant 163,058, AMERICAN RESEARCH CENTER IN EGYPT, INC. (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (d) Purpose of CONSERVATION OF CONSERVATION OF grant ANTIOUITIES ANTIQUITIES Use Schedule F-1 (Form 990) if additional space is needed RD SEA EGYPT (c) Region CAIRO EGYPT Enter total number of other organizations or entities and EIN (if applicable) (b) IRS code section section 501(c)(3) equivalency letter Schedule F (Form 990) 2008 (a) Name of organization Q က

23

04-2319500 AMERICAN RESEARCH CENTER IN EGYPT, INC.

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Schedule F (Form 990) 2008

Use Schedule F-1 (Form 990) if additional space is needed

ı	I		1				
	(h) Method of valuation (book, FMV, appraisal, other)						
	(g) Description of non-cash assistance						
	(f) Amount of non-cash assistance	0					
	(e) Manner of cash disbursement	WIRE DEPOSIT					
	(d) Amount of cash grant	718.885,1					
pape	umber of apients	9					
if additional space is nee	(b) Region	БСУРТ					
Use Schedule F-1 (Form 990) if additional space is needed	(a) Type of grant or assistance	RESEARCH AND CONSERVATION					

Schedule F (Form 990) 2008

Schedule F (Form 990) 2008 AMERICAN RESEARCH CENTER IN EGYPT, INC. 04-2319500 Page 4 Part IV Supplemental Information
Complete this part to provide the information required by Part I, line 2, and any other additional information
SCHEDULE F, PART I, LINE 2: THE ORGANIZATION HAS A FINANCIAL REPORT,
INCLUDING RECEIPTS, THAT IS REQUIRED TO BE SUBMITTED PRIOR TO ARCE
DISBURSING THE FINAL 20% OF THE GRANT FUNDS AS WELL AS WHEN THE GRANT
PROJECT IS COMPLETED. ADDITIONALLY, THE ORGANIZATION MAY CONDUCT A
FINANCIAL REVIEW AT ANY TIME. THE RECIPIENTS ARE ALSO REQUIRED TO SUBMIT
A NARRATIVE REPORT SUITABLE FOR PUBLICATION.

SCHEDULE I		,					OMB No 1545-0047	
(Form 990)		Grants and	Grants and Other Assistance to Organizations,	to Organizations	••			
		Governn	Governments, and Individuals in the U.S.	luals in the U.S.			800Z	
Department of the Treasury Internal Revenue Service	▲ Comb	► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	n answered "Yes," on F	" on Form 990, Pa	art IV, lines 21 or 22.		Open to Public	
Name of the organization	N REGERECH	CENTED IN E			:		Employer identification number	per c
Part I General Information on Grants and Assistance	its and Assistance	1	1				000107-70	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	rds to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	istance, and the select	ion	
criteria used to award the grants or assistance?	assistance?						X Yes	8 8
2 Describe in Part IV the organization's procedures for monitoring the use	s procedures for mon	toring the use of grant	of grant funds in the United States	d States				
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	e to Governments an	d Organizations in the	United States. C	omplete if the orga	anization answered "Y	es" on 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	nan \$5,000 Check thi	s box if no one recipien	t received more th	an \$5,000. Use Pa	irt IV and Schedule I-1	(Form 990) if additions	al space is needed	П
1 (a) Name and address of organization or government	(b) EIN	(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	
ANCIENT EGYPT RESEARCH ASSOC, INC	NC							
26 LINCOLN #5 BOSTON MA 02135	0773000 70		1	c			CONSERVATION OF	
SITY	000	75172170	20, 10				SALLOUTING	
_	1			_			CONSERVATION OF	
CHICAGO IL 60637		EDUCATIONAL	98 644	0			ANTIQUITIES	
2 Enter total number of section 501(c)(3) and government organizations	(3) and government or	ganizations						2
-1	tions						A	6
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	eduction Act Notice,	see the Instructions f	or Form 990.				Schedule I (Form 990) 2008	800

(f) Description of non-cash assistance (book, FMV, appraisal, other) (Form 990) 2008 AMERICAN RESEARCH CENTER IN EGYPT, INC.
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed REPORTS. THEY MUST ALSO SUBMIT A FINAL NARRATIVE SUITABLE FOR PUBLICATION. Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. SCHEDULE I, PART I, LINE 2: GRANTEES MUST PROVIDE WRITTEN AND FINANCIAL (d) Amount of non-cash assistance 680, 555, (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance EGYPT RESEARCH

Schedule I (Form 990) 2008

27

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Page 2

04-2319500

Schedule I (Form 990) 2008

Part III

SCHEDULE J-2

(Form 990)

Continuation Sheet for Form 990

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

nternal Revenue Service Name of the Organization									Employer Ident	Inspection Ification number
AMERIC								EGYPT, INC.	04-231	19500
Part I Continuation of Officers		<u>ust</u>	ee:			En	plan			Employees
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)					oly) I	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
DONA J. STEWART GOVERNOR	1.00	x						0.	0.	c
CHRISTOPHER TAYLOR										
GOVERNOR ROBERT TIGNOR	1.00	Λ	-					0.	0.	. 0
GOVERNOR CHRIS TOWNSEND	1.00	X	-	-	_	-	-	0.	0.	
GOVERNOR	1.00	x						0.	0	
ROXIE WALKER GOVERNOR	1.00	x				1		0.	0	
VILLEKE WENDRICH										
GOVERNOR GERRY SCOTT, III	1.00	X				1	 	0.	0.	
DIRECTOR KATHANN E. EL-AMIN	60.00	 	-	X	-	-	├_	124,307.	0.	11,000
CFO	60.00			х			<u> </u>	86,100.	0	10,30
M. FRASER PARSONS ASSOC DIR EAC LUXOR	60.00					x		137,235.	0.	11,662
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Schedule J-2 (Form 990) 2008

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

AMERICAN RESEARCH CENTER IN EGYPT, INC.

Employer identification number 04-2319500

FORM 990, PART VI, SECTION A, LINE 6: THERE ARE FOUR TYPES OF MEMBERS
ELECTED BY THE BOARD:
(A)INDIVIDUAL MEMBER: A PERSON WHO HOLDS MEMBERSHIP IN THE CORPORATION IN
HIS OR HER OWN INDIVIDUAL NAME.
(B) RESEARCH SUPPORTING MEMBER: AN INSTITUTION OR ORGANIZATION THAT HOLDS A
MEMBERSHIP IN THE CORPORATION AND MEETS THOSE STANDARDS OF SUBSTANTIAL
FINANCIAL SUPPORT OF, AND ACTIVE PARTICIPATION IN, THE AFFAIRS OF THE
CORPORATION, AS ARE SET BY THE BOARD FOR MEMBERSHIP AS A RESEARCH
SUPPORTING MEMBER.
(C)INSTITUTIONAL MEMBER: AN INSTITUTION OR ORGANIZATOIN THAT HOLDS A
MEMBERSHIP IN THE CORPORATION, IS INTERESTED IN THE CORPORATION AND
QUALIFIES FOR MEMBERSHIP IN THE CORPORATION UNDER SUCH STANDARDS AS ARE SET
BY THE BOARD FOR MEMBERSHIP AS AN INSTITUTIONAL MEMBER.
(D)HONORARY MEMBER: A PERSON WHO IS ELECTED AS AN HONORARY MEMBER BY THE
BOARD. THE EGYPTIAN AMBASSADOR TO THE UNITED STATES AND THE UNITED STATES
AMBASSADOR TO EGYPT SHALL BE INVITED TO BE HONORARY MEMBERS, EACH FOLLOWING
HIS OR HER SUCCESSIVE APPOINTMENT, AND, UPON HIS OR HER ACCEPTANCE, SHALL
BE DEEMED ELECTED BY THE BOARD.
FORM 990, PART VI, SECTION A, LINE 7A: ONLY INDIVIDUAL MEMBERS SHALL BE
ENTITLED TO VOTE AT ANNUAL OR SPECIAL MEETINGS OF MEMBERS. EACH INDIVIDUAL
MEMBER SHALL BE ENTITLED TO CAST ONE VOTE.

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

Schedule O (Form 990) 2008

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the

OMB No 1545-0047 Open to Public

Form 990 or to provide any additional information. Inspection Internal Revenue Service Name of the organization **Employer identification number** AMERICAN RESEARCH CENTER IN EGYPT INC. 04-2319500 LINE 10: A COPY OF THE 990 WAS EMAILED TO FORM 990, PART VI, SECTION A, ALL BOARD MEMBERS FOR THEIR REVIEW AND QUESTIONS/COMMENTS PRIOR TO BEING SUBMITTED TO THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF GOVERNORS MUST UPDATE CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY. THE NOMINATING GOVERNANCE COMMITTEE IS THEN RESPONSIBLE FOR FOLLOWING UP ON ANY CONFLICTS. FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION REVIEWED SEVERAL COMPENSATION STUDIES AND DECIDED TO USE THE COMPENSATION STUDY PRODUCED ANNUALLY FOR THE AMERICAN ASSOCIATION OF MUSEUM DIRECTORS. THE COMPENSATION IS APPROVED BY THE BOARD OR COMPENSATION COMMITTEE PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, INTEREST POLICY, FINANCIAL STATEMENTS, AND FORM 990 ARE AVAILABLE UPON REQUEST.