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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

Department of the Treasury

De Int	partme ernal R	ent of the Treasury Revenue Service		► The organization may ha	ive to use a cop	of this return to sa	atisfy stat	te reportin	g requirements	C	open to F	Public Ins	pection
_	For	the 2008 calen	dar year,	or tax year beginning	7/01	, 20	008, and	dending	6/30	<del></del>	, 20	09	
В	Chec	ck if applicable						<del>_</del>	D	Employer Id	lentification	n Number	
		Address change	Please use IRS label	American Inst	itute of	Indian S	tudi	es		23-62	97039		
	П	Name change	or print or type.	1130 East 59tl					E	Telephone r	umber		
	Н	Initial return	See specific	Chicago, IL 60	0637					(773)	702-8	8638	
	H	Termination	Instruc- tions.						<u> </u>	. ( /			_
	Н	Amended return	lions						اه	Gross receip	ate C	4,632	681
	Н	Application pending	F Name	and address of principal officer	Flice	Auerbach		1,	H(a) Is this a gro			Yes	X No
	Ш	Application pending	1	As C Above	PITSE	Muerbach			I(b) Are all affili			Yes	No
_		ax-exempt stati			t no )	4047(2)(1) or	. 🗀 🗈	527	If 'No,' atta	ch a list (se	e instruction		
<u> </u>					t no )	4947(a)(1) or							
<u> </u>				iastudies.org			T		H(c) Group exen				
K		pe of organization	X Corpor	ation Trust Assoc	iation Othe	er P	L Year	of Formation	on 1961	IVI State	of legal do	micile IL	
P	art I						D . 34		1				
	1			ganization's mission or									
9	1			<u>ut India and tl</u>									
Ē	1			ersities by pro									
Ver	١,			owledge_of_Ind:								It_ Ina	1a
ô	3			if the organization disc mbers of the governing			aispose	eu oi iiic	ne man 257	0 01 115 45	. 1		10
ed	4			nt voting members of t			. line 1	b)					10
it E	5			oyees (Part V, line 2a)	,	, , (	,	-,				-	0
Activities & Governance	6			iteers (estimate if nece	ssary)					- 6	5		0
₹	7	' <b>a</b> Total gross ι	unrelated	business revenue from	Part VIII, III	ne 12, column (	(C)			7	7a		0.
		<b>b</b> Net unrelated	d busines	s taxable income from	Form 990-T	line 34					7 b		0.
0 8 2010 Revenue	İ								Prior	r Year	(	Current Y	ear
20	8 Contributions and grants (Part VIII, line 1h). 4,160											4,284	
en 2	Tr Other revenue (rait viii, column (A), imes 3, ou, oc, oc, roc, and ric)										).	151	,546.
8											9.	64	,287.
= =	12	: Total revenu	e – add I	ines 8 through 11 (mus	t equal Part	VIII, column (A	A), line	12).	4,3	98,760	).	4,500	<u>,202.</u>
	13	Grants and s	sımılar am	nounts paid (Part IX, co	ılumn (A), lır	nes 1-3).				· · · · · · · · · · · · · · · · · · ·		- <del></del>	
ш	14	Benefits paid	d to or for	members (Part IX, col	umn (A), lın	e 4)							
SCANNED	15	Salaries, oth	er compe	ensation, employee ben	efits (Part I)	C, column (A), I	lınes 5-	·10)	2	93,482	2.	335	<u>,258.</u>
SCANA Expanses	16	a Professional	fundraisi	ng fees (Part IX, colum	n (A), line 1	1e)							
3	.	<b>b</b> Total fundrai	ısına expe	enses (Part IX, column	(D). line 25)	<b>-</b>	13.	781.	w ' w	, (, ,	1, 1,	y y	**
ത് മ	17			IX, column (A), lines 1					3.7	58,288	3	3,252	.026
			-	ines 13-17 (must equal		•	5)			51,770	_	3,587	
	19			es Subtract line 18 from						46,990			, 918.
_		Revenue les	2 exhense	55 Subtract line 16 from	11 11119 12	<del>70808108</del>	<u> </u>						
Net Assets or		T-1-11-	σ>	16\				S		ng of Year		End of Ye	
98	20		-	•	68	MAY 18 20	010	080		23,974		7,158 1,579	
5	21		•	•	1 1	•	- 1	RS		16,861			
	14			lances Subtract line 21			1 157	<u>  =   </u>	5,4	07,113	3.	5,579	,468.
P	art I		ure Blo			OGDEN.	<u>UI</u>						
		Under penaltic true, correct,	es of perjury, and complete	, I declare that I have examined e Declaration of preparer (othe	d this return, incl r than officer) is	uding accompanying based on all informa	g schedule ation of w	es and stat hich prepa	ements, and to rer has any kno	the best of m wledge	y knowledg	e and belief,	ıt ıs
~			Da.	12 11 Th is la a						5/12/10			
2	gn ere	Signature	1 ( 040	ph w .Juest -					Date	7 2 7 7 2			
	CIC	-	ALP H		0				Vale				
			orint name ar	W. NICHOLAS	PRESI	DENI					<del> </del>		<del></del> .
		Туре огр	mint manne an	id title			15.		<del></del>		Brongraria	a .dontifina	numbar
_				00 00	V	Λ	Date	-1 1	Check self-	ıf	(see instr	s identifying uctions)	number
	aid	Preparer's	. X	Sheila It "	* acy	fnsk:	5	h(t)		yed 🏲 🔼	]		
	re- arer'	signature		<u> </u>	<u> </u>	<u> </u>		• • •	_		[P002]	18480	
	se	Firm's name of		zynski & Assoc		Ltd.							
_	nly	employed),		1635 Butterfiel		Ste 140			EIN		42668	94	
_		address, and ZIP + 4	Oak	brook Terrace,	IL 601	31			Phone	no ► (6		16-892	20
M	ay the	e IRS discuss tl	his return	with the preparer show	vn above? (s	ee instructions	i)				X	Yes	No

Form	n <b>990</b> (2008) American Institute of Indian Studies	23-6297039					
Par							
1	Briefly describe the organization's mission:						
	See Schedule O	- <b></b>					
	Did the organization undertake any significant program services during the year which were not listed on the	nrior					
_	Form 990 or 990-EZ?	[	Yes	X	No		
	If 'Yes,' describe these new services on Schedule O	L					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? [	Yes	X	No		
	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 and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all	expenses. S	Section 5	01(c)(3	)		
	expenses, and revenue, if any, for each program service reported	ocations to	otricis, t	ic tota	•		
42	a (Code: (Code: (Expenses \$ 2,990,304.) including grants of \$) (Rev	venue \$			)		
	Study of Indian culture and civilization, awarding fellowships to su	pport re	esearc	h			
	and study						
		. <del></del> .					
	L Code Total Conservation Code Code Code Code Code Code Code Code	vonuo ė					
41	b (Code) (Expenses \$) (Rev	venue \$_	<del></del>		—,		
					- <i></i>		
4	c (Code) (Expenses \$ including grants of \$) (Rev	venue \$_			)		
					_ <b>_</b>		
			. <b></b> -				
			<del> </del>				
4	d Other program services (Describe in Schedule O )						
	(Expenses \$ including grants of \$ ) (Revenue \$	· · · · · · · · · · · · · · · · · · ·					
40	e Total program service expenses ► \$ 2,990,304. (Must equal Part IX, Line 25, column (B))						

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates	,		v
4	for public office? If 'Yes,' complete Schedule C, Part I  Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	3 4		<u>X</u>
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 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Χ	
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, VIII, IX, or X as applicable	11	х	
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		_X
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	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	Х_	
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		<u> x</u>
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a <sup>2</sup> If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
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 27 If 'Yes,' complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5° If 'Yes,' complete Schedule J	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
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 ₹ 'Yes,' complete Schedule L, Part II	26		X
	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> </u>
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee	*		
á	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 person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
ŀ	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
(	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule $M$	30		х
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 7f 'Yes,' complete Schedule N, Part II	32		Х
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		Х
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		х
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		х
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 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	ıs <b>37</b>		х
BAA		Form	990	(2008)

Turt V Statements Regarding Other Into Finings and Tax Compilation			
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.		Yes	No
Information Returns Enter -0- if not applicable 1a 1			
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a 0			
2b 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 toe-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	х	
<b>b</b> If 'Yes,' enter the name of the foreign country.▶ <u>India</u>	**************************************		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		ž Ž	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were n deductible?	ot <b>6b</b>		
7 Organizations that may receive deductible contributions under section 170(c).	<b>1</b>		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7ь		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Χ
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:	}		
a Initiation fees and capital contributions included on Part VIII, line 12	,		
<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders.		ŀ	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	1.3		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
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Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> 5ec</u>	ction A. Governing Body and Management		···									
	For each 'Yes' response to lines 2-7b below, and for a 'l processes, or changes in Schedule O. See instructions	No' response to lines 8 or 9b below,	describe the circumstances	1,41,	Yes	No						
1:	a Enter the number of voting members of the governing b	ody	1a 10	<del> </del>	٠,	Ç.						
ı	$\boldsymbol{b}$ Enter the number of voting members that are independent	ent [	1b 10	~ .	* ·	٠,						
2	2 Did any officer, director, trustee, or key employee have officer, director, trustee or key employee?	a family relationship or a business i	relationship with any other	2	<u> </u>	, X						
3	B Did the organization delegate control over management of officers, directors or trustees, or key employees to a life	duties customarily performed by or management company or other pers	under the direct supervision son?	3		Х						
4	Did the organization make any significant changes to its since the prior Form 990 was filed?	organizational documents	<u> </u>	4		Х						
5 6		3	ion's assets?	5	х	X						
-	7a Does the organization have members, stockholders, or organization body? See Schedule 0		more members of the	7a	X							
ı	${f b}$ Are any decisions of the governing body subject to appr	-	·	7b	., 33	X						
8	the following											
	a The governing body?											
	<b>b</b> Each committee with authority to act on behalf of the go		-	8b	Х	X						
	9a Does the organization have local chapters, branches, or affiliates?  9a  b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?  9b											
10	and branches to ensure their operations are consistent with those of the organization?  9  Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 See Schedule O  10											
	1 Is there any officer, director or 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 See Schedule O											
Sec	ction B. Policies	ies and addresses in Schedule O B	cc bancaute o	•••	Х							
			·····		Yes	No						
12 a	2a Does the organization have a written conflict of interest	policy?/f 'No,' go to line 13		12a	Х							
ŀ	<b>b</b> Are officers, directors or trustees, and key employees re to conflicts?	quired to disclose annually interests		12 b	х							
(	c Does the organization regularly and consistently monitor Schedule O how this is done See Schedule O	r and enforce compliance with the p	olicy?f 'Yes,' describe in	12 c	х							
13	Does the organization have a written whistleblower police	cy?		13		X						
14	Does the organization have a written document retention	n and destruction policy?		14		X						
15	<ul> <li>Did the process for determining compensation of the fol persons, comparability data, and contemporaneous subs</li> </ul>	lowing persons include a review and stantiation of the deliberation and de	d approval by independent	<u>.</u>		مُندُندُ						
	a The organization's CEO, Executive Director, or top mana	3	<u></u>		Х							
ŧ	${f b}$ Other officers of key employees of the organization? Se	ee Schedule O			Χ							
16 <i>a</i>	Describe the process in Schedule O. (see instructions)  a Did the organization invest in, contribute assets to, or pa	articipate in a joint venture or simila		143 L .								
ŧ	<ul><li>entity during the year?</li><li>b If 'Yes,' has the organization adopted a written policy or in joint venture arrangements under applicable federal to</li></ul>	procedure requiring the organization	<u> </u>	16 a		X						
	status with respect to such arrangements?	ax law, and taken steps to safeguar	d the organization's exempt	16 b								
	ction C. Disclosures	and to be fileds. TT			-							
	List the states with which a copy of this Form 990 is requ											
18	Section 6104 requires an organization to make its Forms inspection. Indicate how you make these available. Chec	ck all that apply.	nd 990-T (501(c)(3)s only) av	aılable	e for	public						
	Own website Another's website	X Upon request										
	Describe in Schedule O whether (and if so, how) the org statements available to the public See Schedul					nancia						
	State the name, physical address, and telephone number			janiza	tion:							
•	► Elise Auerbach 5835 S. Kimbark, Roc	om_325_ Chicago_IL_6063	<u>37 (773) 702-8638 </u>									

BAA

Form 990 (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.
- 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) or 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 r	ot compe	nsate	any	offi	cer,	direct	tor,	trustee, or key emplo	yee	
(A)	(B) (c)							(D)	(E)	(F)
Name and Title	Average hours per week	ndividual instee	tion (costitutional to stee	Check Officer	dey criployec	emplayee	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
Purnima Mehta										
India Director	40	Х		X				48,231.	0.	0.
Elise Auerbach US Director	40	Х		Х				61,010.	0.	0.
Ralph W. Nicholas									· · · · · · · · · · · · · · · · · · ·	<del></del>
President	1 0			Х				0.	0.	0.
John Echeverri-Gent										
Treasurer	<b>1</b> 0			Х				0.	0.	0.
John Cort										
Secretary	0			X				0.	0.	0.
Michael Fisher										
Vice President	0			X				0.	0.	0.
Frederick M. Asher										
Chairman	0			X				0.	0.	0.
See Statement 1					ŀ					
	0	Х						0.	0.	0.
							$\vdash$			
	1									
				-						

TEEA0107L 04/24/09

_	organization • 0	Sation from the							
			Yes	No					
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated empon line 1a? If 'Yes,' complete Schedule J for such individual	ployee 3		Х					
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		Х					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for service rendered to the organization? If 'Yes,' complete Schedule J for such person	ces 5		X					
Secti	tion B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$1 compensation from the organization	00,000 of							
	(A) Name and business address Description of Services								
			-						
	Table with a first and a death and a first								
	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ► 0								
BAA	TEEA0108	BL 10/13/08 Form	990 (	(2008)					

1 4	t viii Statement of Revenue					
		, 'A'	<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
v	1a Federated campaigns	1a				
N E	<b>b</b> Membership dues	1b 68,000.	***	* \$		
용리	-	1c				
S &	c Fundraising events					
농	d Related organizations	1d	*	·	¥	,734
Ř.	e Government grants (contributions)	1e 1,819,126.	<b>"</b>	, ,	*	ζ";
5%	f All other contributions, gifts, grants, and					
골품	similar amounts not included above	1f 2,397,243.	!		y	
F 0	g Noncash contribns included in lns 1a-1f:	\$	٠ ٧٠,		*	· ·
ខ្លួំ₹	h Total. Add lines 1a-1f		4,284,369.			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	TOTAL FILE THE TENTE	Business Code	1,201,003.			, à
ᆲ	2. Momborabin Duos [ Assosam	<del></del>	140,871.	140,871.		
2	2a Membership Dues & Assessm	encs		· · · · · · · · · · · · · · · · · · ·		
H.	<b>b</b> Administration Fees		1,000.	1,000.		
ž	c Application Fees		8,175.	8,175.		
S	d Affiliation Fees		1,500.	1,500.		
Æ	e					
援	f All other program service reven	ue				
8	g Total. Add lines 2a-2f	<b>-</b>	151,546.	\$4. E	· · ·	* \$ * * *,\$
	3 Investment income (including d	undends interest and			<u></u>	
	other similar amounts)	ividends, interest and	71,766.	71,766.		
	4 Income from investment of tax-	evemnt hand proceeds	, , ,			
		exempt bond proceeds				
	5 Royalties	(3.5			*	*
	<del></del>	Real (II) Personal	,*,	***		- k
	6a Gross Rents			` 🔹 "	**	4 4
	<b>b</b> Less rental expenses					
	c Rental income or (loss)				<del></del>	
	d Net rental income or (loss)	►				
	7a Gross amount from sales of (i) Sec	curities (ii) Other				
ı	assets other than inventory 125	,000.			<b>x</b>	
			<i>\$</i> *	***	. T	
	b Less: cost or other basis and sales expenses 132	2,479.	*	*		\$£
		,479.				
		,4/3.  ▶	7 470	7 470		
	d Net gain or (loss)		-7,479.	-7,479.		
	8a Gross income from fundraising	events				
OTHER REVENUE	(not including \$		Ça A	· · · ·	<b>*</b>	
E	of contributions reported on line	e 1c)	***			
~	See Part IV, line 18	a				,
뿔	<b>b</b> Less: direct expenses	ь				
Ö	c Net income or (loss) from fundi	aising events				
	9a Grass income from gaming act	vutuos				
	9a Gross income from gaming acti See Part IV, line 19	a		* *	-	
	<b>b</b> Less direct expenses	h	~	74 4 7 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	**	7
	c Net income or (loss) from gami	ng activities				
				) e		.2.
	10a Gross sales of inventory, less re		î î	<i>*</i>	¥#:	, ší
	and allowances	a				į į
	<b>b</b> Less: cost of goods sold	b	· · · · · · · · · · · · · · · · · · ·			
	c Net income or (loss) from sales					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue.					
	e Total. Add lines 11a-11d	<u> </u>		-		
		0.4 5 6 5 5 6				
l	<b>12 Total Revenue.</b> Add lines 1h, 2g 10c, and 11e	J, 3, 4, 5, 6d, /d, 8c, 9c, ▶	4,500,202.	215,833.	ο.	0.

Page 10

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must comp	olete column (A) but are	<u>.</u> ,	e columns (B), (C), and	(D).
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			, 3	
4 Benefits paid to or for members			,	
5 Compensation of current officers, directors, trustees, and key employees	156,117.	124,033.	18,303.	13,781
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	179,141.	9,624.	169,517.	
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal				
c Accounting	8,337.		8,337.	
<b>d</b> Lobbying				
e Prof fundraising svcs See Part IV, In 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	227,415.		227,415.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	15,996.	13,597.	2,399.	
Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	37,296.	31,624.	5,672.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	120,192.		120,192.	
23 Insurance	350.	297.	53.	
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.)	rig 🎍	\$ ***	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ "
a Scholary research project exp	2,794,652.	2,794,652.		<u> </u>
<b>b</b> Telephone	19,656.	6,164.	13,492.	
c Supplies	8,878.	517.	8,361.	
d Misc	8,199.	372.	7,827.	
e Printing and Publications	4,541.	3,969.	572.	·
f All other expenses	6,514.	5,455.	1,059.	
25 Total functional expenses. Add lines 1 through 24f	3,587,284.	2,990,304.	583,199.	13,781
26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	3,23.,231.	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	200,233.	25,.02
campaign and fundraising solicitation	<u> </u>			Form <b>990</b> (2008

Pa	rt X	Balance Sheet							
			(A) Beginning of year		Eı	<b>(B)</b> nd of ye	ar		
	1	Cash – non-interest-bearing	386,372.	1		79	,51	0.	
	2	Savings and temporary cash investments	1,358,294.	2	2	2,308			
	3	Pledges and grants receivable, net		3					
	4	Accounts receivable, net		4					
	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					
ASSETS	7	Notes and loans receivable, net		7					
E	8	Inventories for sale or use		8					
Ś	9	Prepaid expenses and deferred charges		9					
		Land, buildings, and equipment: cost basis 10a 3,537,021.			<i>F</i>		16		
	b	Less accumulated depreciation Complete Part VI of			<u> </u>				
		Schedule D 2,474,544.	1,254,245.	10 c		1,062			
	11	Investments — publicly-traded securities	3,834,759.	11	3	3,631	<u>,19</u>	1.	
	12	Investments – other securities See Part IV, line 11		12					
	13	Investments – program-related See Part IV, line 11		13					
	14	Intangible assets		14				_	
	15	Other assets. See Part IV, line 11	90,304.	15	<u> </u>		,14		
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,923,974.	16		7,158	<u>, 78</u>	<u>1.</u>	
	17	Accounts payable and accrued expenses	250 000	17	<b>——</b>				
	18	Grants payable	350,000.	18					
L	19	Deferred revenue		19	<del></del>				
Ā	20	Tax-exempt bond liabilities		20					
В	21	Escrow account liability. Complete Part IV of Schedule D		21		<i>y</i>			
LIABILIT	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			ĺ				
- 1		of Schedule L		22					
E S	23	Secured mortgages and notes payable to unrelated third parties		23					
	24	Unsecured notes and loans payable		24					
	25	Other liabilities Complete Part X of Schedule D	1,166,861.	25		L,579			
	26_	Total liabilities. Add lines 17 through 25	1,516,861.	26	1	L,579	<u>, 31</u>	3.	
N E T		Organizations that follow SFAS 117, check here 🕒 🔀 and complete lines			<b>₹</b>	*	× ±		
		27 through 29 and lines 33 and 34.							
<b>ASSI</b>		Unrestricted net assets	2,303,258.	27		2,162			
ĔŢ		Temporarily restricted net assets	3,003,855.	28	3	3,316			
	29	Permanently restricted net assets	100,000.	29		100	,00	<u>U.</u>	
O R F		Organizations that do not follow SFAS 117, check here  and complete lines 30 through 34.	LA POST A			, p <u>à</u>	)	,	
OZCT	30	Capital stock or trust principal, or current funds		30					
	31	Paid-in or capital surplus, or land, building, and equipment fund		31					
BALAZCEN	32	Retained earnings, endowment, accumulated income, or other funds		32					
Ĉ	33	Total net assets or fund balances.	5,407,113.	33	5	5,579	, 46	8.	
Š	34	Total liabilities and net assets/fund balances	6,923,974.	34		7,158			
Pa	rt XI	Financial Statements and Reporting							
					_	Ye		No	
			Other		L	_	_ */	X	
2	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	<b>b</b> Were the organization's financial statements audited by an independent accountant?								
	c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?								
	a As	a result of a federal award, was the organization required to undergo an audit or a				3a }	T		
	Audit Act and OMB Circular A-133?								
BA		Yes,' did the organization undergo the required audit or audits?				3b 3	_	ואטנ	

# SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of	the	organi	zation								Employe	r identıfıcatı	ion number		
Amer				e of Indian S								<u> 297039</u>			
Part	IJ	Rea	son for Pu	blic Charity Statu	s (All orga	nızatıons	must (	comple	ete this	part.	) (see	ınstruct	tions)		
The or	gar	ıızatı	on is not a pr	ivate foundation beca	use it is: (Ple	ease check	only <b>one</b>	organiz	ation.)						
1	_],	A ch	urch, conventi	on of churches or ass	ociation of c	hurches des	scribed i	nsection	n 170(b)	(1)(A)(i)					
2 [	],	A sci	nool described	d in <b>section 170(b)(1)(</b>	<b>A)(ii).</b> (Attach	n Schedule	E)								
3 [	<u> </u>	A ho	spital or coop	erative hospital service	e organizatio	n described	d in <b>secti</b>	on 170(l	<b>ЬХ1ХАХ</b>	iii <b>).</b> (Al	tach Sc	hedule H	)		
4 [	<u></u> ],	A me	edical research	h organization operat	ed in conjunc	tion with a	hospital	describ	ed insec	tion 17	0(b)(1)(A	A)(iii) En	ter the hos	spital's	5
			e, city, and sta												
5 [	二.	170(I	ο <b>χ1χΑχίν).</b> (ઉ	perated for the benefi Complete Part II)	_		-	•			ernmen	tal unit d	escribed is	ection	n -
6 7	A federal, state, or local government or governmental unit described insection 170(b)(1)(A)(v).  X 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)														
8 [	,	А со	mmunity trust	described in section	170(b)(1)(A)(v	i). (Comple	te Part	II)							
9 [	An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)														
10	7	An o	rganization or	ganized and operated	dexclusively	to test for p	ublic sa	ifety. Se	esection	1 509(a)	<b>(4).</b> (se	e instruct	tions)		
11 [	$\exists i$	An o more	rganization or publicly supp ribes the type	ganized and operated ported organizations of supporting organ	d exclusively described in zation and co	for the bend section 509	efit of, to (a)(1) or es 11e ti	o perfor section	m the fu 509(a)	unctions (2). See	of, or o	carry out <b>509(a)(3)</b>	the purpos . Check the	ses of he bo	one o x that
		a C	Type I	<b>b</b> Type II				ctionally				d $\square$	Type III-		
e [	— t	By cl than 509(a	necking this be foundation m	ox, I certify that the canagers and other the	rganization is	s not contro	illed dire	ectly or	ındırectl	y by on	e or mo bed in s	re disqua section 50	alified per	sons c	ther
f	I	f the	organization k this box	received a written de	termination f	rom the IRS	S that is	а Туре	I, Type	II or Ty	/pe III si	upporting	organizat	ion,	
g	5	Since	e August 17, 2	2006, has the organiza	ation accepte	d any gift o	or contri	bution f	rom any	of the	followin	g person	s?		
													[	Yes	No
	(	(i)	below, the go	o directly or indirectly overning body of the	supported org	ganızatıon?	togethe	er with p	ersons	describ	ed in (ii)	) and (III)	11 g (i)		
	(	(ii)	•	nber of a person des	• • • • • • • • • • • • • • • • • • • •								11 g (ii)		
		(iii)		lled entity of a perso		., .,							11 g (iii)		
h	F	Prov	de the follow	ng information about	the organiza	tions the or	ganızatı	on supp	orts		,				
	(i)		of Supported anization	(II) EIN	(III) Type of o (described o above or II (see instri	n lines 1-9 RC section	organiza (i) listei gove	Is the tion in col d in your erning ment?	the organ	ou notify ization in (i) of upport?	organizat	Is the tion in col zed in the S ?	(vii) Amoun	t of Sup	port
							Yes	No	Yes	No	Yes	No			
							ļ								
			<del></del>				<u> </u>	<del> </del>		<del></del>					
		<del></del>	<del></del>									-			
					<u> </u>		-		<del>                                     </del>		<u> </u>				
Total								*		Ř					

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

Schedule A (Form 990 or 990-EZ) 2008

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	tion A. Public Support	ed the box on lin	le 5, 7, 01 8 01 Pa	<u> </u>		-	<del></del>
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	1,859,001.	2,332,487.	3,431,652.	4,168,831.	4,284,369.	16,076,340.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4	Total. Add lines 1-3	1,859,001.	2,332,487.	3,431,652.	4,168,831.	4,284,369.	16,076,340.
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).			wide per St.			578,538.
6	<b>Public support.</b> Subtract line 5 from line 4	<i>,</i>					15,497,802.
Sec	tion B. Total Support						
Cale: begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,859,001.	2,332,487.	3,431,652.	4,168,831.	4,284,369.	16,076,340.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	11,746.	26,352.	42,755.	60,219.	64,287.	205,359.
9	Net income form unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10		Section 1				16,281,699.
12	Gross receipts from related activ	vities, etc. (see ir	istructions)			12	449,100.
13	First five years. If the Form 990 organization, check this box and		zation's first, seco	nd, third, fourth,	or fifth tax year	as a section 501(d	c)(3) <b>•</b> [
	tion C. Computation of Pu	<del></del>				····	
	Public support percentage for 20				)	14	95.2%
15	Public support percentage for 20	007 Schedule A, F	Part IV-A, line 26	Ī		15	98.2%
16 a	33-1/3 support test - 2008. If the and stop here. The organization	e organization die qualifies as a pu	d not check the bublicly supported	ox on line 13, ar organization.	nd the line 14 is 3	3-1/3 % or more,	check this box
t	33-1/3 support test — 2007. If the and stop here. The organization	e organization die qualifies as a pu	d not check a box iblicly supported	c on line 13, or 16 organization	5a, and line 15 is	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'fact	meets the 'facts-	-and-circumstance	es' test, check thi	s box and stop he	r <b>e.</b> Explain in Par	t IV how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-ar	meets the 'facts id-circumstances'	and-circumstance test The organ	es' test, check thi ization qualifies a	s box and <b>stop he</b> as a publicly supp	r <b>e.</b> Explain in Par ported organizatio	t IV how the ▶
18	Private foundation. If the organ	ization did not ch	eck a box on line	i, io, ioa, iob, la	ra, or 17b, check	uns box and see	matructions -

Schedule A (Form 990 or 990-EZ) 2008 American Institute of Indian Studies 23-6297039 Page 3 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) Section A. Public Support Calendar year (or fiscal yr beginning in) ► (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

3	facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7a	Amounts included on lines 1, 2, 3 received from disqualified persons						
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				· <del>-</del>		<del></del>
8	Public support (Subtract line						
	7c from line 6)			5 1			
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	(e) 2008	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included inline 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)						
	Total support. (add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	d stop here		ond, third, fourth,	or fifth tax year	as a section 501(c	)(3) ▶ □
Sec	<u>tion C. Computation of Pu</u>	blic Support P	ercentage				
15	Public support percentage for 2	008 (line 8, colum	in (f) divided by	line 13, column (f)	)	15	%_
16	Public support percentage from	2007 Schedule A	, Part IV-A, line	27g		16	%
<u>Sec</u>	tion D. Computation of Inv	estment Incor	ne Percentag	е		····	
17	Investment income percentage	for 2008 (line 10c,	column (f) divid	led by line 13, colu	ımn (f))	17	%
18	Investment income percentage	from <b>2007</b> Schedu	ile A, Part IV-A,	line 27h		18	%
19 a	33-1/3 support tests - 2008. If the						ot ▶ □

b 33-1/3 support tests — 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form 9	990 or 9	90-EZ	2008	Ame	rica	n I	nst.	itut	<u>e o</u>	f I	ndia	n St	udie	s	23-	6297	039		Page 4
Part IV «	Supple Part II	ement . line	t <mark>al Inf</mark> 17a o	ormat r 17b:	i <b>on.</b> C or Pa	omplert III.	ete Iıne	this 12.	part Prov	to p /ide	rovic any	le the other	e exp	lanational	on red Inforr	juired nation	by Pa ı. (see	art II, e instr	line 10 action	); ıs)
<del> </del>		<u>′                                     </u>								•								•		· <b>/</b>
					<del>-</del>														<del>-</del> -	
						- <b></b>														
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#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name	of the organization			Employer Identification number
Ame	erican Institute of Indian St	udies		23-6297039
Par	t. 1 Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar o Form 990, Part IV, line 6.	r Funds or Acco	ounts Complete If
		(a) Donor advised funds	<b>(b)</b> Fi	unds and other accounts
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 dofunds are the organization's property, subject	nor advisors in writing that the assets he to the organization's exclusive legal con	eld in donor advise itrol?	d Yes No
6	Did the organization inform all grantees, done used only for charitable purposes and not for impermissible private benefit??	ors, and donor advisors in writing that gr the benefit of the donor or donor adviso	ant funds may be or or other	Yes No
Pär	t II Conservation Easements Comple	ete if the organization answered "	Yes' to Form 99	0, Part IV, line 7.
1	Purpose(s) of conservation easements held b	y the organization (check all that apply)		
	Preservation of land for public use (e.g.,			ally important land area
	Protection of natural habitat	Preserva	ation of certified his	storic structure
_	Preservation of open space			
2	Complete lines 2a-2d if the organization held of the tax year	a qualified conservation contribution in	the form of a conse	ervation easement on the last d
				Held at the End of the Year
а	Total number of conservation easements		2 a	
b	Total acreage restricted by conservation ease	ments	2 b	
С	Number of conservation easements on a cert	fied historic structure included in (a)	2 c	
d	Number of conservation easements included	ın (c) acquired after 8/17/06	2 d	
3	Number of conservation easements modified, year ▶	transferred, released, extinguished, or t	terminated by the o	rganization during the taxable
4	Number of states where property subject to co	onservation easement is located		
5	Does the organization have a written policy reenforcement of the conservation easement it	egarding the periodic monitoring, inspect holds?	tion, violations, and	Yes No
6	Staff or volunteer hours devoted to monitoring	g, inspecting, and enforcing easements o	during the yea►	
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing easements duri	ing the yea <b>r&gt;</b> \$	
8	Does each conservation easement reported of $170(h)(4)(B)(i)$ and $170(h)(4)(B)(i)$ ?	n line 2(d) above satisfy the requirement	ts of section	Yes No
	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	to the organization's financial statement	ts that describes th	e organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasure wered 'Yes' to Form 990, Part IV,	es, or Other Sim line 8.	ilar Assets
1a	If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial statem	lic exhibition, education, or research in t	statement and bala furtherance of publ	ance sheet works of art, historic ic service, provide, in Part XIV,
b	If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items	er SFAS 116, not to report in its revenue blic exhibition, education, or research in	statement and bala furtherance of publ	ance sheet works of art, historic ic service, provide the following
	(i) Revenues included in Form 990, Part VIII	, line 1		►\$ ►\$
	(ii) Assets included in Form 990, Part X			•
	If the organization received or held works of amounts required to be reported under SFAS	116 relating to these items	assets for financial	
	Revenues included in Form 990, Part VIII, line	e 1		<b>►</b> \$
b	Assets included in Form 990, Part X			►\$ ►\$

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

Schedule <b>D</b> (Form 990) 2008 <b>Ameri</b> c							23-629			Page <b>2</b>
Part III Organizations Maintain	ing Colle	ections	of Art, Hist	orica	l Treasures, o	r Other	Similar As	sets (c	ontını	ıed)
<ol> <li>Using the organization's accession that apply)</li> </ol>	and other	records	, check any of	the fol	lowing that are a	significa	nt use of its c	ollection	ıtems	(check a
a Public exhibition			<b>d</b> 🗌 Loan	or ex	change programs					
<b>b</b> Scholarly research			e 🗌 Othei	·						
c Preservation for future general	tions									
Provide a description of the organi Part XIV	ization's co	llections	and explain h	ow the	ey further the orga	anızatıon	's exempt purp	pose in		
5 During the year, did the organizati assets to be sold to raise funds ra								Yes		No
Part IV Trust, Escrow and Cust IV, line 9, or reported a						answer	ed 'Yes' to	Form 9	990, P	art
1a Is the organization an agent, trusto included on Form 990, Part X?	ee, custodia	an, or ot	ther intermedia	ry for	contributions or c	other asse	ets not	Yes	[	No
<b>b</b> If 'Yes,' explain the arrangement in	n Part XIV	and com	nplete the follo	wing t	able <sup>.</sup>					
								Amour	ıt	
c Beginning balance						10				
<b>d</b> Additions during the year						1 d				
e Distributions during the year						<u>1 e</u>				
f Ending balance						1f				
2a Did the organization include an an	nount on Fo	orm 990,	, Part X, line 2	12				Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement in	n Part XIV								_	_
Part V Endowment Funds Com	plete if o	rganiza	ation answei	red 'Y	es' to Form 99	90, Par	t IV, line 10	•		
	(a) Current	year	(b) Prior yea	ır	(c) Two years bac	k (d)	Three years back	(e)	Four year	rs back
1a Beginning of year balance	717	,061.	Á es		*	*/			-	ž
<b>b</b> Contributions		· ·	R' 3 f 4:		· · · · · · · · · · · · · · · · · · ·				2	25.
c Investment earnings or losses	12	,945.			7.2 SÁ.	1.3 &	š	1 3*	3 800	3.83
d Grants or scholarships		,		•	7. 3. 3.		· · · · · · · · · · · · · · · · · · ·	1	*****	
e Other expenditures for facilities and programs			<del></del>							
f Administrative expenses										
g End of year balance.	730	,006.				ŝ				$\overline{}$
2 Provide the estimated percentage			lance held as				<del>, · </del>			
a Board designated or quasi-endowr	-		30 %							
<b>b</b> Permanent endowment	13.70%		• •							
c Term endowment	*									
C remi endowment	°									
3a Are there endowment funds not in organization by	the posses	ssion of	the organizatio	n that	are held and adr	mınıstere	d for the		Yes	No
(i) unrelated organizations								3a(i)		X
(ii) related organizations								3a(ii)		X
<b>b</b> If 'Yes' to 3a(II), are the related or	ganızatıons	s listed a	s required on	Sched	ule R?			3b		X
4 Describe in Part XIV the intended	uses of the	organiz	zation's endowr	nent f	undsSee Part	XIV				
Part VI Investments – Land, Bu	ildings, a	nd Eq	uipment. Se	e For	m 990, Part X	, line 10	O			
Description of investment			t or other basis vestment)		Cost or other casis (other)	(c) De	epreciation	(d)	Book V	alue
1a Land							-			
<b>b</b> Buildings					2,614,850.	2,	072,189.		542	,661.
c Leasehold improvements				T		T'			-	

Schedule D (Form 990) 2008 American Institut				23-62970	)39 Page :
Part VII Investments—Other Securities See Fo		ne 12. N/			
(a) Description of security or category (including name of security)	(b) Book value			hod of valuation of-year market	
Financial derivatives and other financial products					
Closely-held equity interests					
Other					
				,	
				-	
		<u> </u>			
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.) ►				**************************************	
Part VIII Investments - Program Related (See	<u>Form 990, Part X,</u>	line 13)	N/A		
(a) Description of investment type	(b) Book value		(c) Metl	hod of valuation	n ຸ
			Cost or end-	of-year market	value
		_			
		<u> </u>			<del></del>
		<del></del>	<del></del>		
	•				
	<u> </u>	+			
Total Column (h)/should equal Form 990 Part X Col. (R) line 13.)					
Total. Column (b)(should equal Form 990, Part X, Col (B) line 13)  Part IX Other Assets (See Form 990, Part X,	line 15) N/2	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	escription	n.			(b) Book value
(a) DC	sacription	······			(b) Book value
	<del></del>			-	
	**				
Total. Column (b) Total (should equal Form 990, Part X, c	ol (B), line 15)			▶	**
Part X Other Liabilities (See Form 990, Part					
(a) Description of Liability	(b) Amount		1.112		
Federal Income Taxes	(a) v in a carre	* * *			
Corpus Fund	1,579,3	13.	, ,		**
			: (Å	₹	
				*.	Ş
			,		
Total. Column (b) Total (should equal Form 990, Part X, col (B) line 25)	► 1,579,3	13.	*	٠	ş
In Part XIV, provide the text of the footnote to the organiz			ts the organ	nization's liabilit	ty for uncertain tax
positions under FIN 48	state		.5 organ		., .ooaa

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Schedule D (Form 990) 2008 American Institute of Indian S		<u>23-6297039</u>	Page <b>4</b>
Part XI Reconciliation of Change in Net Assets from Form 990	0 to Financial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)			4,500,202.
2 Total expenses (Form 990, Part IX, column (A), line 25)		<u> </u>	3,587,284.
3 Excess or (deficit) for the year Subtract line 2 from line 1		ļ	912,918.
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities		ļ	
6 Investment expenses			
7 Prior period adjustments			<del></del>
8 Other (Describe in Part XIV)		<u> </u>	
9 Total adjustments (net) Add lines 4-8.  10 Excess or (defeat) for the year per financial statements. Combine lines 3.	and 0	<del></del>	012 010
Excess or (deficit) for the year per financial statements Combine lines 3  Part XII Reconciliation of Revenue per Audited Financial State		Peturn	912,918.
1 Total revenue, gains, and other support per audited financial statements	ments with Nevenue per r		4,500,202.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		1888	1,300,202.
a Net unrealized gains on investments	2a	3.3	
<b>b</b> Donated services and use of facilities	2 b	$\dashv$	
c Recoveries of prior year grants	2c	$\exists$	
d Other (Describe in Part XIV)	2 d		
e Add lines 2a through 2d	<u> </u>	2 e	
3 Subtract line 2e from line 1			4,500,202.
4 Amounts included on Form 990, Part VIII, line 12, but not on line1		**	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, III	ne 12.)	5 4	4,500,202.
Part XIII Reconciliation of Expenses per Audited Financial State	tements With Expenses pe	r Return	
1 Total expenses and losses per audited financial statements			3,587,284.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		# ` *	
a Donated services and use of facilities	2 a		
<b>b</b> Prior year adjustments	_2b		
c Losses reported on Form 990, Part IX, line 25	2c		
d Other (Describe in Part XIV)	2 d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1	1 4	3 3	3,587,284.
4 Amounts included on Form 990, Part IX, line 25, but not on line1:	1		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	_ <b> </b>	
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, I	ine 18)	5   3	3,587,284.
Part®XIV			
omplete this part to provide the descriptions required for Part II, lines 3, 5, ar ne 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 2	and 4b		<b></b>
Support general operations of the organization			
			<b></b>

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Schedule D (Form 990) 2008

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Schedule <b>D</b>	(Form 990) 2008  Supplemental Information (continued)	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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#### Schedule F (Form 990)

## Statement of Activities Outside the United States

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

American Institute of				23-62970	
		es Outside the	United States. Complet	e if the organizatio	n answered 'Yes'
to Form 990, Part					
1 For grantmakers. Does the grantees' eligibility for the	e organization ma grants or assistar	intain records to nce, and the sele	substantiate the amount of the ction criteria used to award the	e grants or assistance, fee grants or assistance?	Yes No
2 For grantmakers. Describe	n Part IV the or	ganızatıon's proc	edures for monitoring the use	of grant funds outside t	he United States
3 Activities per Region. (Use	Schedule F-1 (Fo	orm 990) if addition	onal space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
South Asia	12	139	Program Services	Language, research	2,380,740.
Note: Asia			110glam belvices	language, researen	2,000,.10.
		· · · · · · · · · · · · · · · · · · ·			
			·		
				**	
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<del></del>					
Totals ►	12	139			2,380,740.

Page 2

**⋉** 

Schedule F (Form 990) 2008 American Institute of Indian Studies

Part II 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 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)									
(h) Description of non-cash assistance									
(g) Amount of non-cash assistance									
(f) Manner of cash disbursement									
(e) Amount of cash grant									
(d) Purpose of grant									
(c) Region									
(b) IRS code section and EIN (if applicable)						Secretaries of the company of the co			
(a) Name of organization	Control of the Contro	こうちょう こうしゅうとう はいまかい かんかい かんかい かんかい かんかい かんかい かんかい かんかい	4 4 6 X 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	68.3		Statement ( ) Compression of the control of the con		Control of the state of the control	**************************************

equivalency letter

Schedule F (Form 990) 2008

3 Enter total number of other organizations or entities

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23-6297039 American Institute of Indian Studies Schedule F (Form 990) 2008

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
ВАА						Schedule F	Schedule <b>F</b> (Form 990) 2008

Schedule	F (Form 990) 2008 American institute of indian Studies	23-629/039	Page 4
Part IV	Supplemental Information	· —	
	Complete this part to provide the information required in Part I, line 2, and any other additional	I information	
<del></del>			
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			. <i>-</i>

# SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545 0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Open to Public Inspection

Employer identification number

American Insti	itute of Indian Studies	23-6297039	
	rt III, Line 1 - Organization Mission		
Dedicated to the advancement of knowledge about India and the promotion of			
intellectual engagement with India in American universities by providing research			
fellowship_support, training_in_Indian_languages, knowledge_of_Indian_culture, and			
supporting	publications about India.		
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder			
More_than_6	60 American colleges and universities suppo	ort research in India as members	
of the American Institute of Indian Studies.			
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body			
Trustees of	f Member Institutions annually elect the Of	fficers and Members of the	
Executive C	Committee (governing body)		
Form 990, Par	rt VI, Line 10 - Form 990 Review Process		
Return is s	sent to President, Treasurer and US Directo	or for their review and signing.	
Form 990, Part VI, Line 11 - Officer, Director, Trustee, Key Employee Mailing Address			
See Stateme	ent 1 for list of Officers, Executive Commi	ittee Members, Committee Chairs,	
and Trustee	es.		
Form 990, Par	rt VI, Line 12c - Explanation of Monitoring and Enforcer	ment of Conflicts	
Each direct	tor, principal officer and member of a comm	nittee with Trustee delegated	
powers shal	ll annually sign a statement which affirms	such person has received a copy	
of the conf	flicts of interest policy, has read and und	derstands the policy, and has	
agreed to o	comply with the policy. If the Board of Tr	rustees or Executive Committee	
has reasona	able cause to believe a member has failed t	co disclose actual or possible	
conflicts	of interest, it shall inform the member of	the basis for such belief and	
afford the	member an opportunity to explain the alleg	ged failure to disclose. If,	
after heari	ing the member's response and after making	further investigation as	
warranted h	by the circumstances, the Board of Trustees	s or Executive Committee	

Schedule <b>O</b> (Form 990) 2008	Page
Name of the organization  American Institute of Indian Studies	Employer Identification number 23-6297039
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflict	s (contin
determines the member has failed to disclose an actual or pos	sible conflict of
interest, it shall take appropriate disciplinary and corrective	ve action.
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers	s & Key Employees
AIIS performs annual reviews to verify that compensation arra	ngements and benefits
are reasonable, based on competent survey information, and the	e result of arm's
length bargaining.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Documents may be inspected at the office of the organization	upon request.

#### American Institute of Indian Studies 1130 East 59th Street, Chicago Illinois (773) 702-8638 aiis@uchicago.edu

#### **Executive Committee**

#### **Officers**

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Padma Kaimal

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