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Form 990  Department of the Treasury Internal Revenue Service	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 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009					
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES		D Employer identification number 25-0965219	
		Doing Business As		E Telephone number (202) 403-5000	
		Number and street (or P O box if mail is not delivered to street address) 1000 THOMAS JEFFERSON ST NW	Room/suite	G Gross receipts \$ 321,967,830	
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 200073835			
	F Name and address of principal officer SOL PELAVIN 1000 THOMAS JEFF ST NW WASH,DC 20007		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)			
J Website: WWW AIR ORG		H(c) Group exemption number			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation 1946		M State of legal domicile PA

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities SEE PART III, LINE 1 		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a) 3 <u>1</u>		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 <u></u>		
	5 Total number of employees (Part V, line 2a) 5 <u>1,12</u>		
	6 Total number of volunteers (estimate if necessary) 6 <u></u>		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a <u></u>		
	b Net unrelated business taxable income from Form 990-T, line 34 7b <u></u>		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	301,324,174	298,916,637
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	685,041	686,062
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,942,939	1,535,789
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-296,797	-649,507
		304,655,357	300,488,981
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	73,087	154,172
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	104,574,994	110,873,183
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	182,444,620	169,953,878
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	287,092,701	280,981,233
	19 Revenue less expenses Subtract line 18 from line 12	17,562,656	19,507,748
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	126,050,452	144,588,151
	21 Total liabilities (Part X, line 26)	49,529,549	48,052,208
	22 Net assets or fund balances Subtract line 21 from line 20	76,520,903	96,535,943

Part II		Signature Block			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
	***** Signature of officer		2010-11-12 Date		
	MARIO AHLGRIMM TREASURER, SR VP, AND CFO Type or print name and title				
Paid Preparer's Use Only	Preparer's signature  PATRICIA A O'MALLEY CPA		Date	Check if self-employed 	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 		RUBINO & MCGEEHIN CHARTERED 6903 ROCKLEDGE DRIVE SUITE 1200 BETHESDA, MD 20817		EIN 
					Phone no  (301) 564-3636

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission

AIR’S PURPOSE IS TO CONDUCT AND APPLY BEHAVIORAL AND SOCIAL SCIENCE RESEARCH TO IMPROVE PEOPLE’S LIVES AND WELL BEING, WITH A SPECIAL EMPHASIS ON THE DISADVANTAGED

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ 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 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 \$ 74,184,899 including grants of \$) (Revenue \$ 3,202)
	THE ASSESSMENT PROGRAM DEVELOPS COGNITIVE ASSESSMENTS AND QUESTIONNAIRES FOR EXAMINING THE INFLUENCES AND OTHER BACKGROUND VARIABLES, AND CONDUCTS STUDIES OF THE VALIDITY OF ASSESSMENTS FOR FEDERAL, STATE, AND LOCAL EDUCATION AGENCIES BY DRAWING ON THE RESOURCES OF AIR’S UNPARALLELED EDUCATIONAL RESEARCH EFFORTS, AIR DESIGNS AND BUILDS ASSESSMENT PROGRAMS THAT AID IN MEASURING COMPLIANCE WITH RIGOROUS REQUIREMENTS SET BY STATE AND FEDERALLY MANDATED PROGRAMS SUCH ASSESSMENTS ALSO SERVE AS A FOUNDATION FOR ADVANCING LEARNING ACHIEVEMENT














4b	(Code) (Expenses \$ 72,239,602 including grants of \$) (Revenue \$)
	AIR’S INTERNATIONAL DEVELOPMENT PROGRAM SEEKS TO ENHANCE THE CAPACITY OF DEVELOPING COUNTRIES TO IMPROVE THEIR QUALITY OF LIFE THROUGH EDUCATION AND SOCIAL DEVELOPMENT IN COLLABORATION WITH LOCAL PARTNERS AIR SEEKS TO - ENSURE CHILDREN’S EQUITABLE ACCESS TO ALL LEVELS OF EDUCATION, - IMPROVE THE QUALITY AND RELEVANCE OF EDUCATION, AND - EMPOWER INDIVIDUALS, COMMUNITIES, AND INSTITUTIONS AS AGENTS OF SOCIAL AND BEHAVIORAL CHANGE SEE SCHEDULE O FOR CONTINUATIONIN PURSUIT OF THESE OBJECTIVES, AIR HAS WORKED IN MORE THAN 80 COUNTRIES OVER THE PAST THREE DECADES, STRENGTHENING NATIONAL EDUCATION SYSTEMS, INCREASING THE INVOLVEMENT OF COMMUNITIES IN LOCAL SCHOOLS, IMPROVING THE QUALITY OF TEACHING AND LEARNING, DEVELOPING NEW TECHNIQUES FOR ASSESSING STUDENT PERFORMANCE, INCREASING ACCESS FOR BOTH GIRLS AND BOYS, ACCELERATING EDUCATIONAL REFORM, IMPROVING INFORMATION SYSTEMS, SLOWING THE SPREAD OF HIV/AIDS THROUGH BEHAVIOR CHANGE, AND REDUCING THE INCIDENCE OF CHILD LABOR

4c	(Code) (Expenses \$ 56,447,282 including grants of \$ 154,172) (Revenue \$ 69,910)
	AIR’S EDUCATION, HUMAN DEVELOPMENT & THE WORKFORCE PROGRAM SERVES GOVERNMENT AGENCIES AT THE NATIONAL, STATE, AND LOCAL LEVEL IN ALL AREAS OF EDUCATION INCLUDING ADULT EDUCATION AND LITERACY, CHILDREN’S MENTAL HEALTH, DISTRICT CONSULTING, EARLY CHILDHOOD, EDUCATION EVIDENCE & INDICATORS, EDUCATION FINANCE, EDUCATION TECHNOLOGY, HIGHER EDUCATION, SCHOOL REFORM, SPECIAL EDUCATION AND WORKFORCE RESEARCH & ANALYSIS

4d	Other program services (Describe in Schedule O) See also Additional Data for Description
	(Expenses \$ 42,835,629 including grants of \$) (Revenue \$ 612,950)
4e	Total program service expenses \$ 245,707,412

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
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	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
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	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 	14b	Yes
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 U S ? If "Yes," complete Schedule F, Part II 	15	No
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 U S ? If "Yes," complete Schedule F, Part III 	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	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		
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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a803		
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			1b0
c			1c	Yes
2a			2b	Yes
2a					1,128
b				
3a			3a	No
b			3b	
4a			4a	Yes
b				
5a			5a	No
b			5b	No
c			5c	
6a			6a	No
b			6b	
7			7a	No
a			7b	
b			7c	No
d			7d	
e			7e	
f			7f	
g			7g	
h			7h	
8			8	
9			9a	
b			9b	
10			10a	
a					10b
11			11a	
b			11b	
12a			12a	
b			12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
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?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	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?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line a or b, 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?		No
16b	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?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed CA , OH , MA , OR , NC , RI , MI , IL , FL , CT , AK , NJ , NM , CO , NY , WA , PA
18	Section 6104 requires an organization to make its Form 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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. MARIJO AHLGRIMM 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 200073835 (202) 403-5000

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

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

Form **990** (2009)

1b	Total	7,902,993	0	1,472,533
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **230**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PEARSON EDUC MEASUREMENTNCS PEARSON I 13036 COLLECTION CTR DR CHICAGO, IL 60693	PRINT, SCORE, AND DIST OF TEST REPORTS	25,476,565
DATA RECOGNITION CORP M177 PO BOX 1150 MINNEAPOLIS, MN 554801150	PRINT, SCORE, AND DIST OF TEST REPORTS	14,536,850
LE FONDS PARRAINAGE 9 RUE 4 PACOT, PORT-AU-PRINCE HA	SEE SCHEDULE O	3,232,536
AGHA KHAN FOUNDATION 1825 K STREET NW SUITE 901 WASHINGTON, DC 20006	SEE SCHEDULE O	2,737,474
THE CORKERY GROUP 260 FIFTH AVENUE NEW YORK, NY 10001	SEE SCHEDULE O	2,510,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **82**

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	272,418,459					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	26,498,178					
	g	Noncash contributions included in lines 1a-1f \$ _____							
	h	Total. Add lines 1a-1f		298,916,637					
Program Service Revenue			Business Code						
	2a	PROVISION OF VAR SERV	900,099	592,191	592,191				
	b	SPEAKING FEES	900,099	93,828	93,828				
	c	MISC PROGRAM FEES	900,099	43	43				
	d								
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f		686,062					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,129,538			1,129,538		
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties		26,626			26,626		
	6a	Gross Rents	(i) Real	(ii) Personal					
			1,825,536	19,404					
			2,501,669	19,404					
			-676,133	0					
	d	Net rental income or (loss)		-676,133			-676,133		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
			19,364,027						
			18,956,645	1,131					
			407,382	-1,131					
	d	Net gain or (loss)		406,251			406,251		
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a						
			b	Less direct expenses	b				
			c	Net income or (loss) from fundraising events . . .					
	9a	Gross income from gaming activities See Part IV, line 19	a						
			b	Less direct expenses	b				
			c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances	a						
b			Less cost of goods sold	b					
c			Net income or (loss) from sales of inventory . . .						
Miscellaneous Revenue		Business Code							
11a									
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d								
12	Total revenue. See Instructions		300,488,981	686,062	0	886,282			

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	154,172	154,172		
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	7,153,961	2,556,973	4,596,988	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	156,601	129,868	26,733	
7	Other salaries and wages	83,503,555	71,997,649	11,505,906	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,264,342	5,046,721	1,217,621	
9	Other employee benefits	8,372,093	6,130,798	2,241,295	
10	Payroll taxes	5,422,631	4,485,615	937,016	
11	Fees for services (non-employees)				
a	Management				
b	Legal	845,324		845,324	
c	Accounting	320,371		320,371	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	15,478		15,478	
g	Other	102,411,609	100,033,083	2,378,526	
12	Advertising and promotion	206,895	167,863	39,032	
13	Office expenses	17,364,661	15,982,653	1,382,008	
14	Information technology	1,578,544	1,381,435	197,109	
15	Royalties				
16	Occupancy	15,205,578	12,596,610	2,608,968	
17	Travel	12,284,188	11,638,772	645,416	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,788,935	2,606,438	182,497	
20	Interest	19		19	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,533,203	1,956,440	576,763	
23	Insurance	432,703	175,117	257,586	
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)				
a	TRAINING	6,060,702	6,016,800	43,902	
b	MISCELLANEOUS	2,825,133	3,002	2,822,131	
c	PRINTING - PRG MATERIAL	2,647,403	2,647,403		
d	BAD DEBT EXPENSES	2,433,132		2,433,132	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	280,981,233	245,707,412	35,273,821	0
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			11,282,917	1	13,977,449
	2	Savings and temporary cash investments			25,002,183	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			63,754,084	4	51,489,119
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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	
	7	Notes and loans receivable, net			24,195	7	10,000
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,535,525	9	2,884,053
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	25,758,016	11,109,166	10c	10,426,730
	b	Less accumulated depreciation	10b	15,331,286			
	11	Investments—publicly traded securities			3,274,192	11	55,648,618
	12	Investments—other securities. See Part IV, line 11			889,245	12	1,301,120
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			9,178,945	15	8,851,062
	16	Total assets. Add lines 1 through 15 (must equal line 34)			126,050,452	16	144,588,151
Liabilities	17	Accounts payable and accrued expenses			30,968,205	17	34,518,899
	18	Grants payable				18	
	19	Deferred revenue			12,876,301	19	6,791,715
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			5,685,043	25	6,741,594
	26	Total liabilities. Add lines 17 through 25			49,529,549	26	48,052,208
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			76,520,903	27	96,535,943
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			76,520,903	33	96,535,943
	34	Total liabilities and net assets/fund balances			126,050,452	34	144,588,151

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . .		No
b Were the organization's financial statements audited by an independent accountant? 	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
AMERICAN INSTITUTES FOR RESEARCH IN THE
BEHAVIORAL SCIENCES

Employer identification number
25-0965219

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete 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

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	187,044,283	220,035,387	240,380,082	301,324,174	298,916,726	1,247,700,652
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	32,982,065	30,822,269	28,896,769	644,304	685,968	94,031,375
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5	220,026,348	250,857,656	269,276,851	301,968,478	299,602,694	1,341,732,027
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						0
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	9,082,679	1,287,389	279,043			10,649,111
cAdd lines 7a and 7b	9,082,679	1,287,389	279,043			10,649,111
8Public Support (Subtract line 7c from line 6)						1,331,082,916

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6	220,026,348	250,857,656	269,276,851	301,968,478	299,602,694	1,341,732,027
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	874,476	831,157	1,249,000	1,820,770	3,001,104	7,776,507
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	5,973	1,904	2,092	10,345		20,314
cAdd lines 10a and 10b	880,449	833,061	1,251,092	1,831,115	3,001,104	7,796,821
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,332	25,960				34,292
13Total support (Add lines 9, 10c, 11 and 12)	220,915,129	251,716,677	270,527,943	303,799,593	302,603,798	1,349,563,140
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	98 630 %
16Public support percentage from 2008 Schedule A, Part III, line 15	16	98 490 %

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	0 580 %
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	0 450 %
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 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	<input type="checkbox"/>	
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 25-0965219
Name: AMERICAN INSTITUTES FOR RESEARCH IN THE
BEHAVIORAL SCIENCES

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services					
(Code	) (Expenses \$	24,426,553	including grants of \$	) (Revenue \$	15,814)
THE AIR HEALTH PROGRAM USES RESEARCH AS A CATALYST FOR CHANGE THAT LEADS TO SAFER COMMUNITIES, IMPROVED HEALTHCARE, HEALTHIER ENVIRONMENTS, AND IMPROVED QUALITY OF LIFE AIR HAS A GROWING HEALTH POLICY RESEARCH, COMMUNICATIONS, AND INFORMATION SCIENCES GROUP OUR CLIENTS AND AUDIENCES INCLUDE FEDERAL, STATE, AND LOCAL GOVERNMENTS, FOUNDATIONS, PRIVATE HEALTHCARE PROVIDERS, UNIVERSITIES, AND THE GENERAL PUBLIC OUR HEALTH SERVICES AND POLICY RESEARCH GROUP DRAWS ON A NUMBER OF DISCIPLINES TO DESIGN, IMPLEMENT AND EVALUATE POLICIES THROUGH BOTH TRADITIONAL RESEARCH METHODS AND TECHNICAL ASSISTANCE ACTIVITIES OUR AWARD-WINNING TEAM OF HEALTH COMMUNICATORS HAS DEVELOPED MANY SUCCESSFUL PUBLIC HEALTH CAMPAIGNS TO INCREASE AWARENESS AND PROMOTE HEALTHY BEHAVIORS AMONG DIVERSE POPULATIONS					
(Code	) (Expenses \$	18,409,076	including grants of \$	) (Revenue \$	597,136)
AIR'S FEDERAL STATISTICS PROGRAM WORKS WITH THE NATIONAL CENTER FOR EDUCATION STATISTICS (NCES), WHICH IS THE FEDERAL GOVERNMENT'S PRIMARY SOURCE FOR COLLECTING AND ANALYZING STATISTICAL DATA ABOUT PUBLIC EDUCATION IN THE UNITED STATES AND AROUND THE WORLD THE INFORMATION PROVIDED BY OUR EXPERTS CONTRIBUTES TO THE DEVELOPMENT OF HIGH-QUALITY STATISTICS ABOUT EDUCATION THAT INFORM DISCUSSION AND DEBATE AT THE DECISION-MAKING LEVELS OF NATIONAL, STATE, AND LOCAL GOVERNMENTS					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SOL H PELAVIN PRESIDENT, BOARD MEMBER	40 00	X		X				1,340,006	0	332,722
LAWRENCE BOBO VICE CH, BD MEM, CMTE CH	5 00	X		X				48,750	0	0
ROBERT F BORUCH BOARD MEMBER	2 00	X						30,472	0	0
DELANO LEWIS BOARD MEMBER	2 00	X						25,000	0	0
PATRICIA GURIN BOARD CHAIR, BD MEMBER	6 00	X		X				22,500	0	0
SARA B KIESLER BD MEMBER, CMTE CHAIR	5 00	X						45,000	0	0
GREG BARONI BD MEMBER, CMTE CHAIR	5 00	X						41,250	0	0
RICHARD A SMITH BOARD MEMBER	2 00	X						25,000	0	0
ALAN KRUEGER BOARD MEMBER	2 00	X						10,000	0	0
NANCY CANTOR BRECHIN BOARD MEMBER	2 00	X						25,000	0	0
KATHY MCKINLESS BOARD MEMBER, CMTE CHAIR	5 00	X						48,750	0	0
MARIJO AHLGRIMM TREASURER, SR VP, CFO	40 00			X				56,273	0	363
DONA KILPATRICK SECRETARY	40 00			X				187,840	0	29,951
CHRISTIAN B HAMILTON TREASURER, SR VP, CFO	40 00			X				530,414	0	35,361
DIANE PELAVIN EXECUTIVE VP	40 00				X			731,355	0	177,634
MICHAEL KANE EXECUTIVE VP	40 00				X			436,060	0	149,937
DAVID MYERS SR VP	40 00				X			401,745	0	44,235
JON COHEN VICE PRESIDENT	40 00				X			464,484	0	76,927
JANET ROBB SR VP	40 00				X			393,994	0	31,520
MARK FANNING SR VP	40 00				X			323,290	0	45,987
MARK KUTNER VICE PRESIDENT	40 00				X			348,192	0	77,449
THOMAS JESULAITIS CHIEF CONT /GRANTS OFF	40 00				X			178,120	0	58,962
MARILYN MOON VICE PRESIDENT	40 00				X			332,191	0	47,228
STEPHEN KROMER DIR ASSESSMENT OPERATION	40 00					X		421,638	0	70,566
GARY PHILLIPS VICE PRESIDENT	40 00					X		368,864	0	40,503

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAURA SALGANIK VICE PRESIDENT	40 00					X		309,800	0	70,664
DWAYNE NORRIS VICE PRESIDENT	40 00					X		297,455	0	49,789
DAVID OSHER VICE PRESIDENT	40 00					X		242,071	0	72,382
GEORGE W BOHRNSTEDT SR VP, FMR KEY EMPLOYEE	24 00						X	217,479	0	60,353

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES

Employer identification number
25-0965219

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 6.

	(a) Donor advised funds	(b) Funds 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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		14,951,914	8,285,006	6,666,908
d Equipment		10,806,102	7,046,280	3,759,822
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				10,426,730

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
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, line 12)	5	

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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	4a	
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, line 18)	5	

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. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

[illegible]**Schedule F (Form 990) 2009**

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.

[illegible]

Complete this part to provide the information required in Part I, line 2, and any additional information.

[illegible]

Name of the organization
AMERICAN INSTITUTES FOR RESEARCH IN THE
BEHAVIORAL SCIENCES

Employer identification number
25-0965219

Part I General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
AMERICAN EDUCATIONAL RESEARCH ASSOCIATION (AERA)1430 K STREET NW STE 1200 WASHINGTON,DC 20005	237003537	501(C)(3)	7,500				CNTRB TO AERA'S FRIEND OF THE BROWN LECTURE IN EDUCATION RESEARCH HELD IN OCT 2009
AMERICAN EDUCATION FINANCE ASSOCIATION 258 NORMAN HALL BOX 117049 GAINESVILLE,FL 326117049	581350874	501(C)(3)	20,000				SUPPORT FOR EDUCATION FINANCE & POLICY JOURNAL
COLLEGE BOUND INC128 M STREET NW STE 220 WASHINGTON,DC 20001	521761312	501(C)(3)	10,450				DONATION FOR SCHOLARSHIP PROGRAM
DC VOICE1436 U STREET NW SUITE 401 WASHINGTON,DC 20009	300180184	501(C)(3)	10,000				SUPPORT FOR COMMUNITY-BASED ACTION RESEARCH RELATED TO DC PUBLIC SCHOOL
PORTLAND SCHOOLS FOUNDATION905 NW 12TH AVENUE PORTLAND,OR 97209	931149789	501(C)(3)	40,000				TITLE SPONSOR FOR '09/'10 CELEBRATING STUDENT SUCCESS BANQUET & AWARDS
PUBLIC PRIVATE ACTION 1330 CONNECTICUT AVE NW 3RD FL STE B WASHINGTON,DC 20036	270536491		30,000				SPONSORSHIP IN SUPPORT OF PPA'S EDUCATION EMAIL NEWSLETTER
SOCIETY FOR RESEARCH ON EDUCATION EFFECTIVENESS2040 SHERIDAN ROAD EVANSTON,IL 60208	264739791	501(C)(3)	20,000				SUPPORT FOR SREE ANNUAL CONFERENCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES

Employer identification number

25-0965219

Part I

Questions Regarding Compensation

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

[illegible]

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	Part I, Line 1a	OFFICER AND KEY EMPLOYEE TRAVEL IS PURCHASED USING COMPANY-BILLED CREDIT CARDS. UPON COMPLETION OF TRAVEL, CREDIT CARD CHARGES ARE RECONCILED AND REVIEWED FOR COMPLETENESS OF SUBSTANTIATION IN ACCORDANCE WITH AN ACCOUNTABLE PLAN. SINCE THE TRAVEL IS ACCOUNTED FOR UNDER A ACCOUNTABLE PLAN IT IS NOT CLASSIFIED AS TAXABLE INCOME. ANY TRAVEL FOR COMPANIONS IS APPROVED ON AN EXCEPTION BASIS AND IS GENERALLY DE MINIMIS AND ALSO REPORTED AS TAXABLE INCOME TO THE INDIVIDUAL.
	Part I, Line 4a	Part I, Line 4a CHRISTIAN HAMILTON SEVERANCE PAYMENT \$236,400
	Part I, Line 7	SENIOR OFFICERS PARTICIPATE IN AN EXECUTIVE INCENTIVE PLAN, WHICH PROVIDES FOR INCENTIVE PAYMENTS BASED ON INDIVIDUAL AND ORGANIZATION PERFORMANCE. DIRECTORS OF THE BOARD DO NOT PARTICIPATE IN BONUS OR INCENTIVE PLANS, WITH THE EXCEPTION OF S. PELAVIN WHO IN HIS PRESIDENT AND CEO CAPACITY PARTICIPATES IN THE EXECUTIVE INCENTIVE PLAN. NON-SENIOR OFFICERS, NON-OFFICER HIGHLY COMPENSATED AND KEY EMPLOYEES MAY RECEIVE BONUSES UNDER AIR'S PERFORMANCE BONUS PROGRAM, WHICH IS A DISCRETIONARY BONUS PROGRAM DESIGNED TO RECOGNIZE EXCEPTIONAL PERFORMANCE.
Supplemental Information	Part III	PART I, LINE 4B: GEORGE BOHRNSTEDT DEFERRED COMPENSATION AWARD \$49,664. THE PLAN WAS FIRST ESTABLISHED ON 1/1/1996 TO ALLOW DISCRETIONARY CONTRIBUTIONS TO BE MADE TO THE PLAN BY AIR ON BEHALF OF A SELECT GROUP OF MANAGEMENT OR HIGHLY-COMPENSATED EMPLOYEES. THE ELIGIBLE EMPLOYEES ARE EMPLOYEES DESIGNATED FROM TIME TO TIME BY THE PRESIDENT, WITH THE APPROVAL OF THE COMPENSATION COMMITTEE OF THE AIR BOARD OF DIRECTORS, WHO ARE IN "A SELECT GROUP OF MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES" OF AIR. PART II, COLUMN B (III): THE AMOUNTS REPORTED IN COLUMN B (III) FOR MR. SOL PELAVIN AND MRS. DIANE PELAVIN INCLUDE PAYMENTS OF \$242,750 AND \$114,480, RESPECTIVELY, MADE PURSUANT TO A NON-QUALIFIED COMPENSATION PLAN PROVIDING CERTAIN KEY EXECUTIVE WITH THE ANNUAL EQUIVALENT OF THE RETIREMENT CONTRIBUTION THEY WOULD HAVE RECEIVED HAD THEY BEEN ELIGIBLE TO FULLY PARTICIPATE IN THE COMPANY'S DEFINED CONTRIBUTION PENSION PLAN. THE AMOUNT REPORTED IN COLUMN B (III) FOR MR. CHRISTIAN HAMILTON INCLUDES A SEVERANCE PAYMENT OF \$236,400. PART II, COLUMN C: AMOUNTS REPORTED IN COLUMN C REPRESENT AIR'S PAYMENTS TO THE DEFINED CONTRIBUTION PENSION PLAN AS WELL AS THE ANNUAL ACCRUAL OF CURRENT AND PRIOR YEAR CONTRIBUTIONS TO A NON-QUALIFIED DEFERRED COMPENSATION PLAN TO COVER CERTAIN KEY EXECUTIVES OTHERWISE INELIGIBLE TO FULLY PARTICIPATE IN THE COMPANY'S DEFINED CONTRIBUTION PLAN. CONTRIBUTIONS TO THE PLAN PROVIDE THE EXECUTIVES WITH THE ANNUAL EQUIVALENT OF THE RETIREMENT CONTRIBUTION THEY WOULD HAVE RECEIVED HAD THEY BEEN ELIGIBLE TO FULLY PARTICIPATE IN THE DEFINED CONTRIBUTION PENSION PLAN. PURSUANT TO PLAN TERMS, AMOUNTS REMAIN IN THE DEFERRED PLAN UNTIL THEY BECOME FULLY VESTED. PART II, COLUMN D: NONTAXABLE BENEFITS REPRESENTS AIR'S PREMIUM PAYMENTS FOR CERTAIN FRINGE BENEFIT OFFERINGS GENERALLY AVAILABLE TO ALL OF ITS EMPLOYEES, INCLUDING HEALTH INSURANCE, LONG-TERM DISABILITY, DENTAL INSURANCE, VISION INSURANCE, AND LONG-TERM CARE INSURANCE.

Software ID:
Software Version:
EIN: 25-0965219
Name: AMERICAN INSTITUTES FOR RESEARCH IN THE
BEHAVIORAL SCIENCES

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
SOL H PELAVIN	(i) 688,875 (ii) 0	400,000 0	251,131 0	316,882 0	15,840 0	1,672,728 0	0 0
DONA KILPATRICK	(i) 184,835 (ii) 0	0 0	3,005 0	13,264 0	16,687 0	217,791 0	0 0
CHRISTIAN B HAMILTON	(i) 232,406 (ii) 0	50,000 0	248,008 0	18,289 0	17,072 0	565,775 0	0 0
DIANE PELAVIN	(i) 442,355 (ii) 0	165,000 0	124,000 0	163,974 0	13,660 0	908,989 0	0 0
MICHAEL KANE	(i) 363,834 (ii) 0	60,000 0	12,226 0	124,905 0	25,032 0	585,997 0	0 0
DAVID MYERS	(i) 358,907 (ii) 0	40,000 0	2,838 0	22,050 0	22,185 0	445,980 0	0 0
JON COHEN	(i) 286,494 (ii) 0	177,000 0	990 0	49,000 0	27,927 0	541,411 0	0 0
JANET ROBB	(i) 328,332 (ii) 0	57,500 0	8,162 0	19,502 0	12,018 0	425,514 0	0 0
MARK FANNING	(i) 264,178 (ii) 0	52,500 0	6,612 0	19,502 0	26,485 0	369,277 0	0 0
MARK KUTNER	(i) 281,989 (ii) 0	35,000 0	31,203 0	49,000 0	28,449 0	425,641 0	0 0
THOMAS JESULAITIS	(i) 173,983 (ii) 0	0 0	4,137 0	45,063 0	13,899 0	237,082 0	0 0
MARILYN MOON	(i) 207,223 (ii) 0	120,000 0	4,968 0	42,705 0	4,523 0	379,419 0	0 0
STEPHEN KROMER	(i) 335,600 (ii) 0	83,200 0	2,838 0	45,995 0	24,571 0	492,204 0	0 0
GARY PHILLIPS	(i) 239,808 (ii) 0	124,700 0	4,356 0	24,698 0	15,805 0	409,367 0	0 0
LAURA SALGANIK	(i) 219,544 (ii) 0	85,900 0	4,356 0	49,000 0	21,664 0	380,464 0	0 0
DWAYNE NORRIS	(i) 171,858 (ii) 0	125,000 0	597 0	22,661 0	27,128 0	347,244 0	0 0
DAVID OSHER	(i) 233,689 (ii) 0	0 0	8,382 0	49,000 0	23,382 0	314,453 0	0 0
GEORGE W BOHRNSTEDT	(i) 123,291 (ii) 0	35,650 0	58,538 0	34,500 0	25,853 0	277,832 0	0 0

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES	Employer identification number 25-0965219
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		SOL PELAVIN, PRESIDENT & CEO, AND DIANE PELAVIN, EXECUTIVE VICE PRESIDENT, ARE SPOUSES
Form 990, Part VI, Section B, line 11		1 THE FORM 990 AND RELATED SCHEDULES ARE PREPARED UNDER THE GUIDANCE OF THE CEO/PRESIDENT AND CFO/TREASURER 2 THE FORM 990 IS REVIEWED INTERNALLY BY THE CEO/PRESIDENT, CFO/TREASURER, LEGAL COUNSEL, AND THE SENIOR VP OF HUMAN RESOURCES PRIOR TO BEING PROVIDED TO ANY MEMBERS OF THE BOARD 3 THE FORM 990 IS PROVIDED TO THE AUDIT AND COMPENSATION COMMITTEES OF THE BOARD FOR REVIEW AT LEAST 30 DAYS PRIOR TO THE DUE DATE (INCLUDING ANY EXTENSIONS), AND THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD PRIOR TO FILING
Form 990, Part VI, Section B, line 12c		ON AN ANNUAL BASIS, AIR REQUIRES ITS OFFICERS TO COMPLETE A SENIOR MANAGEMENT DISCLOSURE FORM, WHICH IS REVIEWED BY THE LEGAL COUNSEL, ETHICS OFFICER, AND CHIEF FINANCIAL OFFICER OFFICERS ARE REQUIRED TO DISCLOSE ANY RELATIONSHIP OR TRANSACTION WHICH MAY POSE A CONFLICT AND MUST UPDATE THE FORM WHEN THERE HAS BEEN A CHANGE IN CIRCUMSTANCE IN ADDITION, AIR OFFICERS AND EMPLOYEES ARE REQUIRED TO COMPLY WITH AIR'S CODE OF CONDUCT, WHICH PROVIDES GUIDANCE ON CONFLICTS OF INTEREST AIR'S BOARD OF DIRECTORS COMPLETES AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE AND FOLLOWS A BOARD CONFLICT OF INTEREST POLICY IN ADDITION TO AIR'S CODE OF CONDUCT THE CONFLICT OF INTEREST QUESTIONNAIRES ARE SUBMITTED TO AND REVIEWED BY THE LEGAL COUNSEL AND SECRETARY OF THE ORGANIZATION
Form 990, Part VI, Section B, line 15		COMPENSATION IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS (100% COMPOSED OF INDEPENDENT DIRECTORS) EACH YEAR THE COMMITTEE HIRES AN OUTSIDE INDEPENDENT CONSULTANT TO PERFORM A COMPARABILITY REVIEW OF COMPENSATION, WHICH IS COMPLETED USING EXTERNAL PUBLISHED DATA THIS INFORMATION IS INCORPORATED INTO THE FINAL REVIEW AND DECISION PROCESS FOR THOSE INDIVIDUALS REVIEWED BY THE COMMITTEE WRITTEN MINUTES OF THESE MEETINGS ARE KEPT CONTEMPORANEOUSLY AND MADE AVAILABLE AS REQUESTED FOR THE OTHER KEY EMPLOYEES, MOST FOLLOW THE EXACT SAME PROCESS AS THE CEO ANY OF THE KEY EMPLOYEES WHOSE COMPENSATION IS NOT SET BY THE COMPENSATION COMMITTEE (DUE TO NOT BEING AN OFFICER OR A PROGRAM DIRECTOR) ARE REVIEWED INTERNALLY USING THE SAME TYPE OF DATA BY THE RESPECTIVE PROGRAM DIRECTOR AND/OR THE CEO, WITH APPROVAL BY THE CEO
Form 990, Part VI, Section C, line 19		AIR HAS MADE A PUBLIC FILING OF ITS GOVERNING DOCUMENTS WITH THE COMMONWEALTH OF PENNSYLVANIA A CONDENSED VERSION OF AIR'S FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE AIR WILL MAKE ITS COMPLETE SET OF FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST
FORM 990, PART IV, LINE 12 AND PART XI, LINE 2B		AIR PREPARES THE CONSOLIDATED FINANCIAL STATEMENTS WHICH INCLUDE THE ORGANIZATION AND ITS AFFILIATES, THE STATEMENTS ARE AUDITED BY INDEPENDENT AUDITORS ON AN ANNUAL BASIS
FORM 990 PART XI, LINE 2C		AIR HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR
FORM 990, PART VI, LINE 1A		THE EXECUTIVE COMMITTEE IS COMPRISED OF THE BOARD CHAIR AND CHAIRS OF THE AUDIT, FINANCE, GOVERNANCE, HUMAN RESOURCES AND COMPENSATION COMMITTEES AND THE CHIEF EXECUTIVE OFFICER FOR THE PURPOSE OF EXERCISING ALL OF THE POWERS AND AUTHORITY OF THE FULL BOARD WHEN THE BOARD IS NOT IN SESSION AND WHEN IT IS NOT PRACTICAL OR POSSIBLE FOR THE FULL BOARD TO CONVENE A MEETING A QUORUM IS DEFINED AS FOUR (4) MEMBERS OF THE EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
FORM 990, PART VII, SECTION B, LINE 1, COLUMN B		COLUMN B DESCRIPTION FOR LE FONDS PARRAINAGE SCHOLARSHIP FOR 2008/2009 SCHOOL YEAR TO 20,000 CHILDREN ATTENDING PUBLIC/PRIVATE SCHOOL COLUMN B DESCRIPTION FOR AGHA KHAN FOUNDATION DELIVERY OF TRAINING & ASSESSMENT ACTIVITIES COLUMN B DESCRIPTION FOR THE CORKERY GROUP MEDIA STRATEGY SUPPORT TO CDC'S HIV, STD, AND TB PREVENTION PROGRAM

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships	OMB No 1545-0047
		2009
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	
Name of the organization AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES	Employer identification number 25-0965219

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
AIR ASSESSMENT LLC 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 26-2123597	RESEARCH	DE	0	960,000	N/A

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
NEW AMERICAN SCHOOLS 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 52-1730425 AMERICAN INSTITUTES FOR RESEARCH UK LIMITED	TO INCREASE STUDENT ACHIEVEMENT THROUGH EDUCATION	VA	501(C)(3)	11A, TYPE I	N/A
21 HOLBORN VIADUCT LONDON, LONDON EC1A 2DY UK	BEHAVIORAL AND SOCIAL SCIENCES RESEARCH AND APPLICATIONS	UK			N/A

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
PROSPECT ASSOCIATES LTD 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC20007 52-1213051	RESEARCH & SERVICES	MD	AIR HOLDING COMPANY	C	747,193	8,076,882	100 000 %
AIR HOLDING COMPANY 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC20007 52-2205344	EDUCATIONAL SERVICES	DE	N/A	C		9,186,023	100 000 %
THE MCKENZIE GROUP INC 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC20007 52-1811969	EDUCATIONAL SERVICES	DE	AIR HOLDING COMPANY	C	153,833	205,233	100 000 %
SUTTON GROUP 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC20007 52-2135746	EDUCATIONAL SERVICES	DC	AIR HOLDING COMPANY	C			100 000 %

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Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	AIR UK LTD	R	131,752
(2)	AIR HOLDING COMPANY	P	314,000
(3)	PROSPECT ASSOCIATES LIMITED	P	73,000
(4)	THE MCKENZIE GROUP INC	P	56,906
(5)			
(6)			

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Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]