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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)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE AMERICAN INDIAN COLLEGE FUND	D Employer identification number 52-1573446
		Doing Business As	E Telephone number (303) 426-8900
		Number and street (or P O box if mail is not delivered to street address) Room/suite 8333 GREENWOOD BLVD	G Gross receipts \$ 17,781,211
		City or town, state or country, and ZIP + 4 DENVER, CO 80221	
F Name and address of principal officer RICHARD WILLIAMS 8333 GREENWOOD BLVD DENVER, CO 80221		H(a) Is this a group return for affiliates? ☐ Yes ☒ No	
		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
		H(c) Group exemption number ▶	
I Tax-exempt status ☒ 501(c) (3) ◀(Insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ COLLEGEFUND.ORG			

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1989	M State of legal domicile CO
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Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities The American Indian College Fund provides scholarships to thousands of American Indian students annually. In addition, the Fund provides operational, capital, and program support to our Nation's accredited tribal colleges.		
	2	Check this box ☒ 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	20
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5	Total number of employees (Part V, line 2a)	5	45
Revenue	6	Total number of volunteers (estimate if necessary)	6	6
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	-157,204
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-157,204
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	16,677,051	13,230,694
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,047,752	4,414,617
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	519,467	-51,011
Expenses	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,244,270	17,594,300
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	9,273,296	9,080,896
	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)	1,915,184	2,144,544
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,223,293		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,001,873	4,350,534
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	13,190,353	15,575,974
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	6,053,917	2,018,326
			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	56,511,080	58,232,043
	21	Total liabilities (Part X, line 26)	768,304	690,779
	22	Net assets or fund balances. Subtract line 21 from line 20	55,742,776	57,541,264

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		2010-11-01 Date	
	RICHARD WILLIAMS, PRESIDENT & CEO Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶ Timothy J McCutcheon	Date	Check if self-employed ☐	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ ANTON COLLINS MITCHELL LLP 303 EAST 17TH AVENUE SUITE 600 DENVER, CO 80203			EIN ▶
				Phone no ▶ (303) 830-1120

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

The American Indian College Fund transforms Indian higher education by funding and creating awareness of the unique, community-based accredited Tribal Colleges and Universities, offering students access to knowledge, skills, and cultural values which enhance their communities and the country as a whole

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 \$ 9,761,364 including grants of \$ 9,080,896) (Revenue \$ 0)
SCHOLARSHIPS AND GRANTS - DISTRIBUTED SCHOLARSHIPS AND GRANT FUNDS TO TRIBAL COLLEGES AND UNIVERSITIES, STUDENTS OF THE THE YEAR AWARDS TO STUDENTS AT TRIBAL COLLEGES AND UNIVERSITIES, AND SCHOLARSHIPS TO NATIVE AMERICAN STUDENTS AT TRIBAL COLLEGES, MAINSTREAM COLLEGES, AND UNIVERSITIES

4b

(Code) (Expenses \$ 2,590,681 including grants of \$ 0) (Revenue \$ 0)
PUBLIC EDUCATION - USED TO INFORM THE PUBLIC ABOUT THE TRIBAL COLLEGES AND HOW THEY ARE SUCCESSFULLY CHANGING THE LIVES OF AMERICAN INDIANS

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 12,352,045

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	Yes	
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	Yes	
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		No
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		No
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		No
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	Yes	
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	Yes	
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		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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	Yes	
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		No
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		No
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		No
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	1a36		
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a45	2b	Yes
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Yes
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	No
b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
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	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

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 . . .	1a	20	
b	Enter the number of voting members that are independent . . .	1b	20	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		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?	10a		No
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	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	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	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?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK , AL , AR , AZ , CA , CO , CT , FL , GA , IL , IN , KS , KY , MA , MD , ME , MI , MN , MT , ND , NH , NJ , NM , NY , OH , OK , OR , RI , SC , TN , UT , VA , WA , WI , WV
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. ☒ Own website ☐ Another's website ☒ 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.	TAMELA MILLER-CARLSON 8333 GREENWOOD BLVD DENVER, CO 80221 (303) 426-8900

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

• 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

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

Form 990 (2009)

1b	Total	314,025	0	63,174
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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 **2**

		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>		No
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>	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>		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

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 **0**

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	288,350			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	12,942,344			
	g	Noncash contributions included in lines 1a-1f \$ 1,945,090					
	h	Total. Add lines 1a-1f		13,230,694			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,482,700		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross Rents	(i) Real	(ii) Personal			
b		Less rental expenses	48,573				
c		Rental income or (loss)	45,438				
d		Net rental income or (loss)	3,135		3,135		3,135
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less cost or other basis and sales expenses	2,931,917				
c		Gain or (loss)					
d		Net gain or (loss)	2,931,917		2,931,917		2,931,917
8a		Gross income from fundraising events (not including \$ 288,350 of contributions reported on line 1c) See Part IV, line 18					
b		Less direct expenses	a	180,098			
c		Net income or (loss) from fundraising events . .	b	122,404	57,694		57,694
9a		Gross income from gaming activities See Part IV, line 19					
b		Less direct expenses					
c		Net income or (loss) from gaming activities . .					
10a		Gross sales of inventory, less returns and allowances					
b	Less cost of goods sold	a	54,465				
c	Net income or (loss) from sales of inventory . .	b	19,069	35,396	35,396		
Miscellaneous Revenue		Business Code					
11a	OTHER INCOME		900,099	9,968			9,968
b	UBTI FROM PARTNERSHIPS		900,099	-157,204		-157,204	
c							
d	All other revenue						
e	Total. Add lines 11a-11d			-147,236			
12	Total revenue. See Instructions			17,594,300	35,396	-157,204	4,485,414

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	9,080,896	9,080,896		
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	432,744	210,132	57,867	164,745
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,348,571	546,284	316,901	485,386
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	257,935	102,255	64,786	90,894
10	Payroll taxes	105,294	42,448	25,066	37,780
11	Fees for services (non-employees)				
a	Management				
b	Legal	16,499		16,499	
c	Accounting	29,179		29,179	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	105,218		105,218	
g	Other	178,120	56,380	82,707	39,033
12	Advertising and promotion	2,997,287	2,007,132		990,155
13	Office expenses	152,874	50,791	60,585	41,498
14	Information technology	96,513	41,915	19,345	35,253
15	Royalties				
16	Occupancy	40,575	14,195	14,720	11,660
17	Travel	201,603	92,378	20,390	88,835
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	73,795		73,795	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	55,522	23,354	12,215	19,953
23	Insurance	33,952	34	33,884	34
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	DONOR EXPENSES	122,404			122,404
b	PUBLICATIONS/DUES	72,280	45,411	12,167	14,702
c	BANK CHARGES	46,441	9,124	26,509	10,808
d	STAFF DEVELOPMENT	30,233	7,964	11,932	10,337
e					
f	All other expenses	98,039	21,352	16,871	59,816
25	Total functional expenses. Add lines 1 through 24f	15,575,974	12,352,045	1,000,636	2,223,293
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 campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1,726,600	1	2,655,210
	2	Savings and temporary cash investments			15,146,463	2	5,981,862
	3	Pledges and grants receivable, net			940,442	3	1,403,119
	4	Accounts receivable, net				4	
	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				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			71,471	9	90,438
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,222,601	726,489	10c	728,975
	b	Less accumulated depreciation	10b	493,626			
	11	Investments—publicly traded securities			35,086,011	11	43,843,613
	12	Investments—other securities See Part IV, line 11			2,759,049	12	2,814,525
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			54,555	15	714,301
	16	Total assets. Add lines 1 through 15 (must equal line 34)			56,511,080	16	58,232,043
Liabilities	17	Accounts payable and accrued expenses			279,232	17	143,888
	18	Grants payable				18	
	19	Deferred revenue				19	
	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			489,072	25	546,891
	26	Total liabilities. Add lines 17 through 25			768,304	26	690,779
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			16,360,455	27	20,523,879
	28	Temporarily restricted net assets			19,869,660	28	16,944,404
	29	Permanently restricted net assets			19,512,661	29	20,072,981
	Organizations that do not follow SFAS 117, check here ☐ 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			55,742,776	33	57,541,264
	34	Total liabilities and net assets/fund balances			56,511,080	34	58,232,043

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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 ☒ Separate basis ☐ Consolidated basis ☐ 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?		No
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 . . .		

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
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

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.")	8,679,437	27,390,565	11,117,388	16,677,051	13,230,694	77,095,135
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	8,679,437	27,390,565	11,117,388	16,677,051	13,230,694	77,095,135
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						77,095,135

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	8,679,437	1,843,013	11,117,388	16,677,051	13,230,694	77,095,135
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	968,528	1,843,013	2,574,957	2,011,786	1,485,835	8,884,119
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	3,196	16,685	175,809	250,904	9,968	456,562
11 Total support (Add lines 7 through 10)						86,435,816

12 Gross receipts from related activities, etc (See instructions)

1254,465

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	89 190 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	71 030 %
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
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for 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

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

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a 33 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		
b 33 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		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

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: 52-1573446

Name: THE AMERICAN INDIAN COLLEGE FUND

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			
DR RICHARD LITTLEBEAR CHAIR	1 00	X		X				0	0	0
DR JAMES SHANLEY VICE CHAIR	1 00	X		X				0	0	0
DR CYNTHIA LINDQUIST MA PAST CHAIR	1 00	X						0	0	0
ARTHUR CHUCK HENSLEY MEMBER AT LARGE	1 00	X						0	0	0
JEFF KAUFMAN MEMBER AT LARGE	1 00	X						0	0	0
DR VERNA FOWLER TRUSTEE	1 00	X						0	0	0
BARBARA GOHR TRUSTEE	1 00	X						0	0	0
DANIEL PANCHO GUTSTEIN TRUSTEE	1 00	X						0	0	0
DR ELMER GUY TRUSTEE	1 00	X						0	0	0
BRIAN C MCK HENDERSON TRUSTEE	1 00	X						0	0	0
DAVID KENNEDY TRUSTEE	1 00	X						0	0	0
DR JOSEPH MCDONALD TRUSTEE	1 00	X						0	0	0
DR NANCY O'DONOGHUE TRUSTEE	1 00	X						0	0	0
MICHAEL OLTROGGE TRUSTEE	1 00	X						0	0	0
DAVID W ROGERS TRUSTEE	1 00	X						0	0	0
JOHN E SALOIS TRUSTEE	1 00	X						0	0	0
OLIVIA VANEGAS-FUNCHEON TRUSTEE	1 00	X						0	0	0
DR LAUREL VERMILLION TRUSTEE	1 00	X						0	0	0
LIESL WILKE TRUSTEE	1 00	X						0	0	0
DR DAVID YARLOTT JR TRUSTEE	1 00	X						0	0	0
RICHARD WILLIAMS PRESIDENT/CEO	50 00			X				172,713	0	25,117
CARRIE E BASGALL SECRETARY	40 00			X				40,263	0	17,016
TAMELA A MILLER-CARLSON CFO	50 00			X				101,049	0	21,041

SCHEDULE D
(Form 990)

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

Department of the Treasury
Internal Revenue Service

Name of the organization
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

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? ☐ Yes ☐ No	
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 ☐ Yes ☐ No	

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	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	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

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

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	25,517,037	30,320,069			
b Contributions	708,611	526,304			
c Investment earnings or losses	3,165,341	-5,140,749			
d Grants or scholarships	218,983	188,587			
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	29,172,006	25,517,037			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment 31 000 % %

b

Permanent endowment 69 000 % %

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)

No

(ii) related organizations

3a(ii)

No

b

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

3b

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		100,000		100,000
b Buildings		821,014	279,617	541,397
c Leasehold improvements				
d Equipment		301,587	214,009	87,578
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c.)				728,975

Schedule D (Form 990) 2009

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	17,594,300
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,575,974
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,018,326
4	Net unrealized gains (losses) on investments	4	-351,490
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	131,652
9	Total adjustments (net) Add lines 4 - 8	9	-219,838
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,798,488

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	17,081,878
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains on investments	2a	-351,490
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	-351,490
3	Subtract line 2e from line 1	3	17,433,368
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	105,218
b	Other (Describe in Part XIV)	4b	55,714
c	Add lines 4a and 4b	4c	160,932
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	17,594,300

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	15,283,390
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
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	0
3	Subtract line 2e from line 1	3	15,283,390
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	105,218
b	Other (Describe in Part XIV)	4b	187,366
c	Add lines 4a and 4b	4c	292,584
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	15,575,974

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
Part V, Line 4	Description of Intended Use of Endowment Funds	THE ENDOWMENT IS COMPOSED OF APPROXIMATELY 80 INDIVIDUAL ENDOWMENT FUNDS ESTABLISHED BY DONORS PRIMARILY TO PROVIDE SCHOLARSHIPS AND SUPPORT TO TRIBAL COLLEGE STUDENTS AND TRIBAL COLLEGES, RESPECTIVELY
Part X	Description of Uncertain Tax Positions Under FIN 48	EFFECTIVE JULY 1, 2009, WE ADOPTED THE PROVISIONS OF THE INCOME TAXES TOPIC OF THE CODIFICATION RELATING TO UNCERTAIN TAX POSITIONS. THOSE PROVISIONS APPLY TO ALL OPEN TAX PERIODS IN ALL TAX JURISDICTIONS IN WHICH WE ARE REQUIRED TO FILE AN INCOME TAX RETURN. UPON ADOPTION, WE DETERMINED THAT NO CUMULATIVE EFFECT ADJUSTMENT WAS NECESSARY, AND THAT NO UNCERTAIN TAX POSITIONS HAVE BEEN TAKEN (OR ARE EXPECTED TO BE TAKEN) THAT COULD HAVE A MATERIAL EFFECT ON OUR INCOME TAX LIABILITIES. WE BELIEVE WE HAVE CONDUCTED OUR OPERATIONS IN ACCORDANCE WITH, AND HAVE PROPERLY MAINTAINED, OUR TAX-EXEMPT STATUS. OUR TAX RETURNS FOR 2007, 2008, AND 2009 ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE (BASED ON STATUTE OF LIMITATIONS).
Part XI, Line 8 - Other Adjustments		CHANGE IN VALUE OF CHARITABLE TRUSTS -55714 EXPENSES NETTED AGAINST REVENUE 187366
Part XII, Line 4b - Other Adjustments		CHANGE IN VALUE OF CHARITABLE TRUSTS 55714
Part XIII, Line 4b - Other Adjustments		EXPENSES NETTED AGAINST REVENUE 187366

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		2009-10 GALA (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	389,655	78,793	468,448
	2	Less Charitable contributions	288,350		288,350
	3	Gross income (line 1 minus line 2)	101,305	78,793	180,098
Direct Expenses	4	Cash prizes	1,258		1,258
	5	Non-cash prizes			
	6	Rent/facility costs	18,366	5,150	23,516
	7	Food and beverages	23,400		23,400
	8	Entertainment	69,442		69,442
	9	Other direct expenses	4,788		4,788
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			122,404
	11	Net income summary Combine lines 3, column d, and line 10. ▶			57,694

Part III Gaming.

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1, column d, and line 7 ▶			

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

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
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations

35

3

Enter total number of other organizations

0

Software ID:
Software Version:
EIN: 52-1573446
Name: THE AMERICAN INDIAN COLLEGE FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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 Indian Higher Education Consortium121 ORONOCO STREET ALEXANDRIA, VA 22314	84-0640326	501(C)(3)	105,000				PROVIDE OPERATIONAL & PROGRAM SUPPORT
Bay Mills Community College12214 W LAKESHORE DR BRIMLEY, MI 49715	38-2604866	501(C)(3)	83,856	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Blackfeet Community CollegePO BOX 819 BROWNING, MT 59417	81-0378943	501(C)(3)	121,923	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Cankdeska Cikana Comm CollegePO BOX 269 FT TOTTEN, ND 58335	45-0350756	501(C)(3)	113,697	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Chief Dull Knife CollegePO BOX 98 LAME DEER, MT 59043	81-0351900	501(C)(3)	146,842	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
College of the Menominee NationPO BOX 1179 KESHENA, WI 54135	39-1773613	501(C)(3)	236,313	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
DinE CollegePO BOX 126 TSAILE, AZ 86556	86-0215931	501(C)(3)	125,517	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Fond Du Lac Tribal and Community College2101 14TH STREET CLOQUET, MN 55720	41-1816396	501(C)(3)	84,174	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Fort Belknap CollegePO BOX 159 HARLEM, MT 59526	81-0420980	501(C)(3)	146,752	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Fort Peck Community CollegePO BOX 398 POPLAR, MT 59255	81-0374399	501(C)(3)	108,123	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Ft Berthold Community CollegePO BOX 490 NEW TOWN,ND 58763	45-0322990	501(C)(3)	115,042	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Haskell Indian Nations University155 INDIAN AVE LAWRENCE,KS 66046	03-0489646	FEDERAL INSTITUTION	105,994	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Ilisagvik CollegePO BOX 749 BARROW,AK 99723	92-0158414	501(C)(3)	25,489	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Institute of American Indian Arts83 AVAN NU PRO RD SANTA FE,NM 87508	85-0377670	501(C)(3)	107,375	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Keweenaw Bay Ojibwa Community CollegePO BOX 519 BARAGA,MI 49908	38-1743340	501(C)(3)	72,865	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Lac Courte Oreilles Ojibway Community College13466 W TREPANIA RD HAYWARD,WI 54843	39-1453493	501(C)(3)	114,138	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Leech Lake Tribal CollegePO BOX 180 CASS LAKE,MN 56633	75-3061667	501(C)(3)	138,525	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Little Big Horn CollegePO BOX 370 CROW AGENCY,MT 59022	81-0331905	501(C)(3)	177,795	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Little Priest Tribal College 601 E COLLEGE DR WINNEBAGO,NE 68071	91-1849962	501(C)(3)	104,879	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Navajo Technical CollegePO BOX 849 CROWN POINT,NM 87313	85-0303705	501(C)(3)	142,112	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Nebraska Indian Comm CollegePO BOX 428 MACY,NE 68039	47-0623553	501(C)(3)	112,680	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Northwest Indian College2522 KWINA RD BELLINGHAM,WA 98226	91-0905644	501(C)(3)	201,964	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
OGLALA LAKOTA COLLEGE PO BOX 490 KYLE,SD 57752	23-7135915	501(C)(3)	205,888	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Saginaw Chippewa Tribal College2274 ENTERPRISE DR MT PLEASANT,MI 48858	38-6178758	501(C)(3)	72,055	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
SALISH KOOTENAI COLLEGEPO BOX 70 PABLO,MT 59855	81-0378823	501(C)(3)	153,369	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
SINTE GLESKA UNIVERSITYPO BOX 105 MISSION,SD 57555	46-0312209	501(C)(3)	124,522	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
SISSETON WAHPETON COLLEGEPO BOX 689 SISSETON,SD 57262	46-0357254	501(C)(3)	112,913	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Sitting Bull College1341 92ND STREET FT YATES,ND 58538	23-7373765	501(C)(3)	176,724	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Southwestern Indian Polytechnic Institute9169 COORS ROAD NW ALBUQUERQUE,NM 87120	85-0235298	501(C)(3)	90,195	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Stone Child Community CollegeRR1 BOX 1082 BOX ELDER,MT 59521	81-0420650	501(C)(3)	197,099	91	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Tohono O'odham Community CollegePO BOX 3129 SELLS, AZ 85634	86-0931108	501(C)(3)	156,118	90	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
Turtle Mountain Community CollegePO BOX 340 BELCOURT, ND 58316	45-0323401	501(C)(3)	91,077	90	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
UNITED TRIBES TECHNICAL COLLEGE3315 UNIVERSITY BISMARCK, ND 58504	45-0314233	501(C)(3)	238,571	90	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
White Earth Tribal & Community College202 SOUTH MAIN STREET MAHNOMENT, MN 56557	41-1978247	501(C)(3)	80,567	90	FAIR MARKET VALUE	CAMERA	PROVIDE OPERATIONAL & PROGRAM SUPPORT
CHOCTAW NATIONPO BOX 1210 DURANT, OK 74702	73-0717979	TRIBAL GOVERNMENT	0	23,050	FAIR MARKET VALUE	DONATION OF ARTIFACTS	PROVIDE OPERATIONAL & PROGRAM SUPPORT

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
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

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		
	☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
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?	Yes	
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		
	☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
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?		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
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		No
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
------------	------------------	-------------

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

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

Name of the organization
THE AMERICAN INDIAN COLLEGE FUND

Employer identification number
52-1573446

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	1	6,820	INTERNET PRICING
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
TV/PRINT				
25 Other ► (<u>ADS</u>)	X	583	1,927,799	FAIR MARKET VALUE
26 Other ► (<u>CARPET</u>)	X	1	7,155	FAIR MARKET VALUE
27 Other ► (<u>CAMERAS</u>)	X	1	3,000	FAIR MARKET VALUE
28 Other ► (<u>OTHER</u>)	X	2	316	FAIR MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

Yes

No

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

Cat No 51227J

Schedule M (Form 990) 2009

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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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.

2009

**Open to Public
Inspection**

Name of the organization

THE AMERICAN INDIAN COLLEGE FUND

Employer identification number

52-1573446

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE BOARD OF TRUSTEES REVIEWS AND APPROVES THE FORM 990 PRIOR TO FILING
Form 990, Part VI, Section B, line 12c		IN JULY OF EACH YEAR, ALL TRUSTEES ARE REQUIRED TO READ THE POLICY, COMPLETE THE QUESTIONNAIRE AND SIGN AND TURN IN TO THE EXECUTIVE ASSISTANT
Form 990, Part VI, Section B, line 15		COMPENSATION FOR TOP MANAGEMENT IS DETERMINED AND APPROVED BY THE BOARD OF TRUSTEES BY USING COMPARABILITY DATA TO SUBSTANTIATE THE DECISION TOP MANAGEMENT DETERMINES THE COMPENSATION FOR OTHER KEY EMPLOYEES USING COMPARABILITY DATA TO SUBSTANTIATE THE DECISION THE PROCESS WAS LAST CONDUCTED IN OCTOBER, 2009
Form 990, Part VI, Section C, line 19		THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST THE FINANCIAL STATEMENTS ARE POSTED ON THE WEBSITE AS PART OF THE ANNUAL REPORT