efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493311007061

Form **990**

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)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
CARNEGIE INSTITUTE

Doing Business As

Number and street (or P O box if mail is not delivered to street address)
4400 FORBES AVENUE
Room/suite

City or town, state or country, and ZIP + 4
PITTSBURGH, PA 152134080

D Employer identification number
25-0965280

E Telephone number
(412) 622-3301

G Gross receipts $ 117,264,849

F Name and address of principal officer
JOHN WETENHALL
4400 FORBES
PITTSBURGH,PA 15213

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) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www carnegiemuseums org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶
L Year of formation 1926
M State of legal domicile PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
Founded by Andrew Carnegie in 1895, Carnegie Museums of Pittsburgh is a collection of four distinctive museums dedi- cated to exploration through art and science Carnegie Museum of Art, Carnegie Museum of Natural History, Carnegie Science Center and The Andy Warhol Museum See Sched O for more

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	46
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	41
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	1,039
6	Total number of volunteers (estimate if necessary)	6	1,110
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	168,123
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	19,001,932	16,671,068
	9	Program service revenue (Part VIII, line 2g)	13,137,581	12,714,079
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	35,919,252	15,897,794
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,751,056	1,944,280
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	69,809,821	47,227,221
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	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)	22,978,846	22,460,483
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	256,313	204,815
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶3,439,458		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	28,452,769	28,907,006
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	51,687,928	51,572,304
	19	Revenue less expenses Subtract line 18 from line 12	18,121,893	-4,345,083

Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	389,543,442	390,318,162
	21	Total liabilities (Part X, line 26)	45,084,963	29,980,058
	22	Net assets or fund balances Subtract line 21 from line 20	344,458,479	360,338,104

Part II Signature Block

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.

Sign Here

******
Signature of officer

2011-11-07
Date

JOHN WETENHALL PHD MBA PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶				Firm's EIN ▶
Firm's address ▶				Phone no ▶

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

To serve as a catalyst for growth and knowledge, offer a home to thinking and inquisitive children and adults,

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 $ 12,312,914 including grants of $) (Revenue $ 2,183,795)

CARNEGIE MUSEUM OF ART-ENGAGED AUDIENCES THROUGH ITS NATIONALLY RECOGNIZED COLLECTIONS, EXHIBITIONS, AND PROGRAMS THIRTEEN NEW EXHIBITIONS WERE PRESENTED A WIDE RANGE OF EDUCATIONAL PROGRAMS WERE OFFERED BOTH ON- AND OFF-SITE THE WORK OF CHARLES "TEENIE" HARRIS, WHO PHOTO- GRAPHED PITTSBURGH'S AFRICAN AMERICAN COMMUNITY FROM 1936 TO 1975 CONTINUED TO DRAW INTEREST AND AUDIENCES THE MUSEUM CONTINUED ITS EFFORTS TO REACH AND ENGAGE AUDIENCES THROUGH A VARIETY OF INITIATIVES SUCH AS SPECIALLY DESIGNED PROGRAMS AND ACTIVITIES, COMMUNITY PARTNER- SHIPS, SCHOLARSHIPS, AND FREE OR DISCOUNTED ADMISSIONS THESE EXCELLENT OPPORTUNITIES ALL CONTRIBUTED TO ATTENDANCE OF 178,458 FOR CARNEGIE MUSEUM OF ART

4b (Code) (Expenses $ 10,638,089 including grants of $) (Revenue $ 2,747,453)

CARNEGIE MUSEUM OF NATURAL HISTORY - RANKED AMONG THE TOP 5 NATURAL HISTORY MUSEUMS IN THE COUNTRY, IT MAINTAINS, PRESERVES AND INTERPRETS AN EXTRAORDINARY COLLECTION OF 20 MILLION OBJECTS AND SCIENTIFIC SPECIMENS USED TO BROADEN UNDERSTANDING OF EVOLUTION, CONSERVATION AND BIODIVERSITY DINOSAURS IN THEIR TIME, THE $36 MILLION DINOSAUR EXHIBIT HALL COMPLETED IN 2008, WAS AWARDED A SILVER LEED GREEN BUILDING CERTIFICATION DEMONSTRATING THE MUSEUM'S INVOLVEMENT IN CONSERVATION SCIENCE, SUSTAINABI

4c (Code) (Expenses $ 9,552,085 including grants of $) (Revenue $ 7,627,294)

CARNEGIE SCIENCE CENTER - PERMANENT EXHIBITS INCLUDE OMNIMAX THEATRE, PLANETARIUM, SUBMARINE AND ROBOWORLD, THE LARGEST AND MOST COMPREHENSIVE PERMANENT ROBOTICS EXHIBITION IN THE WORLD, WITH 3 MAIN THEMES THINKING, SENSING AND ACTING THE RECONSTRUCTED SCIENCE-OF-SPORTS EXHIBITION, HIGHMARK SPORTSWORKS, ATTRACTED AUDIENCES FOR ITS FIRST FULL YEAR OF OPERATION THE MUSEUM'S GIRLS MATH & SCIENCE PARTNERSHIP OFFERED MULTIPLE PROGRAMS TO GIVE GIRLS OPPORTUNITIES TO CONNECT WITH STUDY TO ACTUALIZE

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 5,124,486 including grants of $) (Revenue $ 2,242,823)

4e **Total program service expenses** ▶$ 37,627,574

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 (see instruction)?	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, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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	Yes	
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	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	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.*	11b	Yes	
c	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.*	11c		No
d	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.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		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, Parts I and IV*	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, Parts II and IV*	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, Parts III and IV*	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 (see instructions)*	17	Yes	
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
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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? *If "Yes," complete Schedule J*	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? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	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? *If "Yes," complete Schedule L, Part 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? *If "Yes," complete Schedule L, Part 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? *If "Yes," complete Schedule L, Part II*	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? *If "Yes," complete Schedule L, Part III*	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? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☑ **Yes** ☐ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		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

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	216			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	1,039			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			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	Yes	
b	If "Yes," enter the name of the foreign country ▶CA , CJ , LU See instructions for 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?			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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
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 receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			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				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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.

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 46			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 41			
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	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?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4	Yes	
5	Did the organization become aware during the year of a significant 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	Yes	
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 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 ▶PA , AR , CA , FL , IL , MD , MA , MN , NJ , NY , OH , VA , 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 ▶

FRANK A CARDIELLO CPA
4400 FORBES AVENUE
PITTSBURGH, PA 152134080
(412) 622-3301

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

Check if Schedule O contains a response to any question in this Part VII . . . .

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,466,695		204,082

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 ▶14

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	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? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	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
MASCARO CONSTRUCTION COLP 1720 METROPOLITAN STREET PITTSBURGH, PA 15233	Construction Contractor	690,817
MOC INC 500 ROSS ST PITTSBURGH, PA 15219	Mechan/Elec Consulting	671,435
PARKHURST DINING SERVICES PO BOX 644091 PITTSBURGH, PA 15264	Food Services	254,529
ALLIEDBARTON SECURITY PO BOX 828854 PHILADELPHIA, PA 19182	Security Services	193,742
REED SMITH LLP PO BOX 2009 PITTSBURGH, PA 15219	Legal Services	163,858

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 ▶9

Part VIII **Statement of Revenue**

Section	Line	Description	(i)	(ii) / Amount / Business Code	(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		197,939				
	d	Related organizations . . . 1d						
	e	Government grants (contributions) 1e		3,631,389				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f		12,841,740				
	g	Noncash contributions included in lines 1a-1f $		579,294				
	h	**Total.** Add lines 1a-1f . . . . ▶			16,671,068			
Program Service Revenue				Business Code				
	2a	Admissions		713990	5,607,630			
	b	Membership Fees		713990	2,957,413			
	c	Tuitions		713990	1,486,022			
	d	Other Program Fees		713990	1,187,822			
	e	Miscellaneous		713990	719,719			
	f	All other program service revenue			755,473		105,180	
	g	**Total.** Add lines 2a–2f . . . . ▶			12,714,079			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶			8,313,480		-86,376	8,399,856
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties . . . . ▶			56,847			56,847
			(i) Real	(ii) Personal				
	6a	Gross Rents	2,302,825					
	b	Less rental expenses	1,034,242					
	c	Rental income or (loss)	1,268,583					
	d	Net rental income or (loss) . . . . ▶			1,268,583	1,119,264	149,319	
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	74,706,250	179,901				
	b	Less cost or other basis and sales expenses	67,301,837					
	c	Gain or (loss)	7,404,413	179,901				
	d	Net gain or (loss) . . . . ▶			7,584,314	179,901		7,404,413
	8a	Gross income from fundraising events (not including $ 197,939 of contributions reported on line 1c) See Part IV, line 18 . . . a		81,091				
	b	Less direct expenses . . . b		187,419				
	c	Net income or (loss) from fundraising events . . ▶			-106,328			-106,328
	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		2,239,308				
	b	Less cost of goods sold . . b		1,514,130				
	c	Net income or (loss) from sales of inventory . . ▶			725,178	725,178		
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . . . ▶						
	12	**Total revenue.** See Instructions . . . ▶			47,227,221	14,633,242	168,123	15,754,788

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				
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	2,157,543	930,437	1,005,307	221,799
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	16,209,849	12,920,715	1,603,207	1,685,927
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	313,750	226,450	46,193	41,107
9	Other employee benefits	2,110,447	1,728,467	188,276	193,704
10	Payroll taxes	1,668,894	1,295,632	214,548	158,714
a	Fees for services (non-employees) Management				
b	Legal	152,912	119,027	27,756	6,129
c	Accounting	108,026	5,050	102,976	0
d	Lobbying	36,000	0	36,000	0
e	Professional fundraising services *See Part IV, line 17* . .	204,815			204,815
f	Investment management fees	712,410	4,601	707,809	0
g	Other	1,879,555	1,464,475	177,981	237,099
12	Advertising and promotion	1,254,321	1,120,853	108,110	25,358
13	Office expenses	184,830	150,626	25,007	9,197
14	Information technology	583,487	26,068	520,381	37,038
15	Royalties . .				
16	Occupancy	4,420,967	4,053,109	221,338	146,520
17	Travel	430,614	381,683	3,084	45,847
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	107,153	100,675	2,398	4,080
20	Interest	606,102	97,179	508,923	0
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,042,899	336,720	4,704,888	1,291
23	Insurance	749,810	733,758	10,701	5,351
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Collections/Purchases	4,734,451	4,734,451	0	0
b	Production & Exhibition	1,942,491	1,942,491	0	0
c	Facilities Other	1,025,361	1,022,375	0	2,986
d	Repairs & Maintenance	977,862	939,468	33,770	4,624
e	Supplies	697,743	649,603	23,761	24,379
f	All other expenses	3,260,012	2,643,661	232,858	383,493
25	**Total functional expenses.** Add lines 1 through 24f	51,572,304	37,627,574	10,505,272	3,439,458
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) 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) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	37,250	1	36,950
	2	Savings and temporary cash investments	16,134,303	2	3,825,385
	3	Pledges and grants receivable, net	11,274,002	3	9,161,416
	4	Accounts receivable, net	3,654,828	4	2,502,155
	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)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L		6	
	7	Notes and loans receivable, net	18,556,400	7	13,871,760
	8	Inventories for sale or use	759,161	8	703,149
	9	Prepaid expenses and deferred charges	1,097,039	9	902,584
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 145,912,127			
	b	Less accumulated depreciation — 10b: 64,468,619	85,855,740	10c	81,443,508
	11	Investments—publicly traded securities	206,060,348	11	226,071,218
	12	Investments—other securities See Part IV, line 11	45,689,489	12	51,600,813
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	424,882	15	199,224
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	389,543,442	16	390,318,162
Liabilities	17	Accounts payable and accrued expenses	7,222,357	17	5,038,932
	18	Grants payable		18	
	19	Deferred revenue	836,926	19	536,502
	20	Tax-exempt bond liabilities	27,975,000	20	18,810,000
	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	9,044,624	23	5,594,624
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	6,056	25	
	26	**Total liabilities.** Add lines 17 through 25	45,084,963	26	29,980,058
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	86,656,031	27	85,060,232
	28	Temporarily restricted net assets	27,808,908	28	26,973,643
	29	Permanently restricted net assets	229,993,540	29	248,304,229
		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	344,458,479	33	360,338,104
	34	Total liabilities and net assets/fund balances	389,543,442	34	390,318,162

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	47,227,221
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,572,304
3	Revenue less expenses Subtract line 2 from line 1	3	-4,345,083
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	344,458,479
5	Other changes in net assets or fund balances (explain in Schedule O)	5	20,224,708
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	360,338,104

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			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? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	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	2c	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 separate basis, consolidated 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?	3a		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 . .	3b		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493311007061

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

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

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 described in **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 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

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

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?

		Yes	No
(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?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(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 Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	39,052,456	41,363,043	24,431,493	19,001,932	16,671,068	140,519,992
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	39,052,456	41,363,043	24,431,493	19,001,932	16,671,068	140,519,992
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)						3,497,177
6 **Public Support.** Subtract line 5 from line 4						137,022,815

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	39,052,456	41,363,043	24,431,493	19,001,932	16,671,068	140,519,992
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,942,744	34,332,852	12,781,738	16,459,210	8,370,327	91,886,871
9 Net income from unrelated business activities, whether or not the business is regularly carried on		67,138	477,007	27,419	67,570	639,134
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						233,045,997

12 Gross receipts from related activities, etc (See instructions) | 12 | 118,360,423

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 2010 (line 6 column (f) divided by line 11 column (f)) | 14 | 58 800 %

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | 15 | 58 960 %

16a **33 1/3% support test—2010.** 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—2009.** 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—2010.** 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—2009.** 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 III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	0 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	0 %
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** 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—2009.** 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Additional Data

Software ID: 10000104
Software Version:
EIN: 25-0965280
Name: CARNEGIE INSTITUTE

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			
JOHN ABARBOUR Trustee	1 00	X						0	0	0
RAYMOND TBETLER Trustee	2 00	X						0	0	0
DOREEN EBOYCE Trustee	1 00	X						0	0	0
SUZANNE W BROADHURST Trustee	2 00	X						0	0	0
HOWARD JBRUSCHI Trustee	1 00	X						0	0	0
JOANNE EBURLEY Trustee	1 00	X						0	0	0
JOHN CCAMILLUS Trustee	1 00	X						0	0	0
JARED LCOHON Trustee	1 00	X						0	0	0
SUSAN M CORBETT Trustee	1 00	X						0	0	0
JUDITH MDAVENPORT Trustee	1 00	X						0	0	0
RANDALL SDEARTH Trustee	2 00	X						0	0	0
JOHN DEFAZIO Trustee	1 00	X						0	0	0
NICHOLAS JDEIULIIS Trustee	1 00	X						0	0	0
ROY GDORRANCEIII Trustee	1 00	X						0	0	0
GEORGE FEICHLEAY Trustee	1 00	X						0	0	0
MARK EVANS Trustee	1 00	X						0	0	0
SYLVIA VFIELDS Trustee	1 00	X						0	0	0
LEE B FOSTER Trustee - Chair	3	X		X						
EVAN SFRAZIER Trustee	1	X								
HENRY JGALLIOT Trustee	1	X								
JOSEPH CGUYAUX Trustee	2	X								
TERESA HEINZ Trustee	1	X								
TORRENCE M HUNTJR Trustee	1	X								
WILLIAM EHUNT Trustee	2	X								
WILLIAM HISLER Trustee	1	X								

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 KARET Trustee	1	X								
MARSHALL PKATZ Trustee	1	X								
ELLEN PKESSLER Trustee	1	X								
JANE M KIRKLAND Trustee	1	X								

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

4d. Other program services

(Code) (Expenses $ 4,683,944 including grants of $) (Revenue $ 2,211,177)

The Andy Warhol Museum - Achievements included exhibitions of Warhol works through the lens of music, film and the Warhol works through the lens of music, film and the Warhol works through the lens of music, film and the Warhol works through the lens of music, film and the Warhol works through the lens of music, film and the Warhol works through the lens of music, film and the

(Code) (Expenses $ 440,542 including grants of $) (Revenue $ 31,646)

Other Programs offered via the Arts Education Collaborative

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493311007061

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
CARNEGIE INSTITUTE	25-0965280

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ ______

3 Volunteer hours ______

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ ______

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ ______

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ ______

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $ ______

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ ______

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	99,731	
c	Total lobbying expenditures (add lines 1a and 1b)	99,731	
d	Other exempt purpose expenditures	51,472,573	
e	Total exempt purpose expenditures (add lines 1c and 1d)	51,572,304	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	**(b)**
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, enter -0-		
i	Subtract line 1f from line 1c If zero or less, enter -0-		
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ **Yes**	☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** Total
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	60,162	118,940	136,683	99,731	415,516
d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	60,162	35,682			95,844

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i
Also, complete this part for any additional information

Identifier	Return Reference	Explanation

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

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

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
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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
d ☑ Loan or exchange programs
b ☑ Scholarly research
e ☐ Other
c ☑ Preservation for future generations

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
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	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	257,235,751	205,341,782	306,564,854		
b Contributions	2,045,000	3,529,000	2,963,756		
c Investment earnings or losses	35,834,120	64,268,969	-89,494,435		
d Grants or scholarships					
e Other expenditures for facilities and programs	14,549,000	15,217,000	14,044,000		
f Administrative expenses	657,000	687,000	648,393		
g End of year balance	279,908,871	257,235,751	205,341,782		

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 10 330 %

b Permanent endowment ▶ 86 740 %

c Term endowment ▶ 2 930 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(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		6,505,736		6,505,736
b Buildings		118,028,225	49,526,936	68,501,289
c Leasehold improvements				
d Equipment		18,238,645	13,848,463	4,390,182
e Other		3,139,521	1,093,220	2,046,301
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				81,443,508

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other (A) Limited Partnerships	51,600,813	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	51,600,813	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Bond Issue Costs	199,224
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	199,224

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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	47,227,221
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	51,572,304
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,345,083
4	Net unrealized gains (losses) on investments	4	20,227,709
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	20,227,709
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	15,882,626

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	49,250,084
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	49,250,084
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	680,169		
b	Other (Describe in Part XIV)	4b	-2,703,032		
c	Add lines **4a** and **4b**			4c	-2,022,863
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	47,227,221

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	53,595,167
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	2,703,032		
e	Add lines **2a** through **2d**			2e	2,703,032
3	Subtract line **2e** from line **1**			3	50,892,135
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	680,169		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	680,169
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	51,572,304

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
Pt III Line 1a		The Institute's collections include minerals, ethnographic
		THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE INSTITUTE'S INCEPTION ARE NOT RE- COGNIZED AS ASSETS IN THE STATEMENTS OF FINANCIAL POSI- TION PURCHASES OF COLLECTION ITEMS ARE RECORDED AS OPERATING EXPENDITURES IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED (APPROXIMATELY $4,766,000 IN 2010) CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED IN THE FINANCIAL STATE- MENTS PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES ARE REFLECTED AS INCREASES IN TEMPORARILY R
Pt III Line 4		See description above for Pt III Line 1a The collections
		are central to our mission as collector, guardian, and interactive presenter of cultural and scientific treasures and ideas promoting growth and knowledge for thinking and inquisitive adults and children
Pt V Line 4		The intended uses of the organization's endowment funds
		are to meet the intent of Donor restrictions, provide a reasonable level of draw for the operating needs of Carnegie Institute, and to enhance the purchasing power of the funds corpus by striving for long-term growth
Pt XI Line 8		Rounding
Pt XII Line 2d		Rounding
Pt XII Line 4b		Cost of Rentals, Cost of Sales, Net Fundraiser Exp , & Rounding
Pt XIII Line 2d		Cost of Rentals, Cost of Sales, Net Fundraiser Exp , & Rounding

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493311007061

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	See Add'l Data					
3a	Sub-total	0	0			9,732,018
b	Total from continuation sheets to Part I	0	0			209
c	**Totals** (add lines 3a and 3b)	0	0			9,732,436

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Part V if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ ____________

3 Enter total number of other organizations or entities . . . . ▶

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 Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☑ Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☑ Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☑ Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

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

Identifier	ReturnReference	Explanation
Pt I Line 2		Not applicable

Additional Data

Software ID: 10000104
Software Version:
EIN: 25-0965280
Name: CARNEGIE INSTITUTE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America	0	0	Investments		4,743,352
East Asia and Pacific	0	0	Program Services	Exhibit Leases	
East Asia and Pacific	0	0	Program Services	Film & Video Fees	
East Asia and Pacific	0	0	Program Services	Other Fees	
East Asia and Pacific	0	0	Program Services	Membership	
Europe	0	0	Program Services	Curating	3,547
Europe	0	0	Program Services	Exhibit Leases	
Europe	0	0	Program Services	Film & Video Fees	
Europe	0	0	Program Services	Other Fees	
Europe	0	0	Proceeds from Sale of Art		
Europe	0	0	Gifts Received		
Europe	0	0	Program Services	Memberships	
Middle East	0	0	Program Services	Other Fees	
North America	0	0	Investments		4,983,020
North America	0	0	Program Services	Performance Fee	1,250
North America	0	0	Program Services	Exhibit travel	849
North America	0	0	Program Services	Exhibit Leases	
North America	0	0	Program Services	Film & Video Fees	
North America	0	0	Program Services	Other Fees	
North America	0	0	Program Services	Memberships	
Russia	0	0	Program Services	Other Fees	
South America	0	0	Program Services	Exhibit travel	209
South America	0	0	Program Services	Exhibit Leases	
South America	0	0	Program Services	Video/Film Fees	
South America	0	0	Program Services	Other Fees	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493311007061

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

2010

Open to Public Inspection

Name of the organization	Employer identification number
CARNEGIE INSTITUTE	25-0965280

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

- **a** ☑ Mail solicitations
- **b** ☑ Internet and e-mail solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☑ Special fundraising events

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 services? ☑ **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 and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(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
DCM INC	Telemarketing		No	661,439	204,815	456,624
Total . . . . ▶				661,439	204,815	456,624

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

PA, CA, FL, IL, MD, MA, NJ, NY, OH, VA, WV

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 Science Awards (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	279,030			279,030
	2	Less Charitable contributions	197,939			197,939
	3	Gross income (line 1 minus line 2)	81,091			81,091
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs				
	7	Food and beverages	53,503			53,503
	8	Entertainment	128,981			128,981
	9	Other direct expenses	4,935			4,935
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				187,419
	11	Net income summary Combine lines 3 and 10 in column (d) ▶				-106,328

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				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

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? ☐ Yes ☐ No

b If "No," Explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain

11 Does the organization operate gaming activities with nonmembers? . . . . ☐ Yes ☐ No

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? . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	**13a**	
b An outside facility	**13b**	

14 Provide 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? . . . . ☐ Yes ☐ No

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? . . . . ☐ Yes ☐ No

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 ▶ $

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ 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 orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	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?	**2**	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 ☑ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ 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 from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		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?	**5a**		No
b	Any related organization?	**5b**		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?	**6a**		No
b	Any related organization?	**6b**		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	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured 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	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other 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 reportable compensation				
(1) DAVID HILLENBRAND	(i) (ii)	348,752		2,285	8,575	3,322	362,934	
(2) DOLORES F ELLENBERG	(i) (ii)	199,367	3,000	1,275	7,159	16,522	227,323	
(3) KEVIN HILES	(i) (ii)	159,944		337	5,783	17,273	183,337	
(4) THOMAS SOKOLOWSKI	(i) (ii)	197,686		1,892	7,021	7,173	213,772	
(5) SAMUEL M TAYLOR	(i) (ii)	185,765		1,180		18,660	205,605	
(6) ANN M METZGER	(i) (ii)	138,920		805	4,974	14,507	159,206	
(7) LYNN ZELEVANSKY	(i) (ii)	211,579		1,977		18,051	231,607	
(8) MAUREEN ROLLA	(i) (ii)	114,307		614	4,074	6,496	125,491	
(9) LUO ZHEXI	(i) (ii)	102,650		284	3,677	6,788	113,399	
(10) EILEEN MEDDIS	(i) (ii)	151,412	3,000	893	5,366	7,932	168,603	
(11) CYNTHIA MCCORMICK	(i) (ii)	139,463	3,000	441	5,051	10,719	158,674	
(12)								
(13)								
(14)								
(15)								
(16)								

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
Pt I Line 1a		Carnegie Institute provides reimbursement for three employees (President, VP of Development, VP for Corporate and Government Affairs) for social club membership fees and related expenses Dues to these clubs and related expenses directly related to Carnegie Institute's exempt purposes are paid in accordance with the Institute's accountable plan The club memberships are considered a required resource to provide an off-site business and social environment to meet with Trustees, Donors, and Foundations
Pt I Line 7		Bonuses were paid to people who assumed additional responsibilities and
Pt I Line 1a		were rewarded consistent with compensation policy

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493311007061

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) HIGHMARK	1 Current/1 Former Trustee	2,398,908	Arms-Length Health Insurance		No
(2) PNC FINANCIAL	Current Trustee	433,690	Arms-Length Investment Svc		No
(3) CITIZENS BANK	Current Trustee	344,288	Arms-Length Investment Svc		No
(4) PARKHURST DINING SERVICES	Current Trustee	254,529	Arms-Length Food Svc		No

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493311007061

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
CARNEGIE INSTITUTE	25-0965280

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art . . .	X	68		N/A
2 Art—Historical treasures				
3 Art—Fractional interests	X	24		N/A
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	X	81	579,294	FMV
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	X	34		N/A
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .	X	17,664		N/A
24 Archeological artifacts .	X	21		N/A
25 Other ▶ (Electronic Smart Board)	X	1		N/A
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

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 Acknowledgement . . .	29	8

			Yes	No
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?	30a		No
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?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
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			

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
Pt I Line 32b	Form 990	Unrelated third parties are used to sell items at public sales
Pt I Line 33	Form 990	The organization has elected, as permitted under SFAS 116, not to
	Form 990	report in its revenue statement and balance sheet works of art,
	Form 990	historical treasures, or other similar assets helf for public
		EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE , PART I LINE 1 COLUMN (B) REFLECTS THE NUMBER OF ITEMS RECEIVED FROM 24, CONTRIBUTIONS, 5 OF WHICH WERE REQUESTED TO BE, ACKNOWLEDGED ON FORM 8283 , PART I LINE 3 COLUMN (B) REFLECTS THE NUMBER OF ITEMS ON WHICH, FRACTIONAL INTERESTS WERE RECEIVED FROM 1 CONTRIBUTION,, WHICH WAS REQUESTED TO BE ACKNOWLEDGED ON FORM 8283 , PART I LINE 9 COLUMN (B) REFLECTS THE NUMBER OF SEPARATE CONTRIBUTIONS RECEIVED , PART I LINE 18 COLUMN (B) REFLECTS THE NUMBER OF ITEMS RECEIVED FROM 6, CONTRIBUTIONS, ONE OF WHICH WAS REQUESTED TO BE, ACKNOWLEDGED ON FORM 8283 , PART I LINE 23 COLUMN (B) REFLECTS THE NUMBER OF ITEMS RECEIVED FROM 160, CONTRIBUTIONS, ONE OF WHICH WAS REQUESTED TO BE, ACKNOWLEDGED ON FORM 8283 , PART I LINE 24 COLUMN (B) REFLECTS THE NUMBER OF ITEMS RECEIVED FROM, ONE CONTRIBUTION WHICH WAS NOT REQUESTED TO BE, ACKNOWLEDGED ON FORM 8283 ,

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493311007061

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

Identifier	Return Reference	Explanation
Pt VI-A, Line 2		FAMILY/BUSINESS RELATIONSHIPS BETWEEN OFFICER/DIRECTOR/KEY EE -

Identifier	Return Reference	Explanation
		Trustees John Barbour and Hugh Van der Veer = Business

Identifier	Return Reference	Explanation
		Trustees R Betler, L Foster & A Neupaver = Business

Identifier	Return Reference	Explanation
		Trustee E Frazier and D O'Brien = Business

Identifier	Return Reference	Explanation
		Trustees Torrence Hunt, Jr & William Hunt = Family

Identifier	Return Reference	Explanation
Pt VI-A, Line 4		Corporate bylaw changes were enacted to

Identifier	Return Reference	Explanation
		1) Allow Emeritus Trustees to serve on the Trusteeship Committee and

Identifier	Return Reference	Explanation
		to more clearly define Emeritus Trustee voting rights

Identifier	Return Reference	Explanation
		2) Generalize the definition of those eligible to serve on the

Identifier	Return Reference	Explanation
		Executive Committee and replace the three year term with

Identifier	Return Reference	Explanation
		three one-year terms to provide more flexibility

Identifier	Return Reference	Explanation
		3) Clarify in the Investment Committee section that members

Identifier	Return Reference	Explanation
		could be appointed for additional one year terms and

Identifier	Return Reference	Explanation
		eliminate the mandate to step down after five years

Identifier	Return Reference	Explanation
		4) Modify the Finance Committee section to decrease the

Identifier	Return Reference	Explanation
		mandated number of trustees from four to three and

Identifier	Return Reference	Explanation
		eliminate the mandate to step down after five years

Identifier	Return Reference	Explanation
		5) Allow the director and museum administration to make

Identifier	Return Reference	Explanation
		shifts in the approved budget with Board ratification

Identifier	Return Reference	Explanation
		6) Identify the Audit Committee rather than the Executive

Identifier	Return Reference	Explanation
		Committee as responsible for determining conflict of interest

Identifier	Return Reference	Explanation
		standards

Identifier	Return Reference	Explanation
		7)Address reelection of Honorary Trustees

Identifier	Return Reference	Explanation
		8) Redefine CFO as primary liaison for Board Finance

Identifier	Return Reference	Explanation
		Committee rather than VP for Development

Identifier	Return Reference	Explanation
Pt VI-A, Line 7a		The Bylaws of Carnegie Institute provide for appointment of

Identifier	Return Reference	Explanation
Form 990EZ, Part II, Line 24		ACCOUNTS RECEIVABLE - NET PLEDGES RECEIVABLE - NET INVENTORIES PREPAIDS INVESTMENTS

Identifier	Return Reference	Explanation
Form 990EZ, Part II, Line 26		ACCOUNTS PAYABLE & ACCRUED EXPENSES DEFERRED REVENUE BONDS, MORTGAGES & OTHER NOTES

Identifier	Return Reference	Explanation
Form 990, Part III, Line 4d		THE ANDY WARHOL MUSEUM - ACHIEVEMENTS INCLUDED EXHIBITIONS OF 4683944 0 2211177 OTHER PROGRAMS OFFERED VIA THE ARTS EDUCATION COLLABORATIVE 440542 0 31646

Identifier	Return Reference	Explanation
Form 990, Part IX, Line 24f		BANK FEES 293722 183391 51050 59281 CATERING & HOSPITALITY 304882 225522 0 79360 COLLECTIONS CONSERVATION 38276 38276 0 0 DUES & SUBSCRIPTIONS 97707 53636 26903 17168 ENTERTAINMENT 45674 15587 25146 4941 EQUIPMENT PURCHASES 348620 319237 23517 5866 EQUIPMENT RENTAL 188530 93860 88384 6286 GRANT TO GOVERNMENT HONORARIA 197993 197993 0 0 POSTAGE & SHIPPING 507241 391138 6926 109177 PRINTING 540898 448090 4660 88148 PROGRAM OTHER 613885 613885 0 0 PUBLIC

Identifier	Return Reference	Explanation
		Ex Officio Trustees who serve as Public Trustee or as Life

Identifier	Return Reference	Explanation
		Trustees of a neighboring 501(c)(3) organization

Identifier	Return Reference	Explanation
Pt VI-B, Line 11a		990 REVIEW PROCESS -

Identifier	Return Reference	Explanation
		The Carnegie Institute Controller's Office is responsible

Identifier	Return Reference	Explanation
		for gathering relevant information and preparing the

Identifier	Return Reference	Explanation
		annual Form 990 Once the Form is complete in draft

Identifier	Return Reference	Explanation
		status, it is reviewed with the Institute's independent

Identifier	Return Reference	Explanation
		certified public accounting firm Upon completion of

Identifier	Return Reference	Explanation
		independent review by the CPAs, the form is reviewed by

Identifier	Return Reference	Explanation
		President and senior management of the Institute and then

Identifier	Return Reference	Explanation
		presented to and reviewed with the Audit Committee

Identifier	Return Reference	Explanation
		Finally, the Form is presented to the Board of Trustees for

Identifier	Return Reference	Explanation
		review at a scheduled meeting prior to filing with the IRS

Identifier	Return Reference	Explanation
Pt VI-B, Line 12c		CONFLICT OF INTEREST COMPLIANCE -

Identifier	Return Reference	Explanation
		The bylaws of Carnegie Institute contain a provision that

Identifier	Return Reference	Explanation
		requires each trustee, member of a museum board or com-

Identifier	Return Reference	Explanation
		mittee, officer and member of senior management to dis-

Identifier	Return Reference	Explanation
		close, annually, the existence of any circumstances that

Identifier	Return Reference	Explanation
		might constitute a conflict of interest with the organi-

Identifier	Return Reference	Explanation
		zation The process is initiated in the spring of each

Identifier	Return Reference	Explanation
		year by the President sending a Conflict of Interest

Identifier	Return Reference	Explanation
		Policy and Disclosure Questionnaire to above recipients

Identifier	Return Reference	Explanation
		Completed questionnaires are returned to the President

Identifier	Return Reference	Explanation
		for evaluation of actual or perceived conflicts A

Identifier	Return Reference	Explanation
		summary of the process and results is communicated to the

Identifier	Return Reference	Explanation
		Audit Committee at a scheduled meeting and forwarded to

Identifier	Return Reference	Explanation
		the Board of Trustees Appropriate action is taken

Identifier	Return Reference	Explanation
		annually by the board relative to actual or perceived

Identifier	Return Reference	Explanation
		conflicts The minutes of the governing board contain

Identifier	Return Reference	Explanation
		an official record of the process and conclusions

Identifier	Return Reference	Explanation
Pt VI-B, Line 15		EXECUTIVE COMPENSATION PROCESS -

Identifier	Return Reference	Explanation
		Carnegie Institute adopted an Executive Compensation

Identifier	Return Reference	Explanation
		Policy aimed at providing a reasonable and competitive

Identifier	Return Reference	Explanation
		executive total compensation consistent with market-based

Identifier	Return Reference	Explanation
		performance compensation practices for individuals

Identifier	Return Reference	Explanation
		possessing the experience and skill needed to improve the

Identifier	Return Reference	Explanation
		overall performance of the organization The Institute

Identifier	Return Reference	Explanation
		focuses on comparable nonprofit organizations in the

Identifier	Return Reference	Explanation
		local area to benchmark pay, along with data from addi-

Identifier	Return Reference	Explanation
		tional market segments, private foundations and published

Identifier	Return Reference	Explanation
		not-for-profit surveys The board authorizes the Presi-

Identifier	Return Reference	Explanation
		dent, in consultation with the independent Executive Com-

Identifier	Return Reference	Explanation
		mittee (EC)to establish an organizational job evaluation

Identifier	Return Reference	Explanation
		system and compensation policy The Pres /CEO annually

Identifier	Return Reference	Explanation
		reviews and approves museum/corporate goals and objectives

Identifier	Return Reference	Explanation
		relevant to Executives, evaluates their performance and

Identifier	Return Reference	Explanation
		recommends to the EC compensation levels based on the

Identifier	Return Reference	Explanation
		evaluations The EC reviews recommendations and grants

Identifier	Return Reference	Explanation
		approval as appropriate The EC annually reviews and

Identifier	Return Reference	Explanation
		approves corporate goals and objectives relevant to

Identifier	Return Reference	Explanation
		Pres /CEO compensation based on comparables, the evaluation

Identifier	Return Reference	Explanation
		and subject to any employment contract that is in

Identifier	Return Reference	Explanation
		effect The process/conclusions are contemporaneously

Identifier	Return Reference	Explanation
		documented in EC meeting minutes

Identifier	Return Reference	Explanation
Pt VI-C, Line 19		GOVERNING DOCUMENTS -

Identifier	Return Reference	Explanation
		Carnegie Institute's governing documents, conflict of

Identifier	Return Reference	Explanation
		interest policy, and financial statements are available

Identifier	Return Reference	Explanation
		for public inspection The documents are available upon

Identifier	Return Reference	Explanation
		request and communication of same is conveyed at http //

Identifier	Return Reference	Explanation
		www carnegiemuseums org/docs/Financials pdf

Identifier	Return Reference	Explanation
Pt I/III, Line 1		ORGANIZATION'S MISSION & MOST SIGNIFICANT ACTIVITIES -

Identifier	Return Reference	Explanation
		DESCRIPTION

Identifier	Return Reference	Explanation
		Founded by Andrew Carnegie in 1895, Carnegie Museums of

Identifier	Return Reference	Explanation
		Pittsburgh is a collection of four distinctive museums

Identifier	Return Reference	Explanation
		dedicated to exploration through art and science Carnegie

Identifier	Return Reference	Explanation
		Museum of Art, Carnegie Museum of Natural History, Carnegie

Identifier	Return Reference	Explanation
		Science Center and The Andy Warhol Museum

Identifier	Return Reference	Explanation
		MISSION

Identifier	Return Reference	Explanation
		The mission is to serve as a catalyst for growth and

Identifier	Return Reference	Explanation
		knowledge, offer a home to thinking and inquisitive children

Identifier	Return Reference	Explanation
		and adults, act as a collector, guardian and interactive

Identifier	Return Reference	Explanation
		presenter of cultural and scientific treasures and ideas,

Identifier	Return Reference	Explanation
		and support the community by attracting visitors and

Identifier	Return Reference	Explanation
		promoting economic development

Identifier	Return Reference	Explanation
		ACTIVITIES

Identifier	Return Reference	Explanation
		In 2010, the museums reached close to 1 3 million people

Identifier	Return Reference	Explanation
		through exhibitions, education programs, outreach

Identifier	Return Reference	Explanation
		activities, and special events CMP is the largest,

Identifier	Return Reference	Explanation
		most far-reaching cultural organization in the Pittsburgh

Identifier	Return Reference	Explanation
		region, known throughout the world for its vast art and

Identifier	Return Reference	Explanation
		scientific collections and scientific research

Identifier	Return Reference	Explanation
Pt VI - Line 17		Florida

Identifier	Return Reference	Explanation
		Illinois

Identifier	Return Reference	Explanation
		Maryland

Identifier	Return Reference	Explanation
		Massachusetts

Identifier	Return Reference	Explanation
		New Jersey

Identifier	Return Reference	Explanation
		New York

Identifier	Return Reference	Explanation
		Ohio

Identifier	Return Reference	Explanation
		Virginia

Identifier	Return Reference	Explanation
		West Virginia

Identifier	Return Reference	Explanation
Pt XI - Line 5		Other Changes in Net Assets

Identifier	Return Reference	Explanation
		Unrealized Gain on Investment = $20,227,709

Identifier	Return Reference	Explanation
		Rounding = <$3,001>

Identifier	Return Reference	Explanation
Sch G - Line 2b		Column V - Includes fees paid for fundraising No

Identifier	Return Reference	Explanation
		payment was made for fundraising expenses

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTE

Employer identification number
25-0965280

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

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	(g) Section 512(b)(13) controlled organization Yes	No
(1) JOHN BERDAN MEMORIAL TRUST 20 WASHINGTON STREET BOSTON, MA 021084408 25-6016908	SUPPORT FOR CHARITY	PA	501(c)(3)	PF	NA		No

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) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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
(1) CARNEGIE INSTITUTE TRUST 4400 FORBES AVENUE PITTSBURGH, PA15213 27-6667826	INVESTMENT	PA	CARNEGIE INSTITUTE	T	100	100	100 000 %

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

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

		Yes	No
1 During the tax year, did the orgranization 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	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q	Yes	
r Other transfer of cash or property from other organization(s)	1r	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	(d) Method of determining amount involved
(1) CARNEGIE INSTITUTE (GRANTOR) TRUST	q	2,664,000	CONTRIBS & TRANSFERS
(2) CARNEGIE INSTITUTE (GRANTOR) TRUST	r	14,549,000	SPENDING POLICY
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

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 (see instruction)?	**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, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	**4**		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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**	Yes	
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	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	**11a**		No
b	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.*	**11b**		No
c	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.*	**11c**		No
d	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.*	**11d**	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	**11e**	Yes	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	**11f**		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	**12a**	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	**12b**		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, Parts I and IV*	**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, Parts II and IV*	**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, Parts III and IV*	**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 (see instructions)*	**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
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	**20a**		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	**20b**		

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation