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Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

07/01, 2010, and ending

06/30, 2011

For calendar year 2010, or tax year beginning

G Check all that apply	<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return
	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change

Name of foundation

THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORY

Number and street (or P O box number if mail is not delivered to street address)	Room/suite	A Employer identification number 13-3795391
19 WEST 44TH STREET	500	(646) 366-9666

City or town, state, and ZIP code

NEW YORK, NY 10036

H Check type of organization	<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
	<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust		
	<input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16)	J Accounting method	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Accrual
		<input type="checkbox"/> Other (specify) _____	
(Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule) . . . . .	6,632,997			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B . . . . .	9,403	9,403	9,403	ATCH 1
3 Interest on savings and temporary cash investments . . . . .				
4 Dividends and interest from securities . . . . .				
5 a Gross rents . . . . .				
b Net rental income or (loss) 408,018.	-13,064			
6 a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a 408,017.				
7 Capital gain net income (from Part IV, line 2) . . . . .				
8 Net short-term capital gain . . . . .				
9 Income modifications . . . . .				
10 a Gross sales less returns and allowances 241,377.				
b Less Cost of goods sold .				
c Gross profit or (loss) (attach schedule) . . . . .	241,377			
11 Other income (attach schedule) . . . . .	2,269,760			ATCH 3
12 Total. Add lines 1 through 11 . . . . .	9,140,473	9,403	9,403	ATCH 2
13 Compensation of officers, directors, trustees, etc . . . . .	335,675			335,402.
14 Other employee salaries and wages . . . . .	1,352,827			1,346,361.
15 Pension plans, employee benefits . . . . .	290,376			290,376.
16 a Legal fees (attach schedule) ATCH 4	5,973			6,910.
b Accounting fees (attach schedule) ATCH 5	24,150			24,150.
c Other professional fees (attach schedule) *	318,738			315,838.
17 Interest . . . . .				
18 Taxes (attach schedule) (see page 14 of the instructions) *	138,274			138,274.
19 Depreciation (attach schedule) and depletion . . . . .	20,489			
20 Occupancy . . . . .	245,278			245,278.
21 Travel, conferences, and meetings . . . . .				
22 Printing and publications . . . . .	13,008			13,025.
23 Other expenses (attach schedule) ATCH 8	5,625,150			5,540,811.
24 Total operating and administrative expenses.	8,369,938			8,256,425.
Add lines 13 through 23 . . . . .				
25 Contributions, gifts, grants paid . . . . .	1,030			1,030.
26 Total expenses and disbursements Add lines 24 and 25	8,370,968			8,257,455.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements .	769,505			
b Net investment income (if negative, enter -0) .		9,403		
c Adjusted net income (if negative, enter -0) .			9,403.	

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE PART IV SCHEDULE					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	-13,064.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I line 8 column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8.	{ }		3	1,102.	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	8,449,301.	4,191,064.	2.016028
2008	8,238,445.	4,592,574.	1.793862
2007	446,000.	1,497,723.	0.297785
2006	615,425.	878,955.	0.700178
2005	835,205.	356,040.	2.345818
2 Total of line 1, column (d)			2 7.153671
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 1.430734
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5			4 2,907,524.
5 Multiply line 4 by line 3			5 4,159,893.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 94.
7 Add lines 5 and 6			7 4,159,987.
8 Enter qualifying distributions from Part XII, line 4			8 8,257,455.
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18			

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 . . .	Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)	1	0.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0) . . . . .	2		
3	Add lines 1 and 2 . . . . .	3		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0) . . . . .	4		0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0 . . . . .	5		0.
6	<b>Credits/Payments</b>			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 . . . . .	6a	297.	
b	Exempt foreign organizations-tax withheld at source . . . . .	6b	0.	
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	0.	
d	Backup withholding erroneously withheld . . . . .	6d		
7	Total credits and payments Add lines 6a through 6d . . . . .	7		297.
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10		297.
11	Enter the amount of line 10 to be <b>Credited to 2011 estimated tax</b> ► <input type="checkbox"/> <b>Refunded</b> ► <input type="checkbox"/> 11 . . . . .	11		297.

**Part VII-A Statements Regarding Activities**

		Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	X
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .	1b	X
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>			
1c	Did the foundation file Form 1120-POL for this year? . . . . .	1c	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____	d	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____	e	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .	2	X
<i>If "Yes," attach a detailed description of the activities</i>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .	5	X
<i>If "Yes," attach the statement required by General Instruction T</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	7	X
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► CA, CO, GA, IL, MD, MA, MN, NJ, VA, WI	8a	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> . . . . .	8b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i> . . . . .	9	X
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	10	X

**Part VII-A Statements Regarding Activities (continued)**

11		X
12		X
13	X	
14	Telephone no ► 646-366-9666	
15	► 15	
16	Yes	No X

1 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) . . . . .

2 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? . . . . .

3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . .

Website address ► **WWW.GILDERLEHRMAN.ORG**

4 The books are in care of ► **THE FOUNDATION** Telephone no ► **646-366-9666**  
Located at ► **19 WEST 44TH STREET, SUITE 500, NEW YORK, NY** ZIP + 4 ► **10036**

5 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► [15]

6 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank securities, or other financial account in a foreign country? . . . . .

See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country ►

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? . . . . .	1b	X
Organizations relying on a current notice regarding disaster assistance check here . . . . . ► [ ]		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? . . . . .	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
If "Yes," list the years ► [ ]		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 22 of the instructions) . . . . .	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► [ ]		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010) . . . . .	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? . . . . .	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5 a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . . . . .				
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .				
(3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . .				
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) . . . . .				
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .				
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5 b	X
Organizations relying on a current notice regarding disaster assistance check here . . . . . ► <input type="checkbox"/>				
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d)				
6 a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6 b	X
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			
If "Yes" to 6b, file Form 8870				
7 a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7 b	
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 12		335,675.	20,764.	-0-
-----				
-----				
-----				
-----				

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 13		348,424.	48,134.	0.
-----				
-----				
-----				
-----				
-----				

Total number of other employees paid over \$50,000 . . . . . ► 5

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ATTACHMENT 14		290,346.
Total number of others receiving over \$50,000 for professional services . . . . . ►		NONE

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 AMERICAN HISTORY TEACHER TRAINING		3,422,976.
2 AMERICAN HISTORY SCHOOLS AND RELATED PROGRAMS		1,730,380.
3 AMERICAN HISTORY SCHOOL AND EDUCATIONAL RESOURCES		1,370,280.
4 EXHIBITION OF MUSEUM AND OTHER PUBLIC PROGRAMS		625,466.

**Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE		
2		
All other program-related investments. See page 24 of the instructions		
3 NONE		
<b>Total. Add lines 1 through 3 . . . . . ►</b>		

**Part X Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see page 24 of the instructions)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	
b Average of monthly cash balances	1b	2,951,801.
c Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d Total (add lines 1a, b, and c)	1d	2,951,801.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,951,801.
4 Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	44,277.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,907,524.
6 Minimum investment return. Enter 5% of line 5	6	145,376.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ►  and do not complete this part)

1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2010 from Part VI, line 5	2a	
b Income tax for 2010 (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see page 25 of the instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	

**Part XII Qualifying Distributions** (see page 25 of the instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	8,257,455.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	0.
b Cash distribution test (attach the required schedule)	3b	0.
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	8,257,455.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	94.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,257,361.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income (see page 26 of the instructions)**

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7 . . . . .				
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only . . . . .				
b Total for prior years 20____20____20____				
3 Excess distributions carryover, if any, to 2010				
a From 2005 . . . . .				
b From 2006 . . . . .				
c From 2007 . . . . .				
d From 2008 . . . . .				
e From 2009 . . . . .				
f Total of lines 3a through e . . . . .				
4 Qualifying distributions for 2010 from Part XII, line 4 ► \$ 8,257,455.				
a Applied to 2009, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .				
d Applied to 2010 distributable amount . . . . .				
e Remaining amount distributed out of corpus . . . . .				
5 Excess distributions carryover applied to 2010 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions . . . . .				
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions . . . . .				
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011 . . . . .				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .				
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a . . . . .				
10 Analysis of line 9				
a Excess from 2006 . . . . .				
b Excess from 2007 . . . . .				
c Excess from 2008 . . . . .				
d Excess from 2009 . . . . .				
e Excess from 2010 . . . . .				

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

1 a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling				► 05/03/1995	
b	Check box to indicate whether the foundation is a private operating foundation described in section				<input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)	
2 a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
	Tax year	Prior 3 years			(e) Total	
	(a) 2010	(b) 2009	(c) 2008	(d) 2007		
	9,403.	68,594.	113,815.	74,886.	266,698.	
b	85% of line 2a	7,993.	58,305.	96,743.	226,694.	
c	Qualifying distributions from Part XII, line 4 for each year listed				8,257,455.	
d	Amounts included in line 2c not used directly for active conduct of exempt activities				1,030.	
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				8,256,425.	
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test - enter					
	(1) Value of all assets				0.	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				0.	
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					96,917.
c	"Support" alternative test - enter					139,702.
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				0.	
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)				0.	
	(3) Largest amount of support from an exempt organization				0.	
	(4) Gross investment income				0.	

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ATTACHMENT 15				
<b>Total</b> . . . . .			► 3a	1,030.
<i>b Approved for future payment</i>				
<b>Total</b> . . . . .			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue						
a EDUCATIONAL SERVICES						2,405,270.
b EDUCATIONAL RESOURCES						100,477.
c						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments				14		9,403.
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income				18		-13,074.
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a						
b ROYALTIES & PERMISSIONS				15		5,391.
c						
d						
e						
12 Subtotal Add columns (b), (d), and (e)					1,720.	2,505,747.
13 Total. Add line 12, columns (b), (d), and (e)					13	2,507,467.

(See worksheet in line 13 instructions on page 29 to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions )
1A	EDUCATIONAL SERVICES, EDUCATIONAL RESOURCES &
1B	MISCELLANEOUS.
1B	INCOME USED IN THE FURTHERANCE OF THE INSTITUTE EXEMPT
1B	PURPOSE.

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . .  Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign  
Here

Signature of officer or trustee

Pa

>Title

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>JAMES J. REILLY</b>	Preparer's signature 	Date <b>NOV 08 2011</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00183769</b>
	Firm's name ► CONDON O'MEARA MCGINTY & DONNELLY L	Firm's EIN ► 13-3628255			
	Firm's address ► ONE BATTERY PARK PLAZA NEW YORK, NY	10004-1405	Phone no. 212-661-7777		

► Attach to Form 990, 990-EZ, or 990-PF.

**2010**

Name of the organization

THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORY

Employer identification number

13-3795391

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year. . . . . ► \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	A & E TELEVISION NETWORKS 235 EAST 45TH STREET NEW YORK, NY 10017	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
2	THE ALLWIN FAMILY FOUNDATION 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
3	THE ARMSTRONG FOUNDATION PO DROWER 2299 NATCHEZ, MS 39121	\$ 11,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
4	BAXTER, AMBASSADOR FRANK & KATHY 11100 SANTA MONICA BLVD, 11TH FLOOR LOS ANGELES, CA 90025-3384	\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
5	BRADLEY FOUNDATION, THE LYNDE & HARRY 1241 NORTH FRANKLIN PLACE MILWAUKEE, WI 53203	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
6	CADER, ANDREW 30 HUDSON STREET, 10TH FLOOR JERSEY CITY, NJ 07302	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
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13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	THE CHARLES & ANN JOHNSON FOUNDATION ONE FRANKLIN PARKWAY SAN MATEO, CA 94403	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
8	THE RICHARD L. CHILTON, JR. 300 PARK AVENUE, 19TH FLOOR NEW YORK, NY 10022	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
9	DEV CHODRY 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
10	LOIS & VIRGINIA CLEMENTE FOUNDATION 64 BURNING TREE ROAD GREENWICH, CT 06830	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
11	CURRY FOUNDATION 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
12	HUGH & HAZEL DARLING FOUNDATION 520 SOUTH GRAND AVENUE LOS ANGELES, CA 90071	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	DENICOLA, ANTHONY & CHRISTIE 320 PARK AVENUE, SUITE 2500 NEW YORK, NY 10022	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
14	DIAN GRAVES OWEN FOUNDATION 400 PINE STREET, SUITE 1000 ABILENE, TX 79601	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
15	THE EARHART FOUNDATION 2200 GREEN ROAD, SUITE 1000 ABILENE, TX 79601	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
16	ED UIHLEIN FAMILY FOUNDATION 1396 NORTH WAUKEGAN ROAD LAKE FOREST, IL 60045	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
17	F.M. KIRBY FOUNDATION 17 DEHART STREET, P.O. BOX 151 MORRISTOWN, NJ 07963	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
18	ANDREW & WENDY FENTRESS 375 PARK AVENUE, SUITE 3304 NEW YORK, NY 10152	\$ 13,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	MICHAEL J. FOURTICO, SR. 1880 CENTURY PARKEAST LOS ANGELES, CA 90067	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
20	GABY FOUNDATION 3870 PEACHTREE INDUSTRIAL BLVD, STE 150 DULUTH, GA 30096	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
21	GEDULD COUGAR FOUNDATION 1370 AVENUE OF THE AMERICAS NEW YORK, NY 10019	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
22	GILDER FOUNDATION 3 COLUMBUS CIRCLE NEW YORK, NY 10019	\$ 3,440,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
23	KENNETH B. GILMAN & CAROL FEINBERG 19 WEST 44TH STREET, SYUITE 500 NEW YORK, NY 10036	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
24	THE CHARLES HAYDEN FOUNDATION 140 BROADWAY, 51ST FLOOR NEW YORK, NY 10005	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	LESLEY & RICHARD HERRMANN 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
26	THE HERTOG FOUNDATION 745 FIFTH AVENUE, 14TH FL., SUITE 1400 NEW YORK, NY 10151	\$ 50,304.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
27	MELINDA & JEFFREY HILDEBRAND 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
28	CHARLENE AND DAVID HOWE FOUNDATION 1775 BROADWAY NEW YORK, NY 10018	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
29	JM FOUNDATION 116 VILLAGE BLVD, SUITE 200 PRINCETON, NJ 08540	\$ 12,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
30	JAMES, VIRGINIA 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

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13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	THE THOMAS D. KLINGENSTEIN FUND 335 WEST 52ND STREET NEW YORK, NY 10019	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
32	FRED & MARY KOCH FOUNDATION 4111 EAST 37TH STREET NORTH WICHITA, KS 67220	\$ 78,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
33	SIDNEY & RUTH LAPIDUS 466 LEXINGTON AVENUE NEW YORK, NY 10017	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
34	LEHRMAN INSTITUTE ONE FAWCETT PLACE, SUITE 130 GREENWICH, CT 06830	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
35	MARTIN R. LEWIS 50 MADISON AVENUE NEW YORK, NY 10010	\$ 8,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
36	MALKIN FUND 60 EAST 42ND STREET NEW YORK, NY 10165	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	MANHATTAN INSTITUTE FOR POLICY RESEARCH 52 VANDERBILT AVENUE NEW YORK, NY 10017	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
38	MARY ALICE FORTIN FOUNDATION 201 CHILEAN AVENUE PALM BEACH, FL 33480	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
39	MAYTAG FAMILY FOUNDATION PO BOX 366 NEWTOWN, IA 50208	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
40	MCCORMICK FAMILY FOUNDATION 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
41	MCINERNEY FAMILY FOUNDATION 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
42	THE RISING PHOENIX FOUNDATION, INC. 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43	THE RIZAVI FRIEDLAND FOUNDATION 1775 BROADWAY NEW YORK, NY 10019	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
44	MARY & ALEX ROSS 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 14,450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
45	NATIONAL ENDOWMENT FOR THE HUMANITIES 1100 PENNSYLVANIA, NW WASHINGTON, DC 20506	\$ 388,835.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
46	PENNSYLVANIA FUND 1 TOWER BRIDGE 100 FRONT STREET #900 WEST CONSHOHOCKEN, PA 19428	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
47	CECELIA PLATNICK 9901 DONNA KLINE BLVD BOCA RATON, FL 33428	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
48	RHODEBECK CHARITABLE TRUST 260 MADISON AVENUE NEW YORK, NY 10016	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
49	MARVIN SCHWARTZ 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
50	SELECT EQUITY GROUP FOUNDATION 380 LAFAYETTE STREET NEW YORK, NY 10003	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
51	SINGER, PAUL 715 5TH AVENUE NEW YORK, NY 10019	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
52	GORDON V. SMITH FOUNDATION 19 WEST 44TH STREET NEW YORK, NY 10036	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
53	THOMAS W. SMITH FOUNDATION 323 RAILROAD AVENUE GREENWICH, CT 06830	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
54	SPRAGUE EDUCATIONAL FOUNDATION C/O BANK OF AMERICA 1 BRYANT PARK NEW YORK, NY 10036	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
55	JAMES G. BASKER 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 116,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
56	BAY AND PAUL FOUNDATION, INC 17 WEST 94TH STREET, 1ST FLOOR NEW YORK, NY 10025	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
57	BLOOMBERG LP 731 LEXINGTON AVENUE NEW YORK, NY 10022	\$ 225,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
58	COW CREEK UMPQUA INDIAN FOUNDATION 2371 NE STEPHENS STREET, STE. 100 ROSEBURG, OR 97470	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
59	DAVID CUMING 22 EAST 88TH STREET NEW YORK, NY 10128	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
60	J.T. STEPHENS, JR. 111 CENTER STREET, SUITE 1616 LITTLE ROCK, AR 72201	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
61	ALICE & THOMAS TISCH FOUNDATION 575 MADISON AVENUE NEW YORK, NY 10022	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
62	WOODRUFF CHARITABLE GIFT FUND PO BOX 55158 BOSTON, MA 02205	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
63	POHANKA FAMILY FOUNDATION 4601 DY. BARNABAS ROAD MARLOW HEIGHTS, MD 20748	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
64	THOMAS C. QUICK 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
65	CONTRIBUTIONS LESS 5,000	\$ 259,608.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
66	LOUIS CALDER FOUNDATION 175 ELM STREET NEW CANAAN, CT 06840	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

Name of organization THE GILDER LEHRMAN INSTITUTE  
OF AMERICAN HISTORYEmployer identification number  
13-3795391**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
67	SEAN FIELER 19 WEST 44TH STREET, SUITE 500 NEW YORK, NY 10036	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
INTEREST INCOME	9,403.	9,403.	9,403.
TOTAL	<u><u>9,403.</u></u>	<u><u>9,403.</u></u>	<u><u>9,403.</u></u>

ATTACHMENT 2FORM 990-PF, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
GROSS SALES	241,377.
TOTAL	<u>241,377.</u>

FORM 990PF, PART I - OTHER INCOME

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>
EDUCATIONAL SERVICES	<u>2,264,369.</u>
OTHER INCOME	<u>5,391.</u>
<b>TOTALS</b>	<b><u>2,269,760.</u></b>

ATTACHMENT 4FORM 990PF, PART I - LEGAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
SIMPSON THACHER & BARTLETT LLP - LEGAL FEES	5,973.		6,910.	
TOTALS	<u>5,973.</u>	<u>0.</u>	<u>0.</u>	<u>6,910.</u>

ATTACHMENT 5FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
CONDON O'MEARA MCGINTY & DONNELLY LLP - AUDIT FEES	15,500.			15,500.
DEMASCO, SENA & JAHELKA - ACCOUNTING FEES	8,650.			8,650.
<b>TOTALS</b>	<b><u>24,150.</u></b>	<b><u>0.</u></b>	<b><u>0.</u></b>	<b><u>24,150.</u></b>

ATTACHMENT 6FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>CHARITABLE PURPOSES</u>
MARY CASLIN ROSS - EXECUTIVE FUNDRAISING CONSULTANT	290,346.	290,346.
COMPUTER CONSULTING AND OTHER PROFESSIONAL FEES	26,728.	23,828.
ENDOWMENT EXPENSE	1,664.	
TOTALS	<u>318,738.</u>	<u>314,174.</u>

ATTACHMENT 7

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>CHARITABLE PURPOSES</u>
PAYROLL TAXES	138,247.	138,247.
TOTALS		<u>138,247.</u>

## FORM 990PE, PART I - OTHER EXPENSES

## REVENUE

AND

EXPENSES  
PER BOOKS4,957,924.

<u>DESCRIPTION</u>	<u>EDUCATIONAL PROGRAMS &amp; PROJECTS</u>	<u>FUNDRAISING</u>	<u>OFFICE EXPENSES</u>	<u>INSURANCE</u>	<u>POSTAGE &amp; DELIVERIES</u>	<u>COMPUTER EXPENSES</u>	<u>TELEPHONE</u>	<u>EQUIPMENT RENTAL</u>	<u>SUPPLIES</u>	<u>ADVERTISING &amp; PROMOTION</u>	<u>REFERENCE MATERIALS</u>	<u>DUES &amp; SUBSCRIPTIONS</u>	<u>GLI WEBSITE</u>	<u>LICENSES &amp; PERMITS</u>	<u>PAYROLL PROCESSING FEES</u>	<u>TOTALS</u>	<u>5,625,150.</u>	<u>5,540,811.</u>
REVENUE AND EXPENSES <u>PER BOOKS</u>	<u>4,957,924.</u>	326,984.	16,312.	28,105.	14,875.	18,817.	17,256.	14,264.	11,291.	1,693.	10,932.	1,725.	198,001.	848.	6,123.			
CHARITABLE PURPOSES		326,984.	16,312.	28,105.	14,875.	18,817.	17,256.	14,264.	11,291.	1,693.	10,932.	1,725.	198,001.	848.	6,123.			

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

SEE ATTACHEMENT

TOTALS

BOOK VALUE

427,104.

427,104.

ENDING  
FMV

427,104.

427,104.

ATTACHMENT 9

FORM 990PF, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>BOOK VALUE</u>	<u>ENDING FMV</u>
SECURITY DEPOSITS	55,311.	55,311.
TOTALS	<u>55,311.</u>	<u>55,311.</u>

ATTACHMENT 10ENDING  
FMV

55,311.

55,311.

ATTACHMENT 11FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
UNREALIZED GAIN ON INVESTMENTS	1,101.
TOTAL	<u>1,101.</u>

## THE GILDER LEHRMAN INSTITUTE

## FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

13-3795391

ATTACHMENT 12

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	CONTRIBUTIONS		
		COMPENSATION	TO EMPLOYEE	BENEFIT PLANS
JAMES G. BASKER 19 WEST 44TH STREET 500 NEW YORK, NY 10036	PRESIDENT	120,000.		
LESLEY S. HERRMANN 19 WEST 44TH STREET 500 NEW YORK, NY 10036	EXECUTIVE DIRECTOR	215,675.	20,764.	
RICHARD GILDER 19 WEST 44TH STREET 500 NEW YORK, NY 10036	TREASURER & EXECUTIVE V.P.	0.	0.	0.
LEWIS E. LEHRMAN 19 WEST 44TH STREET 500 NEW YORK, NY 10036	EXECUTIVE VICE PRESIDENT	0.	0.	0.
DANIEL P. JORDAN 19 WEST 44TH STREET 500 NEW YORK, NY 10036	BOARD MEMBER	0.	0.	0.

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION			COMPENSATION
	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS			
JOHN L. NAU, III 119 WEST 44TH STREET 500 NEW YORK, NY 10036	BOARD MEMBER	0.	0.	
MARY JO CLAUGUS 119 WEST 44TH STREET 500 NEW YORK, NY 10036	BOARD MEMBER	0.	0.	
	GRAND TOTALS			
		335,675.	20,764.	

JOHN L. NAU, III  
119 WEST 44TH STREET  
500  
NEW YORK, NY 10036

MARY JO CLAUGUS  
119 WEST 44TH STREET  
500  
NEW YORK, NY 10036

## 990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES</u>	<u>ATTACHMENT 13</u>
SUSAN SAIDENBERG C/O THE INSTITUTE 19 WEST 44TH STREET NEW YORK, NY 10036	PROGRAM DIRECTOR 32.00	80,769.	18,912.	0.
KATE R. SMITH C/O THE INSTITUTE 19 WEST 44TH STREET NEW YORK, NY 10036	FINANCE DIRECTOR 40.00	71,807.	4,560.	0.
ANTHONY NAPOLI C/O THE INSTITUTE 19 WEST 44TH STREET NEW YORK, NY 10036	PROGRAM DIRECTOR 40.00	66,826.	9,344.	0.
JUSTINE AHLSTROM C/O THE INSTITUTE 19 WEST 44TH STREET NEW YORK, NY 10036	PROGRAM DIRECTOR 40.00	66,459.	3,802.	0.
SASHA R. PEREIRA C/O THE INSTITUTE 19 WEST 44TH STREET NEW YORK, NY 10036	PROGRAM DIRECTOR 40.00	62,563.	11,516.	0.
	TOTAL COMPENSATION	<u>348,424.</u>	<u>48,134.</u>	<u>0.</u>

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALSATTACHMENT 14

<u>NAME AND ADDRESS</u>	<u>TYPE OF SERVICE</u>	<u>COMPENSATION</u>
MARY CASLIN ROSS 6 VISTA DEL CERRO SANTA FE, NM 87508 EXECUTIVE FUNDRAISING CONSULTANT		290,346.
	TOTAL COMPENSATION	<u>290,346.</u>

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

<u>RECIPIENT NAME AND ADDRESS</u>		<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
NATIONAL COALITION FOR HISTORY ATTN. LEE WHITE 400 A STREET SE WASHINGTON, DC 20003				
			TOTAL CONTRIBUTIONS PAID	<u><u>1,030.</u></u>

ATTACHMENT 15

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis			
408,017.			PUBLICALLY TRADED SECURITIES PROPERTY TYPE: SECURITIES 421,081.			P	-13,064.	
TOTAL GAIN(LOSS) .....							<u>-13,064.</u>	