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## Form **990**

DINZZA

May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2010

Open to Public Inspection

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

A For the 2010 calendar year, or tax year beginning ОСТ 2010 and ending SEP 30, 2011 C Name of organization D Employer identification number Check if applicable AMERICAN INDIAN HIGHER EDUCATION Address change CONSORTIUM, INC. Name change 84-0640326 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/surte E Telephone number Termin 121 ORONOCO ST. 703-838-0400 Amended return 2,855,324. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending ALEXANDRIA, VA 22314-2015 H(a) Is this a group return F Name and address of principal officer CARRIE BILLY for affiliates? Yes X No SAME AS C ABOVE H(b) Are all affiliates included? 501(c) ( 4947(a)(1) or I Tax-exempt status: X 501(c)(3) ) ◀ (insert no.) If "No," attach a list (see instructions) J Website: ► WWW.AIHEC.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1975 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities  $\ SEE\ PART\ III$  , LINE 1. Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 33 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 16 33 Total number of volunteers (estimate if necessary) 6 294,214. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** 3,644,941 1,726,869. Contributions and grants (Part VIII, line 1h) Revenue 1,057,588. Program service revenue (Part VIII-line 2g) 1,077,553. Investment income (Part VIII, column (Alines 3,14) and 70) 4,033 1,812. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 58,616 49,090. 11 Total revenue - add line through the fourth (nust equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,765,178 2,855,324. 12 520,988 536,387. Benefits paid to or for members (Part-IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,252,932 334,536. 16a Professional fundraising fees (Part IX, column (A), line-1.1e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,433,643 1,273,824. 3,207,563 3,144,747. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,557,615 -289,423. Revenue less expenses Subtract line 18 from line 12 P **Beginning of Current Year End of Year** 3,777,758 4,109,438. 20 Total assets (Part X, line 16) ,655,263 21 Total liabilities (Part X, line 26) 1,018,612 Net assets or fund balances Subtract line 21 from line 20 454,175 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 8,15,201 Signature of officer Sign PRESIDENT AND CEO CARRIE BILLY, Type or print name and title Date 8-7 Preparer's signature Print/Type preparer's name F. GRALING Paid self employed Preparer ► GELMAN, ROSENBERG & FREEDMAN Firm's EIN Use Only Firm's address ▲ 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930 Phone no. (301) 951-9090

No

X Yes

_	n 990 (2010) CONSORTIUM, INC. 84-064	<u> 10326</u>	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission		
	AIHEC IS THE COLLECTIVE SPIRIT AND UNIFYING VOICE OF OUR NATIO	N'S	
	TRIBAL COLLEGES AND UNIVERSITIES (TCUS). AIHEC PROVIDES LEADER	RSHIP	AND
	INFLUENCES PUBLIC POLICY ON AMERICAN INDIAN HIGHER EDUCATION I	SSUES	_
	THROUGH ADVOCACY, RESEARCH, AND PROGRAM INITIATIVES; PROMOTES	AND	
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	X No
	If "Yes," describe these new services on Schedule O		
_	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	□v <sub>aa</sub>	X No
3		L 162	LAL 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			)
	BIA TECHNICAL ASSISTANCE: DISTRIBUTE TIMELY AND ACCURATE INFOR		N ON
	PENDING FEDERAL LEGISLATIVE AND APPROPRIATIONS MATTERS OF DIRE	ECT	
	RELEVANCE TO TCUS AND INDENTIFY FEDERAL AGENCY RESOURCES AVAIL	ABLE	TO
	TCUS. ARRANGE MEETINGS THAT PROVIDE NETWORKING OPPORTUNITIES F	OR	
	DISTRIBUTING AND EXCHANGING INFORMATION AND BEST PRACTICES. CO	ORDIN	ATE
	THE COLLECTION AND ANALYSIS OF IMPORTANT DATA FOR ALL TCUS THE	ROUGH	
	AIHEC'S AMERICAN INDIAN MEASURES FOR STUDENT SUCCESS (AIHEC-AI	MS) D	ATA
	COLLECTION INITIATIVE. DEVELOP AND STRENGTHEN PARTNERSHIP WITH		<del></del>
	FEDERAL AGENCIES. PROVISION OF TECHNICAL ASSISTANCE AND SUPPOR		
	PARTICIPATION IN FEDERAL LAND GRANT PROGRAMS AND PARTNERSHIP		
	OPPORTUNITIES BY THE 1994 INSTITUTIONS (TCU LAND GRANTS); AND	Δ RAN	GE
	OF OTHER SUPPORT AND PROFESSIONAL DEVELOPMENT ACTIVITIES.	21 1(1111	0.0
4b	402 055		,
40	WAL-MART MSI STRATEGIES FOR SUCCESS: THIS PROGRAM SERVES SIX T	ירוופ ש	<u> </u>
	WALL-MART MST STRATEGIES FOR SUCCESS. THIS PROGRAM SERVES SIX IN WORK TOGETHER WITH HISPANIC SERVING INSTITUTIONS AND HISTORICA		
			LIACK
	COLLEGES AND UNIVERSITIES TO IDENTIFY, AND SUPPORT EACH OTHER	T.1/	
	ADOPTING, EMPIRICALLY-BASED METHODOLOGIES WITH DEMONSTRATED	1 OF	
	EFFECTIVENESS IN INCREASING THE RETENTION AND GRADUATION RATES	OF	
	STUDENTS ENROLLED IN TCUS.		
		<del></del>	
4c	(Code) (Expenses \$396, 914. including grants of \$) (Revenue \$	<u>392,</u>	<u> 125.</u> )
	AIHEC-TRIBAL COLLEGE JOURNAL (TCJ): THE AMERICAN INDIAN HIGHER		
	EDUCATION CONSORTIUM'S TRIBAL COLLEGE JOUNAL PROVIDES INFORMAT	<u>NONOI'</u>	ON
	A WIDE RANGE OF AMERICAN INDIAN HIGHER EDUCATION ISSUES FOUR T	IMES	PER
	YEAR IN A PRINT PUBLICATION AND CONTINOUSLY VIA THE INTERNET.	THROU	GH
	FEATURE ARTICLES, COLUMNS, AND OTHER RESOURCES, THE CULTURALLY-	BASED	
	AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM'S TRIBAL COLLEGE J		
	ADDRESSES SUBJECTS IMPORTANT TO THE FUTURE OF AMERICAN INDIAN		
	ALASKA NATIVE TRIBAL NATIONS AND HAS BECOME A FORUM FOR TRIBAL		FGF
	STAFF, FACULTY, AND STUDENTS TO DISCUSS THEIR NEEDS, SUCCESSES		<u> </u>
		) WIND	
	MISSIONS.		
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 1,155,416. including grants of \$ 236,387.) (Revenue \$ 685,428.)		
<u>4e</u>	Total program service expenses ► 2,504,176.		
		Ω(	90 (2010)

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Form 990 (2010) CONSORTIUM, INC.

• 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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_		Х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	N/	Α
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		X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		7.	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		X
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	Α_
f		110	- 23	
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
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	Х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			Ì
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			۹,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا		\ <b>.</b> ,
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
D	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		
.—	operate one or more nospitals most attach addited infancial statements (see instructions)		990 (	2010
		. 01111	550 (	_010)

		Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		l	
United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part I	ıx,		
column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	t		
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
Schedule J	23	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	ne		
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
Schedule K If "No", go to line 25	24a		Х
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	<b>-</b>	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u></u>	
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	<u> </u>	X
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	051		
Schedule L, Part I  26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqua	25b		X
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		Λ
contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
Schedule L, Part III	27		х
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		х
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			Х
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office	cer,		
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
contributions? If "Yes," complete Schedule M	30	ļ	X
31 Did the organization liquidate, terminate, or dissolve and cease operations?			
If "Yes," complete Schedule N, Part I	31		X
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
Schedule N, Part II	32		X
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		v
sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity?	33_		X
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	24		v
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34 35		X
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			
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organizations.			
If "Yes," complete Schedule R, Part V, line 2	36		х
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 3		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
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	Х	
	Form	990 (	2010)

Form 990 (2010) CONSORTIUM, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c	х	
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 16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
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		X
b	If "Yes," enter the name of the foreign country			
	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		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		_X_
С	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		Х
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).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	.7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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 N/A			
_	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?  N/A  Did the organization make a distribution to a donor, donor advisor, or related person?  N/A	9a		
10		9b	···	
10 a	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  N/A  10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
b 11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		.	
-	amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
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			
С	Enter the amount of reserves on hand			L.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990 (	2010)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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			X
Sec	tion 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 33			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 33			
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_		X
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		<u>X</u> _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	D. H. J.		Yes	No_
	Does the organization have local chapters, branches, or affiliates?	10a		X
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44-	and branches to ensure their operations are consistent with those of the organization?	10b	v	
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	X	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	120	x	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12a		
D	to conflicts?	12b	x	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b		X
	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		1	
	taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CO , VA			
18	Section 6104 requires an organization to make its Forms 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 X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, are	d fına	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion. 🕨	·	<u>-</u> -
	TINA COOPER - 703-838-0400			
	121 ORONOCO STREET, ALEXANDRIA, VA 22314-2015			
		Earm	agn /	20101

032008 12-21-10 Form **990** (2010)

### 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

### 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. 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

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

- 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

(A) Name and Title	(B) Average			(C Pos	C)			(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week (describe hours for related	or director	heck		that	арр		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization
	organizations in Schedule O)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(**-271099-141130)		and related organizations
DAVID YARLOTT, JR. PRESIDENT / CHAIR OF THE BOARD	5.00	x		х				0.	0.	0.
LAUREL VERMILLION										•
VICE-CHAIR OF THE BOARD	5.00	X	<u> </u>	X				0.	0.	0.
JAMES SHANLEY										
TREASURER	5.00	X		X				0.	0.	0.
ROBERT MARTIN							İ			
SECRETARY	5.00	X	ļ	Х			ļ	0.	0.	0.
CHERYL CRAZY BULL										
MEMBER-AT-LARGE	5.00	X	<u> </u>	X	ļ	<u> </u>	L.	0.	0.	0.
CAROLE FALCON-CHANDLER				ŀ				_		
BOARD MEMBER	2.50	X						0.	0.	0.
MICHAEL PARISH										
BOARD MEMBER	2.50	X	ļ	<u> </u>	<u> </u>	<u> </u>	ļ	0.	0.	0.
BILLIE JO KIPP										
BOARD MEMBER	2.50	X	<u> </u>	_		<u> </u>	<del> </del>	0.	0.	0.
CYNTHIA LINDQUIST	2 50									
BOARD MEMBER	2.50	X	-	_		<u> </u>	_	0.	0.	0.
RICHARD LITTLEBEAR	2 50	1,,	ŀ							_
BOARD MEMBER	2.50	A	-					0.	0.	0.
VERNA FOWLER	2 50	7.7			İ					_
BOARD MEMBER	2.50	^	-					0.	0.	0.
MAGGIE GEORGE	2.50	\ <b>v</b>						0.	0.	0.
BOARD MEMBER	2.50	╁≏	╁		-		$\vdash$	0.	<u> </u>	<u> </u>
LARRY ANDERSON	2.50	v					-	0.	0.	0.
BOARD MEMBER	2.30	<u>^</u>		┢		<del> </del>	-	0.	<u> </u>	<u> </u>
RUSSELL MASON	2.50	\v_						0.	0.	0.
BOARD MEMBER	2.50	<del>  ^</del>	-					- 0.	- 0.	0.
CHRIS REDMAN BOARD MEMBER	2.50	$ _{\mathbf{x}}$				1		0.	0.	0.
BROOKE GONDARA	2.30	1	$\dagger$		-	<del>                                     </del>	<del>                                     </del>	·		<u>_</u>
BOARD MEMBER	2.50	$ \mathbf{x} $						0.	0.	0.
DEBRA J. PARRISH	1 2.30	†					1			
BOARD MEMBER	2.50	x						0.	0.	0.
032007 12-21-10			•	•	•	•	•			Form <b>990</b> (2010)

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(A) Name and title	(B) Average hours per	(C) Position (check all that apply					oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
RAY BURNS							i			
BOARD MEMBER	2.50	X				L.	ļ	0.	0.	0.
GINNY CARNEY									_	_
BOARD MEMBER	2.50	X			_	<u> </u>		0.	0.	0.
PAUL ROBERTSON										
BOARD MEMBER	2.50	X	_		-	<del> </del> -		0.	0.	0.
ELMER GUY	2 - 6	۱.,								
BOARD MEMBER	2.50	X				$\vdash$	_	0.	0.	0.
MICHEAL OLTROGGE	2 50	٠,,							•	
BOARD MEMBER	2.50	X					<u> </u>	0.	0.	0.
THOMAS SHORTBULL	2 50	<b></b>			1				0	
BOARD MEMBER	2.50	X						0.	0.	0.
CARLA SINEWAY BOARD MEMBER	2.50	X						0.	0.	0.
LUANA ROSS	2.30					<b></b> -			0.	
BOARD MEMBER	2.50	x						0.	0.	0.
LIONEL BORDEAUX										
BOARD MEMBER	2.50	х						0.	0.	0.
1b Sub-total		•				▶		0.	0.	0.
c Total from continuation sheets to Part VI	I, Section A					<b>&gt;</b>		484,885.	0.	49,997.
d Total (add lines 1b and 1c)						▶		484,885.	0.	49,997.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wł	no re	eceived more than \$100,	,000 in reportable	
compensation from the organization							-	· - <u>-</u>	··-	3
										Yes No
3 Did the organization list any former officer,		stee	, key	em/	ploy	yee,	or h	iighest compensated em	nployee on	
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the su									he organization	
and related organizations greater than \$150			•							4 X
5 Did any person listed on line 1a receive or a							elate	ed organization or individ	dual for services	
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ich j	oers	on		<del>,</del>	·	5 X
Section B. Independent Contractors  1 Complete this table for your five highest co	mponested in	dono	ndo	nt o	ontr	ooto		hat recovered more than 6	1100 000 of compose	
the organization	Imperisated int	rebe	nue	111 0	Omi	acic	,, s ti		\$100,000 or compens	auon from
(A) Name and business	address							(B) Description of se	ervices C	(C) compensation
IDEATECH ASSOCIATES, INC.							寸			
820 GIBBON STREET,, ALEXANDRIA, VA 22314 IT & WEB SUPPORT								PORT	105,558.	
	_									
							-			<del></del>
2 Total number of independent contractors (i	ncluding but n	ot lır	mited	d to	thos	se lis	sted	above) who received me	ore than	·
\$100,000 in compensation from the organiz	zation 🕨				1	L				

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2010)

CONSORTIUM, INC.

84-0640326

Part VII Section A. Officers, Directors, Tru		npic	yee			ııgn	est			(E)
(A)	(B)			(C Posi				(D)	(E)	(F)
Name and title	Average hours	(6)		call t			lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per		T			l 		from	from related	other
	week					yee		the	organizations	compensation
		ector				8		organization	(W-2/1099-MISC)	from the
		P P	, s			ated		(W-2/1099-MISC)		organization
		ustee	trust		8	bens				and related
		inal tr	tonal		ıploy	15 E	_			organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ELDEN LAWRENCE										
BOARD MEMBER	2.50	X				L		0.	0.	0
SHERRY ALLISON			İ	l						
BOARD MEMBER	2.50	X						0.	0.	0 .
MELODY HENRY										
BOARD MEMBER	2.50	X	Ĺ					0.	0.	0.
JAMES VANDER HOOVEN										
BOARD MEMBER	2.50	X						0.	0.	0
JAMES DAVIS										
BOARD MEMBER	2.50	X	<u> </u>					0.	0.	0 .
DAVID GIPP								_	_	
BOARD MEMBER	2.50	X						0.	0.	0 .
WANNETTA BENNET									_	_
BOARD MEMBER	2.50	X	<u> </u>					0.	0.	0,
CARRIE BILLY	50.00							040 040		
PRESIDENT & CEO	50.00			Х				212,812.	0.	21,574.
MARY GOETZ	FA 00							125 445		10 115
VICE PRESIDENT, ADVOCACY	50.00	_		Х				135,447.	0.	18,415
TINA COOPER	50.00			х				136,626.	0.	10 000
DIRECTOR OF FINANCE AND ADMINISTRATI	30.00			Δ				130,020.	0.	10,008.
						ļ.—				
			_							
		-								
		-	_	_						
			<u> </u>	-						
							<u> </u>			·
Total to Part VII, Section A, line 1c								484,885.		49,997

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	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
and other similar amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	ts, and	1355330.				
nd ot	_	Noncash contributions included in lines			1726060			
10	<u>h</u>	Total. Add lines 1a-1f		<b>•</b>	1726869.			
- 1				Business Code				
: 1	2 a	MEMBERSHIP DUES	<u> </u>	900099	685,428.	685,428.		
	b	TRIBAL COLLEGE	JOURNAL	541800	364,257.	97,911.	266,346.	
Ž	С	ONLINE JOB POST		541800	27,868.		27,868.	
8	d					*	2,,000	
Revenue	•					· · · · ·		
	4	All other program service reve					·	
	f	• •	enue		1077552			
$\dashv$		Total. Add lines 2a-2f			1077553.			
	3	Investment income (including	dividends, inter		4 040			4 040
		other similar amounts)		▶	1,812.			1,812
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties		<b></b>	224.			224
			(i) Real	(II) Personal				
ļ	6 a	Gross Rents						
	b	Less rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)	L	<b>—</b>				
		· · ·	() ()	<del></del>				-
	/ a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
İ	b	Less cost or other basis						
		and sales expenses						
-	С	Gain or (loss)			,			
İ	d	Net gain or (loss)		<b></b>				·
Otner Revenue	8 a	Gross income from fundraisin including \$	g events (not of					
۱		contributions reported on line	1c) See					
<u> </u>		Part IV, line 18	а					
L L	h	Less direct expenses	b					
<b>&gt;</b>		Net income or (loss) from fund	-	<b>•</b>				
		Gross income from gaming ac	=					
	эа							
		Part IV, line 19	a					
		Less direct expenses	b					
-		Net income or (loss) from gam	=	<b>D</b>				
	10 a	Gross sales of inventory, less	returns					
		and allowances .	а					
	b	Less cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory	<u></u>				
Γ		Miscellaneous Revenu		Business Code				
r	11 a	A		900099	43,333.			43.333
		REIMBURSEMENTS		900099	5,533.			43,333 5,533
1		TELEBOTOBREHIE		700077	3,333.			3,333
	С.	All sales as assessed		}				
	d	All other revenue			40.000			<del></del> -
	_	Total. Add lines 11a-11d		<b>&gt;</b>	48,866.	700 000		
	12	Total revenue. See instructions.		<b>&gt;</b>	2855324.	783,339.	294,214.	50,902

Part IX | Statement of Functional Expenses

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

Do	All other organizations must composit include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	536,387.	536,387.		
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	485,543.	135,504.	350,039.	••••
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages	653,337.	597,287.	56,050.	
8	Pension plan contributions (include section 401(k)			_	
	and section 403(b) employer contributions)	31,046.	27,813.	3,233.	
9	Other employee benefits	83,588.	67,869.	15,719.	· ·,
10	Payroll taxes	81,022.	53,549.	27,473.	
1	Fees for services (non-employees)				
а	Management				
b	Legal	324.		324.	
С	Accounting	24,955.		24,955.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	400,086.	262,507.	137,579.	
12	Advertising and promotion	73,011.	73,011.		<del></del>
13	Office expenses	253,759.	182,950.	70,809.	···
14	Information technology	92,862.	85,324.	7,538.	
15	Royalties		11 155	64 550	
16	Occupancy	73,036.	11,457.	61,579.	
7	Travel	80,383.	69,881.	10,502.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	F4 000	FO 011	1 011	<del></del>
9	Conferences, conventions, and meetings	54,022.	52,811.	1,211.	-
20	Interest				
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	2 020		2 000	
23	Insurance	2,929.		2,929.	
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.)				
_	CONTRACTS	118,585.	95,273.	23,312.	
a b	EQUIPMENT AND SOFTWARE	71,188.	47,859.	23,312.	
	MISCELLANEOUS	23,988.	22,432.	1,556.	
c d	HONORARIA	4,696.	4,696.	1,550.	
	ALLOCATION OF M&G	0.	177,566.	-177,566.	<u> </u>
e f	All other expenses	<del></del>	<u> </u>	111,300.	<del> </del>
-	Total functional expenses Add lines 1 through 24f	3,144,747.	2,504,176.	640,571.	
2 <u>5</u> 26	Joint costs Check here I if following SOP	<u> </u>	<u> </u>	040/3/14	
26	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				

Form **990** (2010)

CONSORTIUM, INC.

	rt A	Dalance Sneet				
	•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,308,142.	1	1,862,360.
	2	Savings and temporary cash investments		1,219,858.	2	1,365,439.
	3	Pledges and grants receivable, net		873,770.		518,472.
	4	Accounts receivable, net	27,457.		19,153.	
	5	Receivables from current and former officers, di				
		employees, and highest compensated employee				
		of Schedule L	•		5	
	6	Receivables from other disqualified persons (as	defined under section	-		
		4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of sections				
		employees' beneficiary organizations (see instru	• • • •		6	
Assets	7	Notes and loans receivable, net	·		7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		47,596.	9	58,628.
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	•		11	
	12	Investments - other securities See Part IV, line	300,935.	12	285,386.	
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	3,777,758.	16	4,109,438.
	17	Accounts payable and accrued expenses	275,825.	17	356,024.	
	18	Grants payable			18	
	19	Deferred revenue		688,654.	19	726,708.
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	s, trustees, key employees,			
ap		highest compensated employees, and disqualifi	ed persons Complete Part II			
_		of Schedule L			22	<del></del>
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities Complete Part X of Schedule D	54,133.	25	572,531.	
	26	Total liabilities. Add lines 17 through 25		1,018,612.	26	<u>1,655,263.</u>
		Organizations that follow SFAS 117, check he	ere 🕨 💹 and complete			
ës	Ì	lines 27 through 29, and lines 33 and 34.				
auc	27	Unrestricted net assets		1,046,582.		1,118,386.
Bal	28	Temporarily restricted net assets	1,457,564.	28	1,080,789.	
pu	29	Permanently restricted net assets	255,000.	29	255,000.	
Ī		Organizations that do not follow SFAS 117, c				
ō		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
As	31	Paid in or capital surplus, or land, building, or ed			31	
let	32	Retained earnings, endowment, accumulated in	come, or other funds	0.050.115	32	0 454 455
_	33	Total net assets or fund balances		2,759,146.	33	<u>2,454,175.</u>
	34	Total liabilities and net assets/fund balances		3,777,758.	34	4,109,438.

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If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a

Consolidated basis Both consolidated and separate 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

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

Form 990 (2010)

Х За

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-15,548.

Yes

X

Х

No

 $\mathbf{X}$ 

separate basis, consolidated basis, or both

X Separate basis

Act and OMB Circular A-133?

### SCHEDULE A (Form 990 or 990-EZ)

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.

2010

Open to Public Inspection

Name of the organization

AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM, INC.

Employer identification number 84-0640326

Reason for Public Charity Status (All organizations must complete this part ) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified 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) 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of 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) (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (vii) Amount of (ii) EIN organization organizátion in col. in col. (i) listed in your organization in col organization (described on lines 1-9 (i) organized in the support governing document? (i) of your support? above or IRC section Yes (see instructions)) Yes No No No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

Schedule A (Form 990 or 990-EZ) 2010 CONSORTIUM, INC.

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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)

Sec	ction A. Public Support						
Cale	ndar 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 ")	2,723,681.	1.796.041.	2,367,329.	3.644.941.	1,726,869,	12,258,861.
2	Tax revenues levied for the organ-		2,.30,012,	2,30,,323.	3,011,311.	1,720,005.	12,230,001.
	ization'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	2,723,681.	1,796,041.	2,367,329.	3,644,941.	1,726,869.	12,258,861.
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			ļ			
	amount shown on line 11,						104 000
_	column (f)		<del></del>				184,030.
	Public support. Subtract line 5 from line 4 ction B. Total Support						12 074 831.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	2,723,681.	1,796,041.	2,367,329.	3 644 941.	1,726,869.	12,258,861.
8	Gross income from interest.	2,725,001.	1,750,041.	2,307,329.	3,044,941.	1,720,009.	12,230,001.
Ŭ	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	38,638.	15,908.	3,409.	4,033.	2,036.	64,024.
9	Net income from unrelated business			•	•		· · · · · · · · · · · · · · · · · · ·
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)			164,426.	58,616.	48,866.	271,908.
	<b>Total support.</b> Add lines 7 through 10						12,594,793.
	Gross receipts from related activities,	•	•				,225,434.
13	First five years. If the Form 990 is for	•	first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	. $\square$
Sec	organization, check this box and stop ction C. Computation of Publ	<u>ic Support Per</u>	rcentage				
	Public support percentage for 2010 (I			column (fi)		14	95.87 %
	Public support percentage from 2009		•	Joidinii (i))		15	95.87 % 93.55 %
	33 1/3% support test - 2010.If the o			line 13, and line 14	4 is 33 1/3% or m	L	
	stop here. The organization qualifies	-					<b>▶</b> X
b	33 1/3% support test - 2009. If the o		<del>-</del>		ine 15 is 33 1/3%	or more, check thi	
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2010.If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop he	ere. Explain in Pai	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test The organization	tion qualifies as a	publicly supported	organization		ightharpoons
t	10% -facts-and-circumstances tes	t - <b>2009.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	heck this box and s	stop here. Explair	ı ın Part IV how the	
	organization meets the "facts-and-circ		-				▶□
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17b</u>			
					Sche	edule A (Form 990	or 990-EZ) 2010

032022

### 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)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and	1					
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,	-					
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to		<u>;</u>				
	the organization without charge						
6	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
(	: Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
_	ction B. Total Support					· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						İ
	securities loans, rents, royalties						
	and income from similar sources				ļ		
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						ļ
	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			ļ <u>-</u>			
12	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)						
	Total support (Add lines 9, 10c, 11, and 12)					<u> </u>	
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
	check this box and stop here					<del></del>	
	ction C. Computation of Publ					<del></del>	
	Public support percentage for 2010 (		•	column (f))		15	%
	Public support percentage from 2009					16	<u>%</u>
	ction D. Computation of Inve	·				T.= T	
	Investment income percentage for 20	•		ne 13, column (f))		17	<u>%</u>
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2010. If the	<del>-</del>					1/ is not
_	more than 33 1/3%, check this box a	•	•		• • •		. ▶∟
t	33 1/3% support tests - 2009. If the	-			· ·	•	
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	л иш посспеска	DOX OF REPORT 14, 15	a, or 190, check t	nis dox and see if	ISTRUCTIONS	

### SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

See separate instructions.

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

OMB No 1545-0047
2010

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

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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) organiza	ations Complete Part III		, , ,	,,
		N INDIAN HIGHER	EDUCATION	Emp	loyer identification number
	CONSORT	TIUM, INC.			84-0640326
Pa	art I-A Complete if the or	ganization is exempt un	der section 501(c	) or is a section 527 o	rganization.
		····			
1	Provide a description of the organi	zation's direct and indirect polit	ical campaign activities	in Part IV	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	art I-B Complete if the or	ganization is exempt un	der section 501(c	)(3).	
1	Enter the amount of any excise tax	c incurred by the organization ur	nder section 4955	▶\$	
2	Enter the amount of any excise tax	cincurred by organization mana-	gers under section 495		
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a	a Was a correction made?				Yes No
	If "Yes," describe in Part IV				
Pa	art I-C Complete if the or	ganization is exempt un	der section 501(c	), except section 501(	c)(3).
1	Enter the amount directly expende	ed by the filing organization for s	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing orga	nization's funds contributed to d	other organizations for s	section 527	
	exempt function activities			<b>▶</b> \$	
3	Total exempt function expenditure	s Add lines 1 and 2 Enter here	and on Form 1120-POI	L,	
	line 17b			<b>▶</b> \$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	·				
	made payments For each organiz	<u>-</u>			•
	contributions received that were p	• •		•	ite segregated fund or a
	political action committee (PAC) If	radditional space is needed, pro		T IV	<del></del>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				rands in none, enter o	delivered to a separate
					political organization
					If none, enter -0-
	·				
		1	1		

032041 02-02-11

LHA

Schedule C (Form 990 or 990-EZ) 2010

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

### AMERICAN INDIAN HIGHER EDUCATION

Schedule C (Form 990 or 990-EZ) 2010    Part II-A   Complete if the org	CONSC	DRTIUM	, INC.	501(c)(3) and fil	84-0	640326	Page 2
(election under sec			iipt uiidei sectioi		ea i oilli 5700		
A Check  if the filing organiza	tion belong	s to an affil	= :				
B Check I If the filing organiza	tion checke	ed box A ar	d "limited control" pro	visions apply			
		ying Exper eans amou	iditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliate tota	• ,
1a Total lobbying expenditures to influ	Jence publ	ic opinion (d	rass roots lobbying)		0.		
<b>b</b> Total lobbying expenditures to influ	•				87,000.		
c Total lobbying expenditures (add li	nes 1a and	1b)			87,000.		
d Other exempt purpose expenditure					2,631,252.		
e Total exempt purpose expenditure	s (add lines	3 1c and 1d	)		2,718,252.		
f Lobbying nontaxable amount. Enter	er the amou	unt from the	following table in both	n columns.	285,913.		
If the amount on line 1e, column (a) o	r (b) is:	The lobi	ying nontaxable amo	ount is:			
Not over \$500,000		20% of	he amount on line 1e				
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000			
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exces	ss over \$1,500,000			
Over \$17,000,000		\$1,000,0	000				
g Grassroots nontaxable amount (en	iter 25% of	line 1f)			71,478.		
h Subtract line 1g from line 1a If zero	o or less, e	nter -0-			0.		
i Subtract line 1f from line 1c If zero	or less, er	nter -0-			0.		
j If there is an amount other than ze	ro on eithe	r line 1h or l	ine 1i, did the organiza	ation file Form 4720	_		
reporting section 4911 tax for this	year?				Ĺ	Yes	<u> </u>
			raging Period Under				
, ,			ection 501(h) election	-			
CO			e instructions for line	· ·	ige 4.)		<del></del>
	Lobb	ying Exper	ditures During 4-Yea	r Averaging Period		г	
Calendar year (or fiscal year beginning in)	(a) 2	2007	<b>(b)</b> 2008 <sub>.</sub>	(c) 2009	(d) 2010	<b>(e)</b> To	tal
2a Lobbying nontaxable amount	290	,899.	309,273.	307,552.	285,913.	1,193	,637.
b Lobbying ceiling amount (150% of line 2a, column(e))						1,790	,456.
c Total lobbying expenditures	72	2,750.	85,500.	87,000.	87,000.	332	,250.
d Grassroots nontaxable amount	72	2,725.	77,318.	76,888.	71,478.	298	,409.
e Grassroots ceiling amount (150% of line 2d, column (e))						447	,614.
			1			I	

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 CONSORTIUM, INC. 84-0640326 Page 3

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	3)	(k	o)
		Yes	No	Amo	-
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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	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 Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
_	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		/m>		
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ction	
				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		
1	"Yes."  Dues, assessments and similar amounts from members	- ··· · · · · · · · · · · · · · · · · ·	1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical			
	expenses for which the section 527(f) tax was paid).				
а	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 ex	cess			
	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		
Pa	rt IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, a	and Part II-B,	line 1ı Also	, complete	this par
for a	ny additional information				
				<del>.</del>	

### **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.

2010
Open to Public Inspection

Name of the organization

AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM.INC.

Employer identification number 84-0640326

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 advise	ed 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 a	<u> </u>	
_	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Pai		ganization answered "Yes" to Form 990, Pa	
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an hist	orically important land area
	Protection of natural habitat	Preservation of a certif	•
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ried conservation contribution in the form of	of a conservation easement on the last
	day of the tax year		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structu	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ring the year >
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during t	he year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	ne organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her 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 (AS	C 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheran	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

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### AMERICAN INDIAN HIGHER EDUCATION

		IUM, INC.				84-06	<u>4032</u>	<u>6 Р</u>	age <b>2</b>
Par	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, or Oth	er Simil	ar Asset	S (cont	inued	
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	following that are a	significant	use of its o	ollectio	n item	IS
	(check all that apply).								
а	Public exhibition	d	I Loan or exc	hange programs					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's exc	empt purp	ose in Part	XIV		
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	sures, or other simila	ar assets		_		_
	to be sold to raise funds rather than to be m						Yes		No_
Par	rt IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" to	Form 990	), Part IV, II	ne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	ns or other assets no	t included		_		_
	on Form 990, Part X?					L	Yes	L	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table			•			
							Amoun	t	
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f	L	,		
	Did the organization include an amount on F		21?				Yes		J No
	If "Yes," explain the arrangement in Part XIV								
Par	t V Endowment Funds. Complete	_ · · · · · · · · · · · · · · · · · · ·							
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	years back	(e) Four	years	back
1a	Beginning of year balance	255,000.	255,000.	255,000.					
b	Contributions						-		<del></del>
C	Net investment earnings, gains, and losses	1,496.	3,664.	3,297.					
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	1,496.	3,664.	3,297.					
T	Administrative expenses	255 222							
g	End of year balance	255,000.	255,000.	255,000.	l				
2	Provide the estimated percentage of the year								
a	Board designated or quasi-endowment ►  Permanent endowment ► 100.00	<u>.00</u> %	_%						
D	·	% %							
20	Are there endowment funds not in the posse		ation that are hold a	nd administered for	the organi	zation			
Sa	by	sssion of the organiza	ation that are new a	na administered for	ine organiz	Zation	ſ	Yes	No
	(i) unrelated organizations						3a(i)	162	No X
	(ii) related organizations						3a(ii)		X
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R2				3b		<u></u>
4	Describe in Part XIV the intended uses of the						_ OD _		
Par	rt VI Land, Buildings, and Equipm								——
L	Description of investment	(a) Cost or o		or other (c) A		ed	(d) Bool	k valu	
	, Secondarion of investment	basis (investr		1 ' '	preciation		( <b>u</b> ) 500.		
	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other			`					
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	(O(c))					0.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) REFUNDABLE ADVANCE	572,531
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

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 2. FIN 48 (ASC 740)

032053 12-20-10

AMERICAN INDIAN HIGHER EDUCATION

	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finar	ncial State		ts
. 📊	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,855,324.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,144,747.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		-289,423.
4	Net unrealized gains (losses) on investments		4		-15,548.
5	Donated services and use of facilities		5		13,340.
	Investment expenses		6		
6	·		7		<del></del>
7	Prior period adjustments				<del></del>
8	Other (Describe in Part XIV)		.8		15 540
9	Total adjustments (net) Add lines 4 through 8	-10	9		-15,548. $-304,971.$
10 Pai	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and XII. Reconciliation of Revenue per Audited Financial Statements.		<u>  10  </u> nue per F	Return	
1	Total revenue, gains, and other support per audited financial statements			1	2,839,776.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	$ _{2a} $ $-1$	L5,548.	.	
b	Donated services and use of facilities	2b		1	
c	Recoveries of prior year grants	2c	,	1	
d	Other (Describe in Part XIV)	2d		1 1	
e	Add lines 2a through 2d	<u> </u>		2e	-15,548.
3	Subtract line 2e from line 1			3	2,855,324.
_	Amounts included on Form 990, Part VIII, line 12, but not on line 1			3	2,033,324.
4	Investment expenses not included on Form 990, Part VIII, line 7b	45			
a	•	4a		1	
b	Other (Describe in Part XIV)	4b		┥╻ ┃	^
_	Add lines 4a and 4b			4c	0.
5 Do	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  It XIII Reconciliation of Expenses per Audited Financial Statem	onto With Eve	nnoon nor	5 Dotu	2,855,324.
		CIICS AAITII EXP	enses per	1	
1	Total expenses and losses per audited financial statements			1	3,144,747.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1			
а	Donated services and use of facilities	2a		-	
b	Prior year adjustments	2b			
С	Other losses	2c		4	
d	Other (Describe in Part XIV)	2d			_
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,144,747.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	ŧ 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIV)	4b		1 1	
С	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	3,144,7 <u>4</u> 7.
ч	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	II, lines 1a and 4, Pa	art IV, lines 1	b and 2	2b, Part V, line 4, Part
,	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp	•	•		ınformatıon
PAI	RT V, LINE 4: GENERAL SUPPORT OF THE AIHEC	STUDENT C	CONGRES	SS, T	ГО
PRO	OVIDE A SOURCE (INTEREST) THAT WOULD SUPPL	EMENT THE	ASC'S	NNA	JAL BUDGET.
	<del></del>				
PA	RT X, LINE 2: IN JUNE 2006, THE FINANCIAL	ACCOUNTING	STANI	DARD	S BOARD
(F.	ASB) RELEASED FASB ASC 740-10, INCOME TAXE	S, THAT PR	ROVIDES	GU.	IDANCE FOR
ישם	DODELNO INCEDENTATION IN INCOME MAYER FOR M	טיי עראס פא	משחו	ישחמי	ADED 20
KE.	PORTING UNCERTAINTY IN INCOME TAXES. FOR T	ne leak er	מפ משמוי	<u>er re</u> î	MDER 30,
20	11, AIHEC HAS DOCUMENTED ITS CONSIDERATION	OF FASB A	ASC 740	10	AND
<u>20</u>		0. 1.10D F	/		
DE'	TERMINED THAT NO MATERIAL UNCERTAIN TAX PO	SITIONS QU	JALIFY	FOR	EITHER
				Sched	ule D (Form 990) 2010
03205 12-20	4 -10				

## AMERICAN INDIAN HIGHER EDUCATION Schedule D (Form 990) 2010 CONSORTIUM, INC. 84-0640326 Page 5 Part XIV Supplemental Information (continued) RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

032055 12-20-10

SCHEDULE I (Form 990)

Department of the Treasury internal Revenue Service

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

Open to Public Inspection OMB No 1545-0047

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

▶ Attach to Form 990.

Name of t	Vame of the organization AMERICAN INDIAN HIGHER EDUCATION  CONSORTIUM, INC.	Employer identification number 84-0640326
Parti	Part I General Information on Grants and Assistance	
1 Doe	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	uoi
crité	riteria used to award the grants or assistance?	X Yes No

2 Describe in Part IV the organization's procedures for monitoring the	cedures for mon	toring the use of grant	use of grant funds in the United States	States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	• United States. C	omplete if the orga	Inization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Check this box if no	55,000 Check thi	s box if no one recipier	t received more th	an \$5,000 Part II	can be duplicated if a	one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	ded P
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							WALMART FOUNDATION,
ILISAGVIK COLLEGE							AIHEC, HACU, NAFEO
P.O. BOX 749							STUDENT SUCCESS
BARROW, AK 99723	92-0158414	501(C)(3)	50,000.	0			COLLABORATIVE-MENTEE
							10 WEEK NASA SUMMER
HASKELL INDIAN NATIONS UNIVERSITY							RESEARCH EXPERIENCE-2
155 INDIAN AVENUE - P.O. BOX 5030							STUDENTS PLACED AT AMES
LAWRENCE, KS 66046-4800	48-0988099	501(C)(3)	22,304.	0			RESEARCH CENTER IN
							AIHEC-DOD STUDENT SUMMER
BAY MILLS COMMUNITY COLLEGE							SCIENCE CAMP GRANT.
12214 WEST LAKESHORE DR.							SUMMER SCIENCE CAMP FOR
BRIMLEY, MI 49715	38-2604866	501(C)(3)	9,250,	0.			APPROXIMATELY 20
							AIHEC-DOD STUDENT SUMMER
KEWEENAW BAY OJIBWA COMMUNITY							SCIENCE CAMP GRANT.
COLLEGE - 111 BEARTOWN RD - PO BOX							SUMMER SCIENCE CAMP FOR
519 - BARAGA, MI 49908	01-0678043	501(C)(3)	5,500.	0.			APPROXIMATELY 20
							WALMART FOUNDATION,
LEECH LAKE TRIBAL COLLEGE							AIHEC, HACU, NAFEO
P.O. BOX 180							STUDENT SUCCESS
CASS LAKE, MN 56633	75-3061667	501(C)(3)	50,000.	0			COLLABORATIVE-MENTOR
							10 WEEK NASA SUMMER
SALISH KOOTENAI COLLEGE							RESEARCH EXPERIENCE-3
P.O. BOX 70							STUDENTS PLACED AT NASA
PABLO, MT 59855	81-0378823	501(C)(3)	29, 223.	0			RESEARCH CENTERS, 2
2 Enter total number of section 501(c)(3) and government organizations	o dovernment or	ganizations					<b>₽</b>

Schedule I (Form 990) (2010)

84-0640326

Schedule I (Form 990) CONSORTIUM, INC.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM, INC.

(a) Name and address of covernment or government (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section organization or government (d) Amount of cash grant non-cash (b) Method of (b) Method of (c) IRC section or government (d) Amount of (e) Amount of (e) Amount of (f) Method	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							10 WEEK NASA SUMMER
							RESEARCH EXPERIENCE-1
P.O. BOX 819							
BROWNING, MT 59417	81-0378943	501(C)(3)	10,342.	0			MARSHALL SPACE AND FLIGHT
							WALMART FOUNDATION,
STONE CHILDE COLLEGE							AIHEC, HACU, NAFEO
RR1, BOX 1082							STUDENT SUCCESS
BOX ELDER, MT 59521	81-0420650	501(c)(3)	50,000.	0			COLLABORATIVE-MENTEE
							WALMART FOUNDATION,
FORT PECK COMMUNITY COLLEGE							AIHEC, HACU, NAFEO
P. O. BOX 398							STUDENT SUCCESS
POPLAR, MT 59255	81-0374399	501(C)(3)	50,000.	0			COLLABORATIVE-MENTEE
							10 WEEK NASA SUMMER
INSTITUTE OF AMERICAN INDIAN ART							RESEARCH EXPERIENCE-6
83 AVAN NU PO ROAD							STUDENTS AND ONE FACULTY
SANTA FE, NM 87508	85-0377670	501(c)(3)	124,831.	0			MEMBER PLACED AT KENNEDY
							10 WEEK NASA SUMMER
NAVAJO TECHNICAL COLLEGE							RESEARCH EXPERIENCE-3
83 AVAN NU PO ROAD							STUDENTS PLACED AT AMES
SANTA FE, NM 87508	85-0303705	501(C)(3)	22,004.	0			RESEARCH CENTER IN
							NATIONAL RENEWABLE ENERGY
COLLEGE OF MENOMINEE							LABORATORY (NREL) TRIBAL
P.O. BOX 1179							ENERGY PROGRAM TO ENGAGE
KESHENA, WI 54135	39-1773613	501(C)(3)	38,695,	0			AN AIHEC ENERGY FELLOW
							10 WEEK NASA SUMMER
UNITED TRIBES TECHNICAL COLLEGE							RESEARCH EXPERIENCE-1
3315 UNIVERSITY DRIVE							STUDENT PLACED AT DRYDEN
BISMARCK, ND 58504	45-0314233	501(C)(3)	12,238,	0			FLIGHT RESEARCH CENTER IN
							WALMART FOUNDATION,
SITTING BULL COLLEGE							AIHEC, HACU, NAFEO
9299 HWY 24							STUDENT SUCCESS
FORT YATES ND 58538	23-7373765	501(C)(3)	50,000.	0			COLLABORATIVE-MENTEE
							AIHEC-EPA TRIBAL
CANDESKA CIKANA COMMUNITY COLLEGE							ECOAMBASSADOR PROJECT TO
P.O. BOX 269							ENGAGE ONE TCU
FORT TOTTEN ND 58335	45-0350756	501(C)(3)	12,000.	0.			ECOAMBASSADOR AND 2
LHA							Schedule I (Form 990)

# AMERICAN INDIAN HIGHER EDUCATION

CONSORTIUM, INC.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2010)
Part III | Grants and Other

Page 2

84-0640326

raluation (f) Description of non-cash assistance asal, other)			lon	Œ					
(e) Method of valuation (book, FMV, appraisal, other)			r additional informat	ID A PRE-AN	T THE	нат тне	HE TIMELY	PORTS.	
(d) Amount of non- cash assistance			line 2, and any other	IMPLEMENTE	SYSTEM TO HELP ENSURE THAT THE	-GRANTEE ACTIVITIES AND THAT THE	INCLUDING THE	FINANCIAL REPORTS.	
(c) Amount of cash grant			n required in Part I,	STAFF HAS	M TO HELP	TEE ACTIVI	REQUIREMENTS, I	TIC AND FI	
(b) Number of recipients			 de the informatio	PROGRAM	l	SUB-GRAN		PROGRAMMATIC AND	
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	SCHEDULE I, PART I, LINE 2: AIHEC PROGRAM STAFF HAS IMPLEMENTED A PRE-AND	POST-AWARD GRANT COMPLIANCE TRACKING	ORGANIZATION EFFECTIVELY MONITORS SUB	SUB-GRANTEES FULFILL ALL CONTRACTUAL	SUBMISSION OF PROPERLY COMPLETED P	

COLUMN (H): PART II, LINE 1,

HACU AIHEC, (H) PURPOSE OF GRANT OR ASSISTANCE: WALMART FOUNDATION,

NAFEO STUDENT SUCCESS COLLABORATIVE-MENTEE INSTITUTION

032102 01-13-11

- (H) PURPOSE OF GRANT OR ASSISTANCE: 10 WEEK NASA SUMMER RESEARCH EXPERIENCE-2 STUDENTS PLACED AT AMES RESEARCH CENTER IN MOFFETT FIELD, CA TO PARTICIPATE IN A NATIVE AMERIAN PILOT RESEARCH PROJECT FOCUSING ON ENGINEERING-BASED PROBELM SOLVING.
- (H) PURPOSE OF GRANT OR ASSISTANCE: AIHEC-DOD STUDENT SUMMER SCIENCE CAMP GRANT. SUMMER SCIENCE CAMP FOR APPROXIMATELY 20 STUDENTS.
- (H) PURPOSE OF GRANT OR ASSISTANCE: AIHEC-DOD STUDENT SUMMER SCIENCE CAMP GRANT. SUMMER SCIENCE CAMP FOR APPROXIMATELY 20 STUDENTS.
- (H) PURPOSE OF GRANT OR ASSISTANCE: WALMART FOUNDATION, AIHEC, HACU, NAFEO STUDENT SUCCESS COLLABORATIVE-MENTOR INSTITUTION.
- (H) PURPOSE OF GRANT OR ASSISTANCE: 10 WEEK NASA SUMMER RESEARCH EXPERIENCE-3 STUDENTS PLACED AT NASA RESEARCH CENTERS. 2 STUDENTS PLACED AT JOHNSON SPACE CENTER IN HOUSTON, TX TO STUDY ROBOTICS DESIGN AND ENGINEERING. 1 STUDENT PLACED AT MARSHALL SPACE AND FLIGHT CENTER IN HUNTSVILL, AL TO STUDY FLORIDA WILDFIRES AND SEAGRASS HABITAT AND EFFECTS FROM STORMS.
- (H) PURPOSE OF GRANT OR ASSISTANCE: 10 WEEK NASA SUMMER RESEARCH EXPERIENCE-1 STUDENT PLACED AT MARSHALL SPACE AND FLIGHT CENTER IN HUNTSVILL, AL TO STUDY FLORIDA WILDFIRES AND SEAGRASS HABITAT AND EFFIECTS FROM STORMS.
- (H) PURPOSE OF GRANT OR ASSISTANCE: WALMART FOUNDATION, AIHEC, HACU,

(H) PURPOSE OF GRANT OR ASSISTANCE: WALMART FOUNDATION, AIHEC, HACU,
NAFEO STUDENT SUCCESS COLLABORATIVE-MENTEE INSTITUTION.

EXPERIENCE-1 STUDENT PLACED AT DRYDEN FLIGHT RESEARCH CENTER IN EDWARDS.

CA TO PARTICPATE IN THE DEVELOPMENT OF CURRRICULUM MATERIALS USING NASA

Schedule I (Form 990) 2010

DIGITAL LEARNING NETWORK RESOURCES.

### AMERICAN INDIAN HIGHER EDUCATION

Schedule I (Form 990) 2010 CONSORTIUM, INC.  Part IV Supplemental Information	84-0640326 Page:
Part IV   Supplemental Information	
(H) PURPOSE OF GRANT OR ASSISTANCE: AIHEC-EPA TRIBAL ECOAM	BASSADOR
PROJECT TO ENGAGE ONE TCU ECOAMBASSADOR AND 2 STUDENTS: DE	VELODING A
INCOLCT TO ENGAGE ONE TOO ECOAMDASSADOR AND Z STODENTS: DE	VELOPING A
CAMPUS RECYCLING SUSTAINABILITY PROGRAM.	
	- V-1
	<del>.</del>
	Schedule I (Form 990) 201

### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

2010

Open to Public Inspection

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

AMERICAN INDIAN HIGHER EDUCATION

CONSORTIUM, INC

Employer identification number 84-0640326

Part I **Questions Regarding Compensation** No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 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 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 X Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee 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? X 4a Х Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4h Х c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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? X 5a Any related organization? X 5b 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? Х 6a X b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III 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 Х 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 Х If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958 6(c)?

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

Page 2

84-0640326

CONSORTIUM, INC.

Schedule J (Form 990) 2010

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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base	(n) Bonus &	(iii) Other	Retirement and other deferred	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior
		COIDE	compensation	compensation	compensation			Form 990 or Form 990-EZ
	Ξ	212,812.	0	0	10,790.	10,784.	234,386.	0
1 CARRIE BILLY	▣		0.	0	0	0.	0	0
	3	134,44	1,000.	0	7,795.	10,620.	153,862.	0.
2 MARY GOETZ	Ξ	0	0	0.	0.	0.	0	0.
	Ξ							
3	(ii)							
	(i)							
4	∷≘							
	Θ							:
5	Ξ							
	≘							
9	Ξ							
	Ξ							
7	Ξ							
	Ξ							
8	≘							
	Ξ							
6	≘							
	Ξ							
10	3							
	Ξ				•			
11	Ξ							
	Ξ							
12	Ξ							
	Ξ							
13	3							
	Ξ							
14	Ξ							
	Ξ							
15	Ξ							
	Ξ							
16	Ξ							

032112 12-21-10

### 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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Name of the organization

AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM, INC.

Employer identification number 84-0640326

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
STRENGTHENS INDIGENOUS LANGUAGES, CULTURES, COMMUNITIES, AND TRIBAL
NATIONS; AND THROUGH OUR UNIQUE POSITION, SERVE MEMBER INSTITUTIONS AND
EMERGING TCUS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
NASA OSSI AND LUNAR: ASSIST NASA IN MEETING ITS MISSION OF SCIENTIFIC
EXPLORATION, DISCOVERY AND PREPARATION THROUGH ENHANCING THE ABILITY OF
TRIBAL COLLEGES AND UNIVERSITIES TO PROVIDE HIGH QUALITY SCIENCE,
TECHNOLOGY, ENGINEERING AND MATHEMATICS (STEM) EDUCATION PROGRAMS.
PARTICIPATE IN COLLABORATIVE STEM RESEARCH INITIATIVES, AND ENSURE THE
INCLUSION OF AMERICAN INDIANS IN A WELL PREPARED NASA STEM WORKFORCE.
EXPENSES \$ 367,232. INCLUDING GRANTS OF \$ 170,841. REVENUE \$ 0.
NATIONAL SCIENCE FOUNDATION PROGRAM - INDIGENOUS FRAMEWORK FOR STEM
EVALUATION, PHASE II: THE AIHEC INDIGENOUS EVALUATION FRAMEWORK
MAINTAINS, RESTORE, AND PRESERVE AMERICAN INDIANS' AND ALASKAN NATIVES'
VALUES, WISDOM AND TRADITIONAL PEDAGOGIES AND KNOWLEDGE THROUGH
CURRICULA AND PROGRAMS DESIGNED TO MAKE LEARNING MORE MEANINGFUL TO
TRIBAL SITUATIONS AND CULTURES AMONG TRIBAL COLLEGE AND K-12 EDUCATORS.
EXPENSES \$ 249,125. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
DEPARTMENT OF ENERGY
EXPENSES \$ 105,628. INCLUDING GRANTS OF \$ 38,796. REVENUE \$ 0.

A\*CF COLLECTION AND ANALYSIS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  $^{032211}_{01\text{-}24\text{-}11}$ 

CONSORTIUM, INC.	Employer identification numbe 84-0640326
XPENSES \$ 105,115. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
UMINA MODELS OF SUCCES	
XPENSES \$ 103,934. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
FF BREAKING THROUGH	
XPENSES \$ 48,337. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
EPARTMENT OF DEFENSE	
EXPENSES \$ 15,803. INCLUDING GRANTS OF \$ 14,750. REVI	ENUE \$ 0.
ATIONAL ENDOWMENT FOR HUMANITIES	
XPENSES \$ 54,137. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
THER PROGRAMS	
EXPENSES \$ 80,777. INCLUDING GRANTS OF \$ 0. REVENUE S	\$ 685,428.
NVIRONMENTAL PROTECTION AGENCY	
EXPENSES \$ 14,821. INCLUDING GRANTS OF \$ 12,000. REVI	ENUE \$ 0.
TUDENT CONGRESS	
EXPENSES \$ 10,507. INCLUDING GRANTS OF \$ 0. REVENUE S	\$ 0.
ORM 990, PART VI, SECTION A, LINE 6: AIHEC HAS FIVE CLAS	SSES OF
EMBERSHIP: REGULAR MEMBER (VOTING), ASSOCIATE MEMBER, II	NTERNATIONAL
EMBER, ORGANIZATION MEMBER, AND HONORARY MEMBER.	
THE AIHEC BOARD OF DIRECTORS IS COMPOSED OF ITS REGULAR 1	MEMBERS, WHICH edule O (Form 990 or 990-EZ) (2010

Schedule O (Form 990 or 990-EZ) (2010) Page 2 Name of the organization AMERICAN INDIAN HIGHER EDUCATION Employer identification number 84-0640326 CONSORTIUM, INC. INCLUDE TRIBALLY CHARTERED INSTITUTIONS OF POSTSECONDARY EDUCATION THAT: - IS A SUBDIVISION OF A GOVERNMENT OF A FEDERALLY RECOGNIZED AMERICAN INDIAN TRIBE, ALASKA NATIVE VILLAGE, OR ALASKA NATIVE CORPORATION OR HAS BEEN CHARTERED, SANCTIONED OR FORMALLY ESTABLISHED BY A FEDERALLY RECOGNIZED TRIBAL GOVERNMENT OR AN ALASKA NATIVE VILLAGE, OR ALASKA NATIVE CORPORATION; - HAS A GOVERNING BOARD THAT IS COMPRISED SOLELY OF AMERICAN INDIAN OR ALASKA NATIVE MEMBERS, EXCEPT IN THOSE CASES WHERE THE CHARTER OF THE TRIBAL COLLEGE AUTHORIZES A MAJORITY OF SUCH MEMBERS; - PRIMARILY SERVES AN AMERICAN INDIAN OR ALASKA NATIVE COMMUNITY OR COMMUNITIES: - HAS A MAJORITY OF FULL-TIME EOUIVALENT AMERICAN INDIAN OR ALASKA NATIVE STUDENTS: - HAS DEMONSTRATED THAT IT IS FULFILLING THE GOALS AND PURPOSES FOR WHICH IT WAS ESTABLISHED, SANCTIONED OR CHARTERED AND IS ADHERING TO AN EDUCATIONAL PLAN OF OPERATION; AND - IS ACCREDITED, OR A FORMAL CANDIDATE FOR ACCREDITATION, BY A REGIONAL INSTITUTIONAL ACCREDITING ASSOCIATION RECOGNIZED BY THE U.S. SECRETARY OF EDUCATION. UPON ACCREDITATION BEING CONFERRED, ASSOCIATE MEMBERS MAY BECOME REGULAR MEMBERS, AND THEREFORE SERVE ON THE BOARD OF DIRECTORS. THE REMAINING THREE CATEGORIES OF MEMBERSHIP HAVE NO VOTING RIGHTS OR RESPONSIBILITIES AND MAY NOT HOLD OFFICE IN AIHEC. FORM 990, PART VI, SECTION A, LINE 7A: EACH REGULAR MEMBER ORGANIZATION IS

ENTITLED TO ONE VOTING SEAT ON THE BOARD OF DIRECTORS. THIS SEAT IS

Name of the organization AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM, INC.

Employer identification number 84-0640326

OCCUPIED BY THE ORGANIZATION'S PRESIDENT. ASSOCIATE, INTERNATIONAL,
ORGANIZATION, AND HONORARY MEMBERS DO NOT HAVE THE RIGHT TO ELECT MEMBERS
TO THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN WAS PREPARED BY OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE 990 WAS SUBMITTED TO THE FINANCE AND AUDIT COMMITTEE FOR APPROVAL BY VOICE VOTE BEFORE IT WAS FILED.

ONCE THE 990 WAS APPROVED BY THE F&A COMMITTEE, A COPY OF FINAL 990 WAS SENT TO THE ENTIRE BOARD. THE BOARD THEN REVIEWED THE REPORT AND APPROVED THE 990 BY VOICE VOTE.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION DISTRIBUTES THE CONFLICT OF INTEREST POLICY ANNUALLY TO THE GOVERNING BOARD AND EMPLOYEES FOR REVIEW. RECEIPT CONFIRMATION IS ATTACHED. BOARD MEMBERS AND ALL STAFF MUST REVIEW AND SIGN THE ATTACHED CONFIRMATION, WHICH IS RETURNED AND FILED AT THE CORPORATE OFFICE. A BOARD MEMBERS' CONFLICT OF INTEREST IS BROUGHT TO THE ATTENTION OF THE EXECUTIVE COMMITTEE. THE COMMITTEE DECIDES ON WHAT ACTION SHOULD BE TAKEN, AND THE PROPOSED ACTION IS VOTED ON BY THE GOVERNING BOARD. EMPLOYEE CONFLICT OF INTEREST IS HANDLED BY THE HUMAN RESOURCES DEPARTMENT AND THE PRESIDENT AND CEO. VIOLATION OF POLICY MAY LEAD TO DISCIPLINARY ACTION, UP TO AND INCLUDING IMMEDIATE TERMINATION OF EMPLOYMENT.

FORM 990, PART VI, SECTION B, LINE 15A: THE CEO'S COMPENSATION IS

DETERMINED AND APPROVED BY BOARD AND EXECUTIVE COMMITTEE, BASED ON THE

INFORMATION OBTAINED IN LOCAL COMPENSATION STUDY. THE BOARD'S DELIBERATION

AND DECISION ARE RECORDED IN THE BOARD MEETING MINUTES. THE LAST

COMPENSATION REVIEW TOOK PLACE DURING MAY 2011.

01-24-11

Schedule O (Form 990 or 990 EZ) (2010)	Page 2
Name of the organization AMERICAN INDIAN HIGHER EDUCATION CONSORTIUM, INC.	Employer identification number 84-0640326
COMBONITOR, INC.	04 0040320
FORM 990, PART VI, SECTION C, LINE 19: ALL FINANCIAL DOC	UMENTS, GOVERNING
DOCUMENTS, AND CONFLICT OF INTEREST POLICY ARE AVAILABLE	UPON REQUEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-15,548.
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