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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

1000 THOMAS JEFFERSON ST NW

City or town, state or country, and ZIP + 4

WASHINGTON, DC 200073835

F Name and address of principal officer

DAVID MYERS

1000 THOMAS JEFFERSON ST NW

WASHINGTON,DC 200073835

H(a) Is this a group return for affiliates?

☐ Yes

☒ No

H(b) Are all affiliates included?

☐ Yes

☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

25-0965219

E Telephone number

(202) 403-5000

G Gross receipts \$ 307,497,704

I Tax-exempt status

☒ 501(c)(3)

☐ 501(c) () ◀(insert no)

☐ 4947(a)(1) or

☐ 527

J Website: ▶ WWW AIR ORG

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation 1946

M State of legal domicile PA

Part I	Summary																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>SEE SCHEDULE O</div></div>																								
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																								
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2012-11-14

Date

MARIJO AHLGRIMM SR VP, AND CFO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

PATRICIA A O'MALLEYCPA

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions) P00285909

Firm's name (or yours if self-employed), address, and ZIP + 4

RUBINO & MCGEEHIN CHARTERED
6903 ROCKLEDGE DRIVE SUITE 1200
BETHESDA, MD 20817

EIN ▶ 52-1186096

Phone no ▶ (301) 564-3636

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

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

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

☐

☒

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 70,314,319 including grants of \$) (Revenue \$ 5,345)

THE ASSESSMENT PROGRAM PROVIDES COGNITIVE ASSESSMENTS OF STUDENT PROGRESS THAT ALLOWS EDUCATORS TO HELP CHILDREN ACHIEVE IN SCHOOL IT ALSO STUDIES THE VALIDITY OF ASSESSMENTS FOR FEDERAL, STATE, AND LOCAL EDUCATION AGENCIES THE INFORMATION AND ANALYSES ENABLE SCHOOLS AND OVERSIGHT AGENCIES TO MEASURE COMPLIANCE WITH THE RIGOROUS FEDERAL AND STATE EDUCATION LAWS THE PROGRAM'S TECHNOLOGY ENABLES COMPUTER-ADAPTIVE TESTING AND ALSO INCLUDES LEADING TOOLS FOR TEST ITEM BANKING AND ONLINE TEST DELIVERY THE PROGRAM ALSO PERFORMS SIMILAR ASSESSMENT TESTING FOR STUDENTS WITH PHYSICAL AND COGNITIVE DISABILITIES

4b

(Code) (Expenses \$ 36,292,698 including grants of \$) (Revenue \$)

AIR'S INTERNATIONAL DEVELOPMENT PROGRAM SEEKS TO ENHANCE THE CAPACITY OF DEVELOPING COUNTRIES TO IMPROVE THEIR QUALITY OF LIFE THROUGH EDUCATION AND SOCIAL DEVELOPMENT IT COLLABORATES WITH LOCAL PARTNERS TO ENSURE CHILDREN'S EQUITABLE ACCESS TO ALL LEVELS OF EDUCATION, IMPROVE THE QUALITY AND RELEVANCE OF EDUCATION, AND EMPOWER INDIVIDUALS, COMMUNITIES, AND INSTITUTIONS AS AGENTS OF SOCIAL AND BEHAVIORAL CHANGE IN MORE THAN 80 COUNTRIES OVER THE PAST THREE DECADES, AIR HAS HELPED STRENGTHEN NATIONAL EDUCATION SYSTEMS, INCREASE COMMUNITY INVOLVEMENT IN LOCAL SCHOOLS, IMPROVE TEACHING AND LEARNING, DEVELOP NEW TECHNIQUES FOR ASSESSING STUDENT PERFORMANCE, INCREASE ACCESS FOR BOTH GIRLS AND BOYS, ACCELERATE EDUCATIONAL REFORM, IMPROVE INFORMATION SYSTEMS, SLOW THE SPREAD OF HIV/AIDS THROUGH BEHAVIOR CHANGE, AND REDUCE THE INCIDENCE OF CHILD LABOR

4c

(Code) (Expenses \$ 59,304,128 including grants of \$ 643,563) (Revenue \$ 423,390)

THE EDUCATION, HUMAN DEVELOPMENT & WORKFORCE PROGRAM HELPS EDUCATORS TEACH BETTER, STUDENTS LEARN BETTER, AND WORKERS PERFORM BETTER THROUGH RESEARCH, EVALUATION, CONSULTING, AND TECHNICAL ASSISTANCE IT SERVES NATIONAL, STATE, AND LOCAL LEVEL GOVERNMENT, BUSINESS, FOUNDATION AND OTHER AGENCIES IN SEVERAL DIMENSIONS OF EDUCATION, INCLUDING ADULT EDUCATION AND LITERACY, DISTRICT AND SCHOOL REFORM AND IMPROVEMENT, EARLY CHILDHOOD, EDUCATION EVIDENCE & INDICATORS, EDUCATION FINANCE, EDUCATION TECHNOLOGY, HIGHER EDUCATION, SPECIAL EDUCATION, ELL, WORKFORCE DEVELOPMENT AND PRODUCTIVITY, EDUCATOR QUALITY, COLLEGE AND CAREER READINESS, STEM EDUCATION, AND EXPANDED LEARNING OPPORTUNITIES EHDW ALSO COLLECTS, DEVELOPS, AND ANALYZES DOMESTIC AND INTERNATIONAL DATA AND EDUCATION STATISTICS FOR USE BY THAT EDUCATION AND GOVERNMENT DECISION-MAKERS

(Code) (Expenses \$ 27,132,558 including grants of \$) (Revenue \$ 675)

THE HEALTH PROGRAM USES RESEARCH TO PROMPT CHANGE THAT MAKES COMMUNITIES SAFER AND ENVIRONMENTS HEALTHIER, IMPROVES HEALTHCARE, AND RAISES THE QUALITY OF LIFE THE PROGRAM SPECIALIZES IN HEALTH POLICY RESEARCH, COMMUNICATIONS, AND INFORMATION SCIENCES AND SERVES FEDERAL, STATE, AND LOCAL GOVERNMENTS, FOUNDATIONS, PRIVATE HEALTHCARE PROVIDERS, UNIVERSITIES, AND THE PUBLIC THE PROGRAM'S MULTIDISCIPLINARY HEALTH SERVICES AND POLICY RESEARCH GROUP DESIGNS, IMPLEMENTS AND EVALUATES POLICIES THROUGH BOTH TRADITIONAL RESEARCH METHODS AND TECHNICAL ASSISTANCE THE PROGRAM'S HEALTH COMMUNICATORS HAVE DEVELOPED MANY SUCCESSFUL PUBLIC HEALTH CAMPAIGNS TO INCREASE AWARENESS AND PROMOTE HEALTHY BEHAVIORS AMONG DIVERSE POPULATIONS

(Code) (Expenses \$ 20,615,574 including grants of \$) (Revenue \$ 290,466)

AIR'S FEDERAL STATISTICS PROGRAM WORKS WITH THE NATIONAL CENTER FOR EDUCATION STATISTICS (NCES), WHICH IS THE FEDERAL GOVERNMENT'S PRIMARY SOURCE FOR COLLECTING AND ANALYZING STATISTICAL DATA ABOUT PUBLIC EDUCATION IN THE UNITED STATES AND AROUND THE WORLD THE INFORMATION PROVIDED BY OUR EXPERTS CONTRIBUTES TO THE DEVELOPMENT OF HIGH-QUALITY STATISTICS ABOUT EDUCATION THAT INFORM DISCUSSION AND DEBATE AT THE DECISION-MAKING LEVELS OF NATIONAL, STATE AND LOCAL GOVERNMENTS

(Code) (Expenses \$ 13,256,625 including grants of \$) (Revenue \$)

AIR'S HUMAN & SOCIAL DEVELOPMENT PROGRAM PROMOTES THE OVERALL HEALTH AND DEVELOPMENT OF CHILDREN, YOUTH AND FAMILIES, ESPECIALLY THEIR SOCIAL, EMOTIONAL AND MENTAL WELL-BEING, SO THAT THEY MAY THRIVE AT HOME, SCHOOL, WORK AND THE COMMUNITY THESE OUTCOMES ARE REALIZED BY MAKING THE SYSTEMS DELIVERING HUMAN, SOCIAL AND EDUCATIONAL SERVICES MORE EFFECTIVE AND COLLABORATIVE THROUGH RESEARCH AND EVALUATION, TRAINING, TECHNICAL ASSISTANCE AND CAPACITY BUILDING STRATEGIES FOR INDIVIDUALS, THE WORKFORCE AND ORGANIZATIONS STAFF EXPERTISE SPANS PUBLIC HEALTH SYSTEMS, MENTAL HEALTH AND SUBSTANCE ABUSE PROGRAMS, YOUTH LGBT SERVICES, JUVENILE JUSTICE, CHILD WELFARE, EDUCATION, AND SOCIAL AND RECREATIONAL SERVICES

(Code) (Expenses \$ 528,009 including grants of \$) (Revenue \$)

AIR'S ANALYSIS OF LONGITUDINAL DATA IN EDUCATION RESEARCH PROGRAM INFORMS EDUCATION POLICY DEVELOPMENT THROUGH ANALYSES OF DATA ON INDIVIDUAL STUDENTS AND TEACHERS OVER TIME THE PROGRAM FOCUSES ON HOW TEACHER POLICIES, GOVERNANCE POLICIES, AND SOCIAL AND ECONOMIC COMMUNITY CONDITIONS AFFECT OUTCOMES FOR TEACHERS AND THEIR STUDENTS BY CAPITALIZING ON RICH LONGITUDINAL DATA, THE PROGRAM EXPLORES A BREADTH OF CRITICAL EDUCATION ISSUES AND PRESENTS RESEARCH ADVANCEMENTS OF THE HIGHEST QUALITY TO POLICYMAKERS IT ALSO HOUSES THE NATIONAL CENTER FOR ANALYSIS OF LONGITUDINAL DATA IN EDUCATION RESEARCH (CALDER), A SCHOLARLY CONSORTIUM WHOSE OTHER MEMBERS INCLUDE SCHOLARS AT DUKE UNIVERSITY, NORTHWESTERN UNIVERSITY, STANFORD UNIVERSITY, THE UNIVERSITY OF MISSOURI, THE UNIVERSITY OF TEXAS AT DALLAS, AND THE UNIVERSITY OF WASHINGTON

4d

Other program services (Describe in Schedule O)

(Expenses \$ 61,532,766 including grants of \$) (Revenue \$ 291,141)

4e



















Total program service expenses

\$ 227,443,911

Form 990 (2011)

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 	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 		No
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 	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV 		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements		

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V <input checked="" type="checkbox"/>						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	1,016			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	1,483			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b				
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 or securities account)?	4a	Yes			
b	If "Yes," enter the name of the foreign country <u>BR, EG, HA, HO, MI, NU, PK, ZA, ET, LI, KE, GG</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the aggregate amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . .	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
15c	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Yes	
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	Yes	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK , CA , CO , CT , FL , IL , KS , MA , MI , MN , MO , NJ , NM , NY , NC , OK , OR , PA , RI , TN
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	MARIJO AHLGRIMM 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 200073835 (202) 403-5000

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

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

Form **990** (2011)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	10,641,906	656,076	1,494,551

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 286

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PEARSON EDUC MEASUREMENTNCS PEARSON I 13036 COLLECTION CTR DR CHICAGO, IL 60693	PRINT, SCORE, AND DIST OF TEST REPORTS	17,935,386
DATA RECOGNITION CORP M177 PO BOX 1150 MINNEAPOLIS, MN 554801150	PRINT, SCORE, AND DIST OF TEST REPORTS	12,533,254
THE CORKERY GROUP 260 FIFTH AVENUE NEW YORK, NY 10001	SEE SCHEDULE O	3,425,340
NATL FED OF FAMILIES-CHLDRN'S MENTAL HEA 9605 MED CTR DR 280 ROCKVILLE, MD 20850	SEE SCHEDULE O	1,775,932
MACROSYS LLC 1901 N MOORE ST SUITE 509 ARLINGTON, VA 22209	SEE SCHEDULE O	1,471,852

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

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	255,941,081				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	19,831,399				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f		275,772,480				
Program Service Revenue			Business Code					
	2a	CONFERENCE FEES	900099	321,082	321,082			
	b	PROVISION OF VAR SERV	900099	290,466	290,466			
	c	SPEAKING FEES	900099	106,535	106,535			
	d	MISC PROGRAM FEES	900099	1,793	1,793			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		719,876				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		2,343,801			2,343,801	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		30,874			30,874	
	6a	Gross rents	(i) Real	(ii) Personal				
			178,149					
			217,228					
			-39,079					
	d	Net rental income or (loss)		-39,079			-39,079	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			28,452,524					
			27,888,754					
			563,770					
	d	Net gain or (loss)		563,770			563,770	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a					
b	Less cost of goods sold	b						
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions		279,391,722	719,876	0	2,899,366		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	643,563	643,563		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	9,497,738	3,293,104	6,204,634	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	667,609	370,977	296,632	
7	Other salaries and wages	86,933,540	77,327,514	7,489,629	2,116,397
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,282,386	5,880,658	1,225,081	176,647
9	Other employee benefits	9,731,386	7,327,785	2,198,029	205,572
10	Payroll taxes	5,971,539	5,072,435	756,181	142,923
11	Fees for services (non-employees)				
a	Management				
b	Legal	844,338		844,338	
c	Accounting	397,623		397,623	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	367,306		367,306	
g	Other	82,785,494	79,970,111	2,626,615	188,768
12	Advertising and promotion	216,881	216,881		
13	Office expenses	14,428,976	12,886,653	1,397,889	144,434
14	Information technology	2,082,045	1,966,315	97,559	18,171
15	Royalties				
16	Occupancy	14,346,560	11,481,242	2,585,348	279,970
17	Travel	10,734,998	9,980,135	632,411	122,452
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,699,350	2,456,270	227,028	16,052
20	Interest	44		44	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,862,042	2,322,664	477,712	61,666
23	Insurance	310,052	148,404	158,809	2,839
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	TRAINING	3,615,699	3,615,699		
b	PRINTING - PRG MATERIAL	2,483,501	2,483,501		
c	CONTINGENCIES	1,441,094		1,441,094	
d	CONTRACT ACQUISITIONS	400,000		400,000	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	260,743,764	227,443,911	29,823,962	3,475,891
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			16,557,374	1	13,620,003
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			55,578,258	4	58,986,923
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	50,777
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			2,487,580	9	2,605,369
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	33,152,822			
	b	Less: accumulated depreciation	10b	22,210,853	11,214,660	10c	10,941,969
	11	Investments—publicly traded securities			76,460,543	11	88,674,659
	12	Investments—other securities. See Part IV, line 11			1,301,120	12	14,490,046
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			4,710,735	15	9,278,647
	16	Total assets. Add lines 1 through 15 (must equal line 34)			168,310,270	16	198,648,393
Liabilities	17	Accounts payable and accrued expenses			41,305,609	17	45,929,246
	18	Grants payable				18	
	19	Deferred revenue			7,610,563	19	17,315,692
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			8,128,841	25	9,182,979
	26	Total liabilities. Add lines 17 through 25			57,045,013	26	72,427,917
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			111,265,257	27	126,220,476
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			111,265,257	33	126,220,476
	34	Total liabilities and net assets/fund balances			168,310,270	34	198,648,393

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	279,391,722
2	Total expenses (must equal Part IX, column (A), line 25)	2	260,743,764
3	Revenue less expenses Subtract line 2 from line 1	3	18,647,958
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	111,265,257
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,692,739
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	126,220,476

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
25-0965219

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

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

11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions)					12	
13	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input type="checkbox"/>

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	240,380,082	301,324,174	298,916,726	273,951,804	275,772,480	1,390,345,266
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	28,896,769	644,304	686,062	926,419	719,876	31,873,430
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5	269,276,851	301,968,478	299,602,788	274,878,223	276,492,356	1,422,218,696
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						0
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	279,043					279,043
cAdd lines 7a and 7b	279,043					279,043
8Public Support (Subtract line 7c from line 6.)						1,421,939,653

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9Amounts from line 6	269,276,851	301,968,478	299,602,788	274,878,223	276,492,356	1,422,218,696
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,249,000	1,820,770	3,001,104	3,007,091	2,552,824	11,630,789
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2,092	10,345				12,437
cAdd lines 10a and 10b	1,251,092	1,831,115	3,001,104	3,007,091	2,552,824	11,643,226
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)	270,527,943	303,799,593	302,603,892	277,885,314	279,045,180	1,433,861,922
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	99.170%
16Public support percentage from 2010 Schedule A, Part III, line 15	16	99.180%

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	0.810%
18Investment income percentage from 2010 Schedule A, Part III, line 17	18	0.710%
19a33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Additional Data

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

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services			
(Code)	(Expenses \$ 27,132,558	including grants of \$)	(Revenue \$ 675)
THE HEALTH PROGRAM USES RESEARCH TO PROMPT CHANGE THAT MAKES COMMUNITIES SAFER AND ENVIRONMENTS HEALTHIER, IMPROVES HEALTHCARE, AND RAISES THE QUALITY OF LIFE THE PROGRAM SPECIALIZES IN HEALTH POLICY RESEARCH, COMMUNICATIONS, AND INFORMATION SCIENCES AND SERVES FEDERAL, STATE, AND LOCAL GOVERNMENTS, FOUNDATIONS, PRIVATE HEALTHCARE PROVIDERS, UNIVERSITIES, AND THE PUBLIC THE PROGRAM'S MULTIDISCIPLINARY HEALTH SERVICES AND POLICY RESEARCH GROUP DESIGNS, IMPLEMENTS AND EVALUATES POLICIES THROUGH BOTH TRADITIONAL RESEARCH METHODS AND TECHNICAL ASSISTANCE THE PROGRAM'S HEALTH COMMUNICATORS HAVE DEVELOPED MANY SUCCESSFUL PUBLIC HEALTH CAMPAIGNS TO INCREASE AWARENESS AND PROMOTE HEALTHY BEHAVIORS AMONG DIVERSE POPULATIONS			
(Code)	(Expenses \$ 20,615,574	including grants of \$)	(Revenue \$ 290,466)
AIR'S FEDERAL STATISTICS PROGRAM WORKS WITH THE NATIONAL CENTER FOR EDUCATION STATISTICS (NCES), WHICH IS THE FEDERAL GOVERNMENT'S PRIMARY SOURCE FOR COLLECTING AND ANALYZING STATISTICAL DATA ABOUT PUBLIC EDUCATION IN THE UNITED STATES AND AROUND THE WORLD THE INFORMATION PROVIDED BY OUR EXPERTS CONTRIBUTES TO THE DEVELOPMENT OF HIGH-QUALITY STATISTICS ABOUT EDUCATION THAT INFORM DISCUSSION AND DEBATE AT THE DECISION-MAKING LEVELS OF NATIONAL, STATE AND LOCAL GOVERNMENTS			
(Code)	(Expenses \$ 13,256,625	including grants of \$)	(Revenue \$)
AIR'S HUMAN & SOCIAL DEVELOPMENT PROGRAM PROMOTES THE OVERALL HEALTH AND DEVELOPMENT OF CHILDREN, YOUTH AND FAMILIES, ESPECIALLY THEIR SOCIAL, EMOTIONAL AND MENTAL WELL-BEING, SO THAT THEY MAY THRIVE AT HOME, SCHOOL, WORK AND THE COMMUNITY THESE OUTCOMES ARE REALIZED BY MAKING THE SYSTEMS DELIVERING HUMAN, SOCIAL AND EDUCATIONAL SERVICES MORE EFFECTIVE AND COLLABORATIVE THROUGH RESEARCH AND EVALUATION, TRAINING, TECHNICAL ASSISTANCE AND CAPACITY BUILDING STRATEGIES FOR INDIVIDUALS, THE WORKFORCE AND ORGANIZATIONS STAFF EXPERTISE SPANS PUBLIC HEALTH SYSTEMS, MENTAL HEALTH AND SUBSTANCE ABUSE PROGRAMS, YOUTH LGBT SERVICES, JUVENILE JUSTICE, CHILD WELFARE, EDUCATION, AND SOCIAL AND RECREATIONAL SERVICES			
(Code)	(Expenses \$ 528,009	including grants of \$)	(Revenue \$)
AIR'S ANALYSIS OF LONGITUDINAL DATA IN EDUCATION RESEARCH PROGRAM INFORMS EDUCATION POLICY DEVELOPMENT THROUGH ANALYSES OF DATA ON INDIVIDUAL STUDENTS AND TEACHERS OVER TIME THE PROGRAM FOCUSES ON HOW TEACHER POLICIES, GOVERNANCE POLICIES, AND SOCIAL AND ECONOMIC COMMUNITY CONDITIONS AFFECT OUTCOMES FOR TEACHERS AND THEIR STUDENTS BY CAPITALIZING ON RICH LONGITUDINAL DATA, THE PROGRAM EXPLORES A BREADTH OF CRITICAL EDUCATION ISSUES AND PRESENTS RESEARCH ADVANCEMENTS OF THE HIGHEST QUALITY TO POLICYMAKERS IT ALSO HOUSES THE NATIONAL CENTER FOR ANALYSIS OF LONGITUDINAL DATA IN EDUCATION RESEARCH (CALDER), A SCHOLARLY CONSORTIUM WHOSE OTHER MEMBERS INCLUDE SCHOLARS AT DUKE UNIVERSITY, NORTHWESTERN UNIVERSITY, STANFORD UNIVERSITY, THE UNIVERSITY OF MISSOURI, THE UNIVERSITY OF TEXAS AT DALLAS, AND THE UNIVERSITY OF WASHINGTON			

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PATRICIA GURIN BOARD MEMBER, BOARD CHAIR	6 00	X		X				53,750	0	0
GREG BARONI BD MEMBER, BD CMTE CHAIR	5 00	X						50,247	0	0
LAWRENCE BOBO BD MEMBER, BD VICE CHAIR	5 00	X		X				41,250	0	0
SARA B KIESLER BD MEMBER, BD CMTE CHAIR	5 00	X						38,750	0	0
KATHY MCKINLESS BD MEMBER, BD CMTE CHAIR	5 00	X						41,250	0	0
ROBERT F BORUCH BOARD MEMBER	2 00	X						23,750	0	0
NANCY CANTOR BOARD MEMBER	2 00	X						20,000	0	0
DELANO LEWIS BOARD MEMBER	2 00	X						28,750	0	0
EDWARD HAMBURG BOARD MEMBER	2 00	X						26,250	0	0
ANDREW LIAKOPOULOS BOARD MEMBER	2 00	X						21,250	0	0
SOL PELAVIN BD MEMBER, BD CMTE CHAIR	6 00	X		X				1,347,121	136,492	16,590
DAVID MYERS BOARD MEMBER, PRES /CEO	40 00	X		X				566,304	57,379	161,453
MARIJO AHLGRIMM TREASURER, SR VP AND CFO	40 00			X				354,687	35,938	37,089
DONA KILPATRICK SECRETARY	40 00			X				184,546	18,698	33,999
MICHAEL KANE EXECUTIVE VICE PRESIDENT	40 00				X			1,959,538	198,543	75,012
JON COHEN EXECUTIVE VICE PRESIDENT	40 00				X			525,064	70,247	239,337
GINA BURKHARDT EXECUTIVE VICE PRESIDENT	40 00				X			370,188	37,508	83,942
MARK FANNING SR VICE PRESIDENT	40 00				X			353,662	0	48,893
MARK KUTNER SR VICE PRESIDENT	40 00				X			396,968	0	82,634
THOMAS JESULAITIS CHF CONTRACTS/GRANTS OFFICER	40 00				X			198,259	0	62,547
MARILYN MOON SR VICE PRESIDENT	40 00				X			376,737	0	51,564
LAURA SALGANIK SR VICE PRESIDENT	40 00				X			356,011	0	72,575
JANE BENBOW VICE PRESIDENT	40 00				X			280,056	0	34,899
STEPHEN KROMER VICE PRESIDENT	40 00				X			426,538	57,065	84,141
DIANE PELAVIN EXECUTIVE VICE PRESIDENT	40 00				X			436,298	44,206	12,723

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHERYL VINCE WHITMAN SR VICE PRESIDENT	40 00					X		372,738	0	88,273
SUSAN LAPHAM MANAGING RESEARCHER	40 00					X		288,903	0	44,671
DAVID OSHER VICE PRESIDENT	40 00					X		297,532	0	78,475
GARY PHILLIPS VICE PRESIDENT	40 00					X		411,011	0	43,926
MARK SCHNEIDER VICE PRESIDENT	40 00					X		307,779	0	70,096
RICHARD A SMITH FORMER BOARD MEMBER	1 00						X	40,000	0	0
JANET ROBB FORMER SR VP, FORMER KEY EMPLOYEE	0 00						X	234,333	0	4,841
GEORGE BOHRNSTEDT SR VP, FORMER KEY EMPLOYEE	24 00						X	212,386	0	66,871

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

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

Employer identification number
25-0965219

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

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

1a

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

b

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

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

Part III

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

3

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

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

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

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

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

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		16,431,095	10,407,888	6,023,207
d Equipment		11,322,679	7,671,627	3,651,052
e Other		5,399,048	4,131,338	1,267,710
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				10,941,969

Part XI

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

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

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number
25-0965219

Part I

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

1

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

☒ Yes

☐ No

2

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

3

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
CENTRAL AMERICA AND THE CARIBBEAN	9	491	PROGRAM SERVICES	SEE PART V	10,093,960
MIDDLE EAST AND NORTH AFRICA	11	189	PROGRAM SERVICES	SEE PART V	1,008,920
RUSSIA & THE NEWLY INDEPENDENT STATES	1	49	PROGRAM SERVICES	SUPPORT TO VOCATIONAL EDUCATIONAL CENTERS	604,451
SOUTH ASIA	14	671	PROGRAM SERVICES	IMPROVING STUDENT LEARNING OUTCOME	9,251,403
SUB-SAHARAN AFRICA	6	109	PROGRAM SERVICES	SEE PART V	5,237,539
EUROPE (INCLUDING ICELAND & GREENLAND)			INVESTMENTS		5,139,595
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		9,448,827
EAST ASIA AND THE PACIFIC			INVESTMENTS		287,108
SUB-SAHARAN AFRICA			INVESTMENTS		375,375
NORTH AMERICA			INVESTMENTS		311,115
SOUTH AMERICA			INVESTMENTS		210,350
RUSSIA & THE NEWLY INDEPENDENT STATES			INVESTMENTS		47,720
3a Sub-total	41	1,509			41,071,803
b Total from continuation sheets to Part I	0	0			944,560
c Totals (add lines 3a and 3b)	41	1,509			42,016,363

1

3 Enter total number of other organizations or entities ►

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Part V if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

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

Schedule F (Form 990) 2011

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
25-0965219

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

16

3

Enter total number of other organizations listed in the line 1 table ▶

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AIR'S GRANTS ARE UNRESTRICTED CONTRIBUTIONS OF DE MINIMIS AMOUNTS AND AS SUCH DO NOT REQUIRE ONGOING MONITORING
PART II, LINE 1, COLUMN(H)	PURPOSE OF GRANT	INTERSECTION FOR THE ARTS - SPONSORSHIP FOR THE TEACHER SALARY PROJECT, WORLD PREMIER OF AMERICAN TEACHER & CELEBRATION & EAST COAST PREMIER OF AMERICAN TEACHER PORTLAND SCHOOLS FOUNDATION - DONATION FOR 2011 ANNUAL CELEBRATING STUDENTS SUCCESS AWARDS & 2011/2012 OREGON TEACHER OF THE YEAR PROGRAM

Software ID:

Software Version:

EIN: 25-0965219

Name: AMERICAN INSTITUTES FOR RESEARCH IN THE
BEHAVIORAL SCIENCES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN EDUCATIONAL RESEARCH ASSOCIATION (AERA)1430 K STREET NW STE 1200 WASHINGTON, DC 20005	23- 7003537	501(C)(3)	27,500				CONTRIBUTION FOR 2011 AERA ANNUAL MEETING AND BROWN LECTURE IN EDUCATION RESEARCH
COLLEGE BOUND INC128 M STREET NW STE 220 WASHINGTON, DC 20024	52- 1761312	501(C)(3)	60,000				DONATION FOR SCHOLARSHIP PROGRAM AND 20TH ANNIVERSARY GALA RECEPTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDITORIAL PROJECTS IN EDUCATION INC 6935 ARLINGTON ROAD BETHESDA, MD 20814	53-0246895	501(C)(3)	70,000				DONATION FOR 2011 EVENT PARTNERSHIP
EDUCATION WRITERS ASSOC 2122 P STREET NW SUITE 201 WASHINGTON, DC 20037	23-7439790	501(C)(3)	44,710				DONATION FOR EDUCATION WRITERS ASSOC 64TH NAT'L SEMINAR

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR STUDENT COMMUNICATION INC48 UNIVERSITY PLACE SUITE 305 PRINCETON, NJ 08540	22-1926453	501(C)(3)	8,000				SPONSORSHIP OF BUSINESS TODAY INT'L CONFERENCE NOV 2011
HECHINGER INSTITUTE ON EDUCATION AND MEDIA TEACHERS COLLEGE COLUMBIA UNIV525 W 120 STTEET BOX 127 NEW YORK, NY 10027	13-1624202	501(C)(3)	37,500				SPONSORSHIP OF THE HECHINGER REPORT- APRIL, JUNE AND OCTOBER 2011

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL RESCUE COMMITTEE INC122 EAST 42ND STREET NEW YORK, NY 101681289	13-5660870	501(C)(3)	9,000				DONATION FOR EAST AFRICA FAMINE
INTERSECTION FOR THE ARTS925 MISSION STREET SUITE 109 SAN FRANCISCO, CA 94103	94-1593216	501(C)(3)	6,125				SEE SCHEDULE I, PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAY YES TO EDUCATION162 WEST 56TH STREET SUITE 405 NEW YORK, NY 10019	22-3139858	501(C)(3)	25,000				DONATION FOR EDUCATION BENEFIT DINNER MAY 2011
SOCIETY FOR RESEARCH AND EDUCATION EFFECTIVENESS 2040 SHERIDAN RD EVANSTON, IL 60208	26-4739791	501(C)(3)	40,000				SUPPORT FOR SREE SPRING AND FALL 2011 CONFERENCES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTLAND SCHOOLS FOUNDATION2069 NE HOYT ST PORTLAND,OR 97232	93-1149789	501(C)(3)	40,000				SEE SCHEDULE I, PART IV
UNIVERSITY SYSTEM OF MARYLAND FOUNDATION INC 3300 METZEROTT ROAD ADELPHI, MD 20783	52-1125663	501(C)(3)	35,000				DONATION FOR THE UMD CIPE PROJECT INCL 2012 CONF IN ITALY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEWORM THE WORLD INC30 MEMORIAL DRIVE SUITE E60-275 CAMBRIDGE, MA 02142	26-3455539	501(C)(3)		53,238	FMV	ALLOCATED SHARE OF FACILITY/IT COSTS	OFFICE SUPPORT FOR FACILITY/IT SERVICES
AMERICAN EDUCATIONAL RESEARCH ASSOCIATION (AERA)1430 K STREET NW STE 1200 WASHINGTON, DC 20005	23-7003537	501(C)(3)		24,573	FMV	MEAL COSTS FOR RECEPTION	SUPPORT FOR THE 2011 RECEPTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNCIL OF CHIEF STATE SCHOOL OFFICERSONE MASSACHUSETTS AVENUE NW SUITE 700 WASHINGTON, DC 20001	53-0198090	501(C)(3)	75,000				2011 NCSA SPONSORSHIP & 2011 CORPORATE PARTNERSHIP
COUNCIL FOR EXCEPTIONAL CHILDREN2900 CRYSTAL DRIVE SUITE 1000 ARLINGTON, VA 22202	52-0886495	501(C)(3)		14,027	FMV	MEAL COSTS FOR RECEPTION	RECEPTION AT CEC ANNUAL CONFERENCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

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

Employer identification number
25-0965219

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	No
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4a Yes	
		4b Yes	
		4c	No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III	5a	No
		5b	No
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: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III	6a	No
		6b	No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	OFFICER AND KEY EMPLOYEE TRAVEL IS PURCHASED USING COMPANY-BILLED CREDIT CARDS. UPON COMPLETION OF TRAVEL, CREDIT CARD CHARGES ARE RECONCILED AND REVIEWED FOR COMPLETENESS OF SUBSTANTIATION IN ACCORDANCE WITH AN ACCOUNTABLE PLAN. SINCE THE TRAVEL IS ACCOUNTED FOR UNDER A ACCOUNTABLE PLAN IT IS NOT CLASSIFIED AS TAXABLE INCOME. ANY TRAVEL FOR COMPANIONS IS APPROVED ON AN EXCEPTION BASIS AND IS GENERALLY DE MINIMIS AND ALSO REPORTED AS TAXABLE INCOME TO THE INDIVIDUAL. GROSS-UP PAYMENTS ARE APPLICABLE TO TAXABLE COMPONENTS OF RELOCATION BENEFITS. AIR'S PRACTICE IS TO PROVIDE TAX ASSISTANCE FOR RELOCATION BENEFITS, PURSUANT TO POLICY.
	PART I, LINES 4A-B	MICHAEL KANE SEVERANCE PAYMENT OF \$962,250. JANET ROBB SEVERANCE PAYMENT OF \$234,333. PART 1, LINE 4B: THE FOLLOWING INDIVIDUALS, ALONG WITH OTHER EXECUTIVES, PARTICIPATED IN A NON-QUALIFIED COMPENSATION PLAN PROVIDING CERTAIN KEY EMPLOYEES WITH THE ANNUAL EQUIVALENT OF THE RETIREMENT CONTRIBUTIONS THEY WOULD HAVE RECEIVED HAD THEY BEEN ELIGIBLE TO FULLY PARTICIPATE IN THE COMPANY'S DEFINED CONTRIBUTION PENSION PLAN. THE PLAN WAS FIRST ESTABLISHED ON 1/1/1996 TO ALLOW DISCRETIONARY CONTRIBUTIONS TO BE MADE TO THE PLAN BY AIR ON BEHALF OF A SELECT GROUP OF MANAGEMENT OR HIGHLY-COMPENSATED EMPLOYEES. THE ELIGIBLE EMPLOYEES ARE EMPLOYEES DESIGNATED FROM TIME TO TIME BY THE PRESIDENT, WITH THE APPROVAL OF THE COMPENSATION COMMITTEE OF THE AIR BOARD OF DIRECTORS, WHO ARE IN "A SELECT GROUP OF MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES" OF AIR. THE PLAN PARTICIPANTS ALSO AGREE TO VESTING PARAMETERS BASED ON APPLICABLE CIRCUMSTANCE AND SERVICE AGREEMENTS. DEFERRED COMPENSATIONS AWARDS (EARNED BUT UNPAID) DURING 2011: GINA BURKHARDT \$23,206; JON COHEN \$160,000; STEPHEN KROMER \$44,100; DAVID MYERS \$112,012; CHERYL VINCE WHITMAN \$26,229.
	PART I, LINE 7	SENIOR OFFICERS PARTICIPATE IN AN EXECUTIVE INCENTIVE PLAN, WHICH PROVIDES FOR INCENTIVE PAYMENTS BASED ON INDIVIDUAL AND ORGANIZATION PERFORMANCE. DIRECTORS OF THE BOARD DO NOT PARTICIPATE IN BONUS OR INCENTIVE PLANS, WITH THE EXCEPTION OF DAVID MYERS AND SOL PELAVIN WHO IN THEIR CEO CAPACITY PARTICIPATE IN THE EXECUTIVE INCENTIVE PLAN. (NOTE: MR. SOL PELAVIN RETIRED FROM HIS POSITION AS AIR'S CEO IN 2011, AND MR. DAVID MYERS BECAME HIS SUCCESSOR.) NON-SENIOR OFFICERS, NON-OFFICER HIGHLY COMPENSATED AND KEY EMPLOYEES MAY RECEIVE BONUSES UNDER AIR'S PERFORMANCE BONUS PROGRAM, WHICH IS A DISCRETIONARY BONUS PROGRAM DESIGNED TO RECOGNIZE EXCEPTIONAL PERFORMANCE.
SUPPLEMENTAL INFORMATION	PART III	PART II COLUMN B(III): THE AMOUNTS REPORTED IN COLUMN B(III) FOR MR. SOL PELAVIN AND MRS. DIANE PELAVIN INCLUDE PAYMENTS OF \$286,940 AND \$138,821, RESPECTIVELY, MADE PURSUANT TO THE NON-QUALIFIED COMPENSATION PLAN (SEE SCHEDULE J, PART III SUPPLEMENTAL INFORMATION FOR SCHEDULE J, PART I, LINE 4B) PROVIDING CERTAIN KEY EXECUTIVES WITH THE ANNUAL EQUIVALENT OF THE RETIREMENT CONTRIBUTION THEY WOULD HAVE RECEIVED HAD THEY BEEN ELIGIBLE TO FULLY PARTICIPATE IN THE COMPANY'S DEFINED CONTRIBUTION PENSION PLAN. ADDITIONALLY, PURSUANT TO AIR'S POLICY FOR PAID TIME-OFF (PTO), MR. SOL PELAVIN AND MRS. DIANE PELAVIN EXCHANGED PREVIOUSLY EARNED, BUT UNTAKEN, PTO FOR CASH, TOTALING \$660,527 AND \$138,637, RESPECTIVELY. THE AMOUNTS REPORTED IN COLUMN B(III) FOR MR. MICHAEL KANE INCLUDE A SEVERANCE PAYMENT OF \$962,250, RETENTION PAYMENTS OF \$307,584, AND PAYMENTS OF \$408,887 MADE PURSUANT TO THE AFOREMENTIONED NON-QUALIFIED COMPENSATION (SEE SCHEDULE J, PART III SUPPLEMENTAL INFORMATION FOR SCHEDULE J, PART I, LINE 4B). THE AMOUNTS REPORTED IN COLUMN B(III) FOR MS. JANET ROBB INCLUDE A SEVERANCE PAYMENT OF \$234,333. PART II, COLUMN C: AMOUNTS REPORTED IN COLUMN C REPRESENT AIR'S PAYMENTS TO THE DEFINED CONTRIBUTION PENSION PLAN AS WELL AS THE ANNUAL ACCRUAL OF CURRENT AND PRIOR YEAR CONTRIBUTIONS TO A NON-QUALIFIED DEFERRED COMPENSATION PLAN TO COVER CERTAIN KEY EXECUTIVES OTHERWISE INELIGIBLE TO FULLY PARTICIPATE IN THE COMPANY'S DEFINED CONTRIBUTION PLAN. CONTRIBUTIONS TO THE PLAN PROVIDE THE EXECUTIVES WITH THE ANNUAL EQUIVALENT OF THE RETIREMENT CONTRIBUTION THEY WOULD HAVE RECEIVED HAD THEY BEEN ELIGIBLE TO FULLY PARTICIPATE IN THE DEFINED CONTRIBUTION PENSION PLAN. PURSUANT TO PLAN TERMS, AMOUNTS REMAIN IN THE DEFERRED PLAN UNTIL THEY BECOME FULLY VESTED. PART II COLUMN D: NONTAXABLE BENEFITS REPRESENT AIR'S PREMIUM PAYMENTS FOR CERTAIN FRINGE BENEFIT OFFERINGS GENERALLY AVAILABLE TO ALL OF ITS EMPLOYEES, INCLUDING HEALTH INSURANCE, LONG-TERM DISABILITY, DENTAL INSURANCE, VISION INSURANCE, AND LONG-TERM CARE INSURANCE.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
SOL PELAVIN	(i)	77,191	408,600	861,330	9,677	5,387	1,362,185	0
	(ii)	3,451	41,400	91,641	980	546	138,018	0
DAVID MYERS	(i)	446,208	113,500	6,596	121,728	24,871	712,903	0
	(ii)	45,211	11,500	668	12,334	2,520	72,233	0
MARIJO AHLGRIMM	(i)	286,303	51,756	16,628	17,708	15,969	388,364	0
	(ii)	29,009	5,244	1,685	1,794	1,618	39,350	0
DONA KILPATRICK	(i)	183,647	0	899	13,224	17,647	215,417	0
	(ii)	18,607	0	91	1,340	1,788	21,826	0
MICHAEL KANE	(i)	371,187	54,480	1,533,871	44,492	23,619	2,027,649	0
	(ii)	37,609	5,520	155,414	4,508	2,393	205,444	0
JON COHEN	(i)	303,420	220,500	1,144	184,338	26,757	736,159	0
	(ii)	40,594	29,500	153	24,662	3,580	98,489	0
GINA BURKHARDT	(i)	320,971	45,484	3,733	61,114	15,105	446,407	0
	(ii)	32,521	4,609	378	6,192	1,531	45,231	0
MARK FANNING	(i)	306,440	37,500	9,722	19,502	29,391	402,555	0
	(ii)	0	0	0	0	0	0	0
MARK KUTNER	(i)	309,130	35,000	52,838	49,000	33,634	479,602	0
	(ii)	0	0	0	0	0	0	0
THOMAS JESULAITIS	(i)	193,937	0	4,322	49,000	13,547	260,806	0
	(ii)	0	0	0	0	0	0	0
MARILYN MOON	(i)	227,073	145,000	4,664	46,749	4,815	428,301	0
	(ii)	0	0	0	0	0	0	0
LAURA SALGANIK	(i)	231,438	119,000	5,573	49,000	23,575	428,586	0
	(ii)	0	0	0	0	0	0	0
JANE BENBOW	(i)	268,761	5,000	6,295	24,941	9,958	314,955	0
	(ii)	0	0	0	0	0	0	0
STEPHEN KROMER	(i)	335,835	88,200	2,503	58,344	15,868	500,750	0
	(ii)	44,930	11,800	335	7,806	2,123	66,994	0
DIANE PELAVIN	(i)	20,293	163,440	252,565	6,221	5,332	447,851	0
	(ii)	2,056	16,560	25,590	630	540	45,376	0
CHERYL VINCE WHITMAN	(i)	355,589	12,500	4,649	75,229	13,044	461,011	0
	(ii)	0	0	0	0	0	0	0
SUSAN LAPHAM	(i)	233,285	7,500	48,118	19,072	25,599	333,574	0
	(ii)	0	0	0	0	0	0	0
DAVID OSHER	(i)	278,150	11,000	8,382	49,000	29,475	376,007	0
	(ii)	0	0	0	0	0	0	0

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
GARY PHILLIPS	(i) (ii)	255,255 0	151,400 0	4,356 0	24,941 0	18,985 0	454,937 0	0 0
MARK SCHNEIDER	(i) (ii)	269,397 0	30,000 0	8,382 0	49,000 0	21,096 0	377,875 0	0 0
RICHARD A SMITH	(i) (ii)	40,000 0	0 0	0 0	0 0	0 0	40,000 0	0 0
JANET ROBB	(i) (ii)	0 0	0 0	234,333 0	0 0	4,841 0	239,174 0	0 0
GEORGE BOHRNSTEDT	(i) (ii)	143,169 0	58,845 0	10,372 0	39,713 0	27,158 0	279,257 0	0 0

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

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

Employer identification number

25-0965219

Part I

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

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

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

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

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

Part II

Loans to and/or From Interested Persons.

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

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

Part III

Grants or Assistance Benefitting Interested Persons.

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

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

Part IV

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MELISSA KUTNER	DAUGHTER OF MARK KUTNER, KEY EMPLOYEE	42,164	REGULAR EMPLOYEE OF AIR		No

Part V

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES	Employer identification number 25-0965219
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Identifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	PAGE 1, PART 1, LINE 1 AND PART III, LINE 1	AIR'S PURPOSE IS TO CONDUCT AND APPLY BEHAVIORAL AND SOCIAL SCIENCE RESEARCH TO IMPROVE PEOPLE'S LIVES AND WELL BEING, WITH A SPECIAL EMPHASIS ON THE DISADVANTAGED THE ACTIVITIES REPORTED HEREIN, PURSUANT TO THE PROVISIONS OF FORM 990, HAVE BEEN COMPILED TO REFLECT THE RESULTS OF OPERATIONS AND FINANCIAL STATUS OF AIR, THE LEGAL ENTITY AND THEREFORE EXCLUDE THE CONSOLIDATED RESULTS OF OTHER NON-FOR-PROFIT ORGANIZATIONS UNDER COMMON CONTROL AND WHOLLY OWNED FOR-PROFIT SUBSIDIARIES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	SOL PELAVIN, CEO, AND DIANE PELAVIN, EXECUTIVE VICE PRESIDENT, ARE SPOUSES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	1 THE FORM 990 AND RELATED SCHEDULES ARE PREPARED UNDER THE GUIDANCE OF THE CEO/PRESIDENT AND CFO/TREASURER 2 THE FORM 990 IS REVIEWED INTERNALLY BY THE CEO/PRESIDENT, CFO/TREASURER, LEGAL COUNSEL, AND THE SENIOR VP OF HUMAN RESOURCES PRIOR TO BEING PROVIDED TO MEMBERS OF THE BOARD 3 THE FORM 990 IS FIRST PROVIDED TO THE AUDIT AND COMPENSATION COMMITTEES OF THE BOARD FOR REVIEW AND THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD PRIOR TO THE DUE DATE (INCLUDING ANY EXTENSIONS)

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, AIR REQUIRES ITS OFFICERS TO COMPLETE A DISCLOSURE FORM, WHICH IS REVIEWED BY THE LEGAL COUNSEL, ETHICS OFFICER, AND CHIEF FINANCIAL OFFICER. OFFICERS ARE REQUIRED TO DISCLOSE ANY RELATIONSHIP OR TRANSACTION WHICH MAY POSE A CONFLICT AND MUST UPDATE THE FORM WHEN THERE HAS BEEN A CHANGE IN CIRCUMSTANCE. IN ADDITION, AIR OFFICERS AND EMPLOYEES ARE REQUIRED TO COMPLY WITH AIR'S CODE OF CONDUCT, WHICH PROVIDES GUIDANCE ON CONFLICTS OF INTEREST. AIR BOARD OF DIRECTORS COMPLETE AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE AND FOLLOW A CONFLICT OF INTEREST POLICY IN ADDITION TO AIR'S CODE OF CONDUCT. THE CONFLICT OF INTEREST QUESTIONNAIRES ARE SUBMITTED TO AND REVIEWED BY THE LEGAL COUNSEL AND SECRETARY OF THE ORGANIZATION.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS (100% COMPOSED OF INDEPENDENT DIRECTORS) EACH YEAR THE COMMITTEE HIRES AN OUTSIDE INDEPENDENT CONSULTANT TO PERFORM A COMPARABILITY REVIEW OF COMPENSATION, WHICH IS COMPLETED USING EXTERNAL PUBLISHED DATA THIS INFORMATION IS INCORPORATED INTO THE FINAL REVIEW AND DECISION PROCESS FOR THOSE INDIVIDUALS REVIEWED BY THE COMMITTEE. WRITTEN MINUTES OF THESE MEETINGS ARE KEPT CONTEMPORANEOUSLY AND MADE AVAILABLE AS REQUESTED FOR THE OTHER KEY EMPLOYEES, MOST FOLLOW THE EXACT SAME PROCESS AS THE CEO ANY OF THE KEY EMPLOYEES WHOSE COMPENSATION IS NOT SET BY THE COMPENSATION COMMITTEE (DUE TO NOT BEING AN OFFICER OR A PROGRAM DIRECTOR) ARE REVIEWED INTERNALLY USING THE SAME TYPE OF DATA BY THE RESPECTIVE PROGRAM DIRECTOR AND/OR THE CEO, WITH APPROVAL BY THE CEO

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	AIR HAS MADE A PUBLIC FILING OF ITS GOVERNING DOCUMENTS WITH THE COMMONWEALTH OF PENNSYLVANIA. A CONDENSED VERSION OF AIR'S FINANCIAL STATEMENTS ARE INCLUDED IN AN ANNUAL REPORT AVAILABLE ON ITS WEBSITE. AIR WILL MAKE ITS COMPLETE SET OF FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST.

Identifier	Return Reference	Explanation
	PART VII, SECTION A, LINE 1A, COLUMN B	CERTAIN DIRECTORS AND OFFICERS SPENT THE FOLLOWING ADDITIONAL AVERAGE HOURS PER WEEK WORKING ON THE BUSINESS OF LEARNING POINT ASSOCIATES WHICH IS A RELATED ENTITY DAVID MYERS 4 HOURS PER WEEK MARIJO AHLGRIMM 4 HOURS PER WEEK DONA KILPATRICK 4 HOURS PER WEEK GINA BURKHARDT 4 HOURS PER WEEK ANDREW LIAKOPOULOS 0 HOURS PER WEEK EDWARD HAMBURG 1 HOUR PER WEEK MICHAEL KANE 4 HOURS PER WEEK SOL PELAVIN 4 HOURS PER WEEK JON COHEN 4 HOURS PER WEEK STEPHEN KROMER 4 HOURS PER WEEK DIANE PELAVIN 4 HOURS PER WEEK

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -3,692,739

Identifier	Return Reference	Explanation
	FORM 990, PART IV, LINE 12 AND PART XII, LINE 2B	AIR PREPARES THE CONSOLIDATED FINANCIAL STATEMENTS WHICH INCLUDE THE ORGANIZATION AND ITS AFFILIATES, THE STATEMENTS ARE AUDITED BY INDEPENDENT AUDITORS ON AN ANNUAL BASIS

Identifier	Return Reference	Explanation
	FORM 990 PART XII, LINE 2C	AIR HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 1A	THE EXECUTIVE COMMITTEE IS COMPRISED OF THE BOARD CHAIR AND CHAIRS OF THE AUDIT, FINANCE, GOVERNANCE, HUMAN RESOURCES AND COMPENSATION COMMITTEES AND THE CHIEF EXECUTIVE OFFICER FOR THE PURPOSE OF EXERCISING ALL OF THE POWERS AND AUTHORITY OF THE FULL BOARD WHEN THE BOARD IS NOT IN SESSION AND WHEN IT IS NOT PRACTICAL OR POSSIBLE FOR THE FULL BOARD TO CONVENE A MEETING A QUORUM IS DEFINED AS FOUR (4) MEMBERS OF THE EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
	FORM 990, PART VII, SECTION B, LINE 1, COLUMN B	COLUMN B DESCRIPTION FOR THE CORKERY GROUP MEDIA STRATEGY SUPPORT TO CDC'S HIV, STD, AND TB PREVENTION PROGRAM COLUMN B DESCRIPTION FOR THE NATIONAL FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH (NFFCMH) PROVIDE SUBCONTRACTED SERVICES FOR COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICE PROGRAM FOR CHILDREN AND THEIR FAMILIES WEB-BASED TRAINING AND TECHNICAL ASSISTANCE TO COMMUNITIES WITH FAMILY DRIVEN CARE COLUMN B DESCRIPTION FOR MACROSYS LLC SUBCONTRACTED SERVICES TO ASSIST IN ACTIVITIES BY AN AIR PRIME CONTRACT

Identifier	Return Reference	Explanation
	FORM 990, PART VIII, LINE 2B	INCLUDING FROM CERTAIN PERSONAL PROPERTY RENTS

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES

Employer identification number

25-0965219

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) NORTH CENTRAL REGIONAL EDUCATIONAL LABORATORY 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 27-0071942	SEE SCHEDULE R, PART VII	IL	0	0	LEARNING POINT ASSOCIATES
(2) COMPENSATION INNOVATIONS IN EDUCATIONS LLC 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 80-0518929	SEE SCHEDULE R, PART VII	IL	0	0	LEARNING POINT ASSOCIATES

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) NEW AMERICAN SCHOOLS 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 52-1730425	TO INCREASE STUDENT ACHIEVEMENT THROUGH EDUCATION	VA	501(C)(3)	11A, TYPE I	AIR	Yes	
(2) AMERICAN INSTITUTES FOR RESEARCH UK LIMITED 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007	BEHAVIORAL AND SOCIAL SCIENCES RESEARCH AND APPLICATIONS	UK			AIR	Yes	
(3) LEARNING POINT ASSOCIATES 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 37-1161423	SEE SCHEDULE R, PART VII	IL	501(C)(3)	7	AIR	Yes	

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispropportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) COLLEGE MEASURES LLC 1700 ROCKVILLE PIKE 400 ROCKVILLE, MD 20852 45-2671930	SEE SCHEDULE R, PART VII	MD	AIR	RELATED	-158,319	148,355		No		Yes		50 000 %

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) PROSPECT ASSOCIATES LTD 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 52-1213051	RESEARCH & SERVICES	MD	AIR HOLDING COMPANY	C			
(2) AIR HOLDING COMPANY 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 52-2205344	EDUCATIONAL SERVICES	DE	AMERICAN INSTITUTES FOR RESEARCH	C		8,313,971	100 000 %
(3) THE MCKENZIE GROUP INC 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007 52-1811969	EDUCATIONAL SERVICES	DE	AIR HOLDING COMPANY	C			

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

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

j

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

k

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

l

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

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

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

r

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

Yes

No

1a

No

1b

No

1c

No

1d

Yes

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

Yes

1p

Yes

1q

No

1r

Yes

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation
	SCHEDULE R, PART I, COLUMN B	NORTH CENTRAL REGIONAL EDUCATIONAL LABORATORY - TO PROVIDE EDUCATIONAL RESEARCH AND DEVELOPMENT SERVICES TO SCHOOLS AND DISTRICTS AS WELL AS TO OTHER EDUCATIONAL ORGANIZATIONS AND AGENCIES IN ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, OHIO, AND WISCONSIN AND FURTHER FOR THE BENEFIT OF THE EDUCATIONAL COMMUNITY GENERALLY, THE CONDUCT OF RESEARCH, SYMPOSIA, AND SCIENTIFIC PROGRAMS AND THE PUBLISHING AND DISSEMINATION OF REPORTS AND RESEARCH
	SCHEDULE R, PART I, COLUMN B	COMPENSATION INNOVATIONS IN EDUCATIONS, LLC - TO PROVIDE SCHOOLS, DISTRICTS AND STATES WITH SUPPORT TO DESIGN AND IMPLEMENT HIGH-QUALITY ALTERNATIVE COMPENSATION SYSTEMS TO IMPROVE TEACHER QUALITY FOR ALL STUDENTS
	SCHEDULE R, PART II, COLUMN B	LEARNING POINT ASSOCIATES - EDUCATION RESEARCH, DEVELOPMENT AND DISSEMINATION OF INFO RE INSTRUCTIONAL IMPROVEMENT, PROFESSIONAL DEVELOPMENT AND EDUCATIONAL APPLICATIONS OF TECHNOLOGY
	SCHEDULE R, PART III, COLUMN B	COLLEGE MEASURES, LLC - TO INFORM AND IMPROVE THE DECISION-MAKING PROCESS FOR STUDENTS, PARENTS, AND POLICY MAKERS

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Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1) LEARNING POINT ASSOCIATES	O	67,212	FMV
(2) LEARNING POINT ASSOCIATES	P	26,614,313	FMV
(3) LEARNING POINT ASSOCIATES	R	1,156,899	FMV
(4) THE MCKENZIE GROUP	R	84,530	FMV
(5) COLLEGE MEASURES LLC	D	250,000	FMV
(6) COLLEGE MEASURES LLC	O	52,273	FMV
(7) COLLEGE MEASURES LLC	P	85,097	FMV