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Form 990

## Return of Organization Exempt From Income Tax

2011

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

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	C Name of organization GEMOLOGICAL INSTITUTE OF AMERICA INC	D Employer identification number 95-3797687
<input type="checkbox"/> Address change	Doing Business As	E Telephone number (760) 603-4000
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address)	F Gross receipts \$ 216,715,607
<input type="checkbox"/> Initial return	5345 ARMADA DRIVE	
<input type="checkbox"/> Terminated		
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4	
<input type="checkbox"/> Application pending	CARLSBAD, CA 920084602	

I Tax-exempt status  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

J Website: ► WWW GIA EDU

K Form of organization  Corporation  Trust  Association  Other ► L Year of formation 1931 M State of legal domicile CA

## Part I Summary

1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets	<input type="checkbox"/>	
3 Number of voting members of the governing body (Part VI, line 1a) . . . . .	3	17
4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	15
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .	5	1,177
6 Total number of volunteers (estimate if necessary) . . . . .	6	23
7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	1,144,560
b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	0

8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	Current Year
	268,910	340,850
9 Program service revenue (Part VIII, line 2g) . . . . .		139,629,427
		153,997,991
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .		6,872,108
		8,099,745
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		13,906,415
		17,573,462
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .		160,676,860
		180,012,048

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	Prior Year	Current Year
	178,278	458,965
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0
		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		69,715,631
		77,623,061
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0
		0
b Total fundraising expenses (Part IX, column (D), line 25) ► 21,570		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . .		41,233,748
		53,019,110
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		111,127,657
		131,101,136
19 Revenue less expenses Subtract line 18 from line 12 . . . . .		49,549,203
		48,910,912

20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year	End of Year
	287,033,716	324,244,613
21 Total liabilities (Part X, line 26) . . . . .		46,824,553
		54,383,296
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .		240,209,163
		269,861,317

## 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 DAVID J TEARLE VP & CFO Type or print name and title	2012-11-07 Date
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Paid Preparer's Use Only	Preparer's signature ► SHARON ZORBACH	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P00125475
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► DELOITTE TAX LLP 655 WEST BROADWAY SUITE 700 SAN DIEGO, CA 921018590			EIN ► 86-1065772
				Phone no ► (619) 232-6500

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

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III **1** Briefly describe the organization's missionSEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT**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 \$ 21,963,473 including grants of \$ 435,326 ) (Revenue \$ 15,787,400 )

EDUCATION SEE SCHEDULE O FOR DESCRIPTION OF EXEMPT PURPOSE ACHIEVEMENTS

**4b** (Code ) (Expenses \$ 93,155,253 including grants of \$ ) (Revenue \$ 138,236,507 )

LABORATORY SEE SCHEDULE O FOR DESCRIPTION OF EXEMPT PURPOSE ACHIEVEMENTS

**4c** (Code ) (Expenses \$ 3,481,603 including grants of \$ ) (Revenue \$ 403,106 )

RESEARCH &amp; PUBLICATIONS SEE SCHEDULE O FOR DESCRIPTION OF EXEMPT PURPOSE ACHIEVEMENTS

**4d** Other program services (Describe in Schedule O )

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

**4e** **Total program service expenses** \$ 118,600,329

**Part IV Checklist of Required Schedules**

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

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

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

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

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

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

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

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

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

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

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

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

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

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

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

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No
8		No
9		No
10	Yes	
11a	Yes	
11b		No
11c		No
11d	Yes	
11e	Yes	
11f	Yes	
12a		No
12b	Yes	
13	Yes	
14a		No
14b	Yes	
15	Yes	
16	Yes	
17		No
18		No
19		No
20a		No
20b		

**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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
24c	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		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		No
28b	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
28c	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	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? If "Yes," complete Schedule L, Part IV	29	Yes	
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
31	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
33	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	Yes	
34	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	34	Yes	
35a	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35a	Yes	
35b	b Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35b	Yes	
36	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37		No
38	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	Yes	
	<b>Note.</b> All Form 990 filers are required to complete Schedule O			

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V 

<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b>	164	<b>Yes</b>	<b>No</b>
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b>	0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	Yes		
<b>2a</b>	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	<b>2a</b>	1,177		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	Yes		
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	Yes		
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	Yes		
<b>4a</b>	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)?	<b>4a</b>	Yes		
<b>b</b>	If "Yes," enter the name of the foreign country <b>BE, BC, HK, IN, IS, UK, SF, TW, AE, TH</b> See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	No		
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	No		
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>	No		
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>	No		
<b>a</b>	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?	<b>7b</b>			
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7c</b>	No		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7d</b>	0		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7e</b>	No		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7f</b>	No		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7g</b>			
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7h</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>8</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>9a</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>	<b>9b</b>			
<b>a</b>	Did the organization make any taxable distributions under section 4966?				
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?				
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter	<b>10a</b>			
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter	<b>11a</b>			
<b>a</b>	Gross income from members or shareholders	<b>11b</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12b</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	<b>13a</b>			
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> 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	<b>13b</b>			
<b>b</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	<b>13c</b>			
<b>c</b>	Enter the aggregate amount of reserves on hand				
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	No		
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>			

**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

1a Enter the number of voting members of the governing body at the end of the tax year . . . . .

1a	17
1b	15

b 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? . . . . .

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? . . . . .

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .

5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .

6 Did the organization have members or stockholders? . . . . .

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? . . . . .

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a The governing body? . . . . .

b Each committee with authority to act on behalf of the governing body? . . . . .

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 . . . . .

	Yes	No
1a	17	
1b	15	
2		No
3		No
4	Yes	
5		No
6		No
7a		No
7b		No
8a	Yes	
8b	Yes	
9		No

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

10a Did the organization have local chapters, branches, or affiliates? . . . . .

b 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?

b 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 . . . . .

b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .

13 Did the organization have a written whistleblower policy? . . . . .

14 Did the organization have a written document retention and destruction policy? . . . . .

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization's CEO, Executive Director, or top management official . . . . .

b Other officers or key employees of the organization . . . . .

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? . . . . .

b 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	No
10a	Yes	
10b	Yes	
11a	Yes	
12a	Yes	
12b	Yes	
12c	Yes	
13	Yes	
14	Yes	
15a	Yes	
15b	Yes	
16a		No
16b		

### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed AK, AR, CA, FL, GA, HI, KY, ME, MD, MA, MI, MS, NH, NJ, NM, NY, OK, OR, PA, WV

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website  Another's website  Upon request

19 Describe in Schedule O whether (and if so, how), the organization 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 ►

DAVID J TEARLE VICE PRESIDENT AND CFO  
5345 ARMADA DRIVE  
CARLSBAD, CA 920084602  
(760) 603-4000

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

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

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

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

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

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

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

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **108**

	<b>Yes</b>	<b>No</b>
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . . .	<b>3</b>	No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . . . . .	<b>4</b>	Yes
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . . . . .	<b>5</b>	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
DLA PIPER US LLP				LEGAL	3,864,543
401 B STREET SUITE 1700					
SAN DIEGO, CA 921014297					
WEXLER WASSERMAN & ASSOCIATES				INSURANCE	968,567
1120 PONCE DE LEON BLVD					
CORAL GABLES, FL 33134					
SIMPLER NORTH AMERICA LP				LEAN TRANSFORMATION SERVICE	485,018
PO BOX 64399					
PITTSBURG, PA 152643979					
DELOITTE TAX LLP				TAX	434,606
13943 COLLECTIONS CENTER DRIVE					
CHICAGO, IL 60693					
DELOITTE & TOUCHE LLP				ACCOUNTING	303,291
PO BOX 403568					
ATLANTA, GA 303843568					

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 **►12**

**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		
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>					
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	340,850				
	<b>g</b> Noncash contributions included in lines 1a-1f \$		119,276				
	<b>h</b> <b>Total.</b> Add lines 1a-1f . . . . .		340,850				
<b>Program Service Revenue</b>	Business Code						
			<b>2a</b> GEMOLOGICAL LABORATORY	541900	138,236,507	138,236,507	
			<b>b</b> TUITION & FEES	611600	15,358,378	15,358,378	
			<b>c</b> GEMOLOGY PUBLICATIONS	511120	403,106	403,106	
			<b>d</b>				
			<b>e</b>				
	<b>f</b> All other program service revenue						
	<b>g</b> <b>Total.</b> Add lines 2a-2f . . . . .		153,997,991				
<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .		3,559,300			3,559,300		
<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .							
<b>5</b> Royalties . . . . .		15,674,472			15,674,472		
<b>6a</b> Gross rents	(i) Real						
<b>b</b> Less rental expenses	(ii) Personal						
<b>c</b> Rental income or (loss)							
<b>d</b> Net rental income or (loss) . . . . .							
<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities						
	37,864,739	901,771					
<b>b</b> Less cost or other basis and sales expenses	(ii) Other						
	33,131,527	1,094,538					
<b>c</b> Gain or (loss)							
	4,733,212	-192,767					
<b>d</b> Net gain or (loss) . . . . .							
		4,540,445		-1,277	4,541,722		
<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .							
<b>b</b> Less direct expenses . . . . .	<b>b</b>						
<b>c</b> Net income or (loss) from fundraising events . . . . .							
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .							
<b>b</b> Less direct expenses . . . . .	<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities . . . . .							
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .							
<b>a</b>	3,973,931						
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>	2,477,494					
<b>c</b> Net income or (loss) from sales of inventory . . . . .			1,496,437	429,022	1,067,415		
<b>Miscellaneous Revenue</b>		Business Code					
<b>11a</b> MISCELLANEOUS INCOME		900099	445,142		54,749	390,393	
<b>b</b> NET MANAGEMENT FEE		900099	26,022		26,022		
<b>c</b> FOREIGN EXCHANGE LOSS		900099	-68,611		-2,349	-66,262	
<b>d</b> All other revenue . . . . .							
<b>e</b> <b>Total.</b> Add lines 11a-11d . . . . .			402,553				
<b>12</b> <b>Total revenue.</b> See Instructions . . . . .			180,012,048	154,427,013	1,144,560	24,099,625	

**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 

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	37,694	37,694		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	263,378	263,378		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	157,893	157,893		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	3,267,945	2,072,692	1,195,253	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7 Other salaries and wages	55,155,533	52,842,888	2,293,423	19,222
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	3,452,887	3,091,387	360,238	1,262
9 Other employee benefits . . . . .	11,274,712	10,554,454	720,258	
10 Payroll taxes . . . . .	4,471,984	4,335,458	135,440	1,086
11 Fees for services (non-employees)				
a Management . . . . .				
b Legal . . . . .	4,092,043		4,092,043	
c Accounting . . . . .	321,279	7,898	313,381	
d Lobbying . . . . .				
e Professional fundraising See Part IV, line 17 . . . . .				
f Investment management fees . . . . .	442,287		442,287	
g Other . . . . .	10,988,347	9,964,624	1,023,723	
12 Advertising and promotion . . . . .	5,156,682	5,150,028	6,654	
13 Office expenses . . . . .	8,466,105	8,067,015	399,090	
14 Information technology . . . . .				
15 Royalties . . . . .	3,100	3,100		
16 Occupancy . . . . .	4,798,562	4,798,562		
17 Travel . . . . .	2,185,659	1,585,738	599,921	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	801,538	716,141	85,397	
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	5,715,762	5,652,220	63,542	
23 Insurance . . . . .	1,137,112	1,033,618	103,494	
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 SMALL FURNITURE & EQUIP	2,810,768	2,819,482	-8,714	0
b FOREIGN WITHHOLDING TAX	2,100,964	2,100,964	0	0
c ARTICLE EXPENSES	1,563,480	1,563,480	0	0
d MAINTENANCE	772,648	772,565	83	0
e				
f All other expenses	1,662,774	1,009,050	653,724	
25 Total functional expenses. Add lines 1 through 24f	131,101,136	118,600,329	12,479,237	21,570
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**

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year
Assets	1 Cash—non-interest-bearing . . . . .	4,621,371	16,938,941
	2 Savings and temporary cash investments . . . . .	29,735,444	22,395,677
	3 Pledges and grants receivable, net . . . . .	538,929	353,608
	4 Accounts receivable, net . . . . .	56,749,231	48,266,799
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .	6	
	7 Notes and loans receivable, net . . . . .	7	
	8 Inventories for sale or use . . . . .	2,877,469	2,712,043
	9 Prepaid expenses and deferred charges . . . . .	2,279,846	2,683,376
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . .	128,490,517	
	10a		
	b Less accumulated depreciation . . . . .	62,275,635	63,879,738
	10b		10c
	11 Investments—publicly traded securities . . . . .	78,694,388	113,493,259
	12 Investments—other securities See Part IV, line 11 . . . . .	12	
	13 Investments—program-related See Part IV, line 11 . . . . .	13	
	14 Intangible assets . . . . .	14	
	15 Other assets See Part IV, line 11 . . . . .	47,657,300	51,186,028
	16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	287,033,716	324,244,613
Liabilities	17 Accounts payable and accrued expenses . . . . .	3,769,797	4,046,250
	18 Grants payable . . . . .	18	
	19 Deferred revenue . . . . .	5,797,579	4,341,331
	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 . . . . .	37,257,177	45,995,715
	26 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	46,824,553	54,383,296
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
	27 Unrestricted net assets . . . . .	227,079,234	256,561,490
	28 Temporarily restricted net assets . . . . .	1,262,843	1,101,582
	29 Permanently restricted net assets . . . . .	11,867,086	12,198,245
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>		
	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 . . . . .	240,209,163	269,861,317
	34 Total liabilities and net assets/fund balances . . . . .	287,033,716	324,244,613

**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	180,012,048
2	Total expenses (must equal Part IX, column (A), line 25)	2	131,101,136
3	Revenue less expenses Subtract line 2 from line 1	3	48,910,912
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	240,209,163
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-19,258,758
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	269,861,317

**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?		<b>2a</b>
2b Were the organization's financial statements audited by an independent accountant?	<b>2b</b> Yes	No
2c 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		<b>2c</b> Yes
2d 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?	<b>3a</b> Yes	
3b 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	<b>3b</b> Yes	

2011

Open to Public  
Inspection**SCHEDULE A**  
(Form 990 or 990EZ)**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.

Department of the Treasury  
Internal Revenue ServiceName of the organization  
GEMOLOGICAL INSTITUTE OF AMERICA INC

Employer identification number

95-3797687

**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

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	
<b>Total</b>									

**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 <b>Total.</b> 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 <b>Public Support.</b> 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 <b>Total support</b> (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 <b>First Five Years</b> 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 <b>stop here</b>						►

**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 <b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization	►
b <b>33 1/3% support test—2010.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	►
17a <b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization	►
b <b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization	►
18 <b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	►

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

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
13 <b>Total support</b> (Add lines 9, 10c, 11 and 12 )						
14 <b>First Five Years</b> 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 <b>stop here</b>						

**Section C. Computation of Public Support Percentage**

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

**Section D. Computation of Investment Income Percentage**

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

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

**Facts And Circumstances Test**

**Explanation**

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**SCHEDULE D**  
(Form 990)**Supplemental Financial Statements****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**  
GEMOLOGICAL INSTITUTE OF AMERICA INC**Employer identification number**

95-3797687

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

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

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

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically importantly land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ► \$ \_\_\_\_\_

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

b Assets included in Form 990, Part X ► \$ \_\_\_\_\_

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

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

<b>a</b> <input type="checkbox"/> Public exhibition	<b>d</b> <input type="checkbox"/> Loan or exchange programs
<b>b</b> <input type="checkbox"/> Scholarly research	<b>e</b> <input type="checkbox"/> Other
<b>c</b> <input type="checkbox"/> 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

	<b>Amount</b>
<b>1c</b>	0
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	0

**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.

	<b>(a) Current Year</b>	<b>(b) Prior Year</b>	<b>(c) Two Years Back</b>	<b>(d) Three Years Back</b>	<b>(e) Four Years Back</b>
<b>1a</b> Beginning of year balance . . . . .	67,584,620	61,080,217	53,275,261	70,869,286	
<b>b</b> Contributions . . . . .	172,917	50,000	268,637	145,033	
<b>c</b> Investment earnings or losses . . . . .	-410,686	6,827,503	7,754,949	-17,502,143	
<b>d</b> Grants or scholarships . . . . .	423,921	171,078			
<b>e</b> Other expenditures for facilities and programs . . . . .	-158,244	39,289			
<b>f</b> Administrative expenses . . . . .	-69,217	162,733	218,630	236,915	
<b>g</b> End of year balance . . . . .	67,150,391	67,584,620	61,080,217	53,275,261	

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

**a** Board designated or quasi-endowment ► 80 430 %

**b** Permanent endowment ► 18 170 %

**c** Term endowment ► 1 400 %

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

<b>(i)</b> unrelated organizations . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>(ii)</b> related organizations . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

<b>3a(i)</b>	<input type="checkbox"/>
<b>3a(ii)</b>	<input type="checkbox"/>
<b>3b</b>	<input type="checkbox"/>

**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.

	<b>Description of property</b>	<b>(a) Cost or other basis (investment)</b>	<b>(b) Cost or other basis (other)</b>	<b>(c) Accumulated depreciation</b>	<b>(d) Book value</b>
<b>1a</b> Land . . . . .		13,227,037			13,227,037
<b>b</b> Buildings . . . . .		58,182,786	24,161,325		34,021,461
<b>c</b> Leasehold improvements . . . . .					
<b>d</b> Equipment . . . . .		20,521,104	13,585,469		6,935,635
<b>e</b> Other . . . . .		36,559,590	24,528,841		12,030,749
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .					66,214,882

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12) ►		

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

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

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

(a) Description	(b) Book value
(1) GEM COLLECTIONS	24,069,584
(2) INVESTMENT IN SUBSIDIARIES	24,833,808
(3) OTHER ASSETS	2,282,636
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.) . . . . . ►	51,186,028

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

(a) Description of Liability	(b) Amount
Federal Income Taxes	
ACCRUED PAYROLL	1,238,442
OTHER CURRENT LIABILITIES	3,053,402
SALES & USE TAX PAYABLE	19,990
OTHER LONG TERM LIABILITIES	3,525,554
ACCRUED PAID TIME OFF	6,674,486
ACCRUED PENSION EXPENSE	22,283,668
INTERCOMPANY ACCOUNTS	9,200,173
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25) ►	45,995,715

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

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1
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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	GIA USES ENDOWMENT FUNDS FOR ACTIVITIES PURSUANT TO THE INSTITUTE'S MISSION, WHICH IS SUMMARIZED IN THE RESPONSE TO PART III, ITEM 1
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE INSTITUTE ADOPTED FASB ASC NO 740-10, ACCOUNTING FOR INCOME TAXES, FORMERLY FASB INTERPRETATION NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT NO 109 ("ASC 740-10"), ON JANUARY 1, 2007 AS OF THE DATE OF ADOPTION THROUGH DECEMBER 31, 2011, THE INSTITUTE HAD NO LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE INSTITUTE WOULD RECOGNIZE INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX BENEFITS AS INCOME TAX EXPENSE WHEN ACCRUED AS THE INSTITUTE HAD NO LIABILITIES FOR UNCERTAIN TAX POSITIONS, THERE HAS BEEN NO ACCRUAL FOR INTEREST AND PENALTIES FOR THE YEARS ENDED DECEMBER 31, 2011 OR 2010
		PART V, LINE 1E THIS AMOUNT REPRESENTS A CHANGE IN PRESENT VALUE FOR THE CURRENT YEAR

2011

Open to Public  
Inspection**SCHEDULE E**  
(Form 990 or 990-EZ)**Schools**

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13,  
or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury  
Internal Revenue ServiceName of the organization  
GEMOLOGICAL INSTITUTE OF AMERICA INC

Employer identification number

95-3797687

**Part I**

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	

- 4 Does the organization maintain the following?

- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain. If you need more space, use Part II

4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	

- 5 Does the organization discriminate by race in any way with respect to

- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II

5a	No	
5b	No	
5c	No	
5d	No	
5e	No	
5f	No	
5g	No	
5h	No	

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- 6b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II

- 7 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

6a	Yes	
6b	No	
7	Yes	

**Part II Supplemental Information**

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	SEE PART II FOR DESCRIPTION OF NONDISCRIMINATION POLICY
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	GIA IS ACCREDITED BY ACCSC, WHICH IS RECOGNIZED BY THE US DEPARTMENT OF EDUCATION. GIA PARTICIPATES IN TITLE IV PROGRAMS. GIA ALSO ACCEPTS VETERAN'S BENEFITS FOR PROGRAMS THAT QUALIFY.
	SCHEDULE E, LINE 3, DESCRIPTION OF NONDISCRIMINATION POLICY	THE INSTITUTE'S BROCHURES AND APPLICATIONS ALL INCLUDE STATEMENTS OF RACIAL NONDISCRIMINATION POLICY. THE INSTITUTE CUSTOMARILY DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS NATIONWIDE OR WORLDWIDE AND FOLLOWS A RACIALLY NONDISCRIMINATION POLICY. ACCORDINGLY, THE NEWSPAPER OR BROADCAST PUBLICATION REQUIREMENT IS SATISFIED BY ADHERENCE TO REV. PROC. 75-50, SECTION 4 02.

2011

Open to Public  
InspectionSCHEDULE F  
(Form 990)

## 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.

Department of the Treasury  
Internal Revenue ServiceName of the organization  
GEMOLOGICAL INSTITUTE OF AMERICA INCEmployer identification number  
95-3797687**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 Activities 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
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	7,895
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	4,500
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	46,801
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	3,500
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	89,197
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	SCHOLARSHIPS TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS	6,000
MIDDLE EAST AND NORTH AFRICA	0	0	INVESTMENTS IN WHOLLY OWNED SUBSIDIARIES	WHOLLY OWNED SUBSIDIARIES	-1,926,300
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS IN WHOLLY OWNED SUBSIDIARIES	WHOLLY OWNED SUBSIDIARIES	1,035,110
SOUTH ASIA	0	0	INVESTMENTS IN WHOLLY OWNED SUBSIDIARIES	WHOLLY OWNED SUBSIDIARIES	4,816,107
SOUTH ASIA	0	0	INVESTMENTS IN WHOLLY OWNED SUBSIDIARIES	INDIRECT OWNERSHIP IN WHOLLY OWNED SUBSIDIARIES	22,246,547
SUB-SAHARAN AFRICA	0	0	INVESTMENTS IN WHOLLY OWNED SUBSIDIARIES	WHOLLY OWNED SUBSIDIARIES	-297,552
SOUTH ASIA	0	0	CAPITAL CONTRIBUTION TO WHOLLY OWNED SUBSIDIARIES	WHOLLY OWNED SUBSIDIARIES	271,200
<b>3a</b> Sub-total	0	0			-733,297
<b>b</b> Total from continuation sheets to Part I	0	0			27,036,302
<b>c</b> Totals (add lines 3a and 3b)	0	0			26,303,005

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

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

**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.

**Part IV Foreign Forms**

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*  Yes  No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*  Yes  No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*  Yes  No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*  Yes  No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*  Yes  No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*  Yes  No

Part V Supplemental Information

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

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 AFTER GIA RECEIVES THE SIGNED ACCEPTANCE FORM AND THE STUDENT ENROLLS, AN AWARD LINE IS SET UP IN PEOPLESOFT TO READY THE AWARD FOR DISBURSEMENT THE AWARD IS DISBURSED THROUGH THE PEOPLESOFT SYSTEM AS A CREDIT TO THE STUDENT'S TUITION ACCOUNT THE FUNDS ARE NOT DISBURSED DIRECTLY TO THE STUDENT UNLESS THE PROVISIONS OF THE SCHOLARSHIP INCLUDE LIVING EXPENSES, ANY SUCH AWARD IS DISBURSED THROUGH PEOPLESOFT IN THE SAME MANNER AS OTHER FINANCIAL AID DESIGNATED FOR LIVING EXPENSES THE INTERNATIONAL SCHOOL MUST INITIATE THE PROCESS OF TRANSFERRING FUNDS FROM GIA CARLSBAD BY SUBMITTING A WRITTEN INVOICE TO THE SCHOLARSHIP COORDINATOR AT GIA CARLSBAD, EMAIL IS ACCEPTABLE THE INVOICE MUST INCLUDE THE SCHOLARSHIP RECIPIENT'S NAME, STUDENT NUMBER, SCHOLARSHIP AWARD AMOUNT IN LOCAL CURRENCY, NAME OF THE SCHOLARSHIP, AND COURSE ENROLLMENT INFORMATION (START DATE, COURSE NAME AND NUMBER) GIA CARLSBAD WILL TRANSFER THE FUNDS TO THE SCHOOL WHEN THE SCHOLARSHIP RECIPIENTS BEGIN THEIR QUALIFIED COURSE OF STUDY AT GIA INDIA, GIA ENGLAND OR GIA (INTERNATIONAL) COMPANY, LTD (AKA GIA THAILAND SCHOOL)

**Schedule I  
(Form 990)**

## **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

2011

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**GEMOLOGICAL INSTITUTE OF AMERICA INC.**

**Employer identification number**

## **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 .

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
(1) FBI HEADQUARTERS LCN UNITMAJOR THEFT PROGRAM935 PENNSYLVANIA AVE NW ROOM 3349 WASHINGTON, DC 20535		GOV'T ENTITY	35,044		FMV		TRAINING SEMINAR TO FBI SPECIAL AGENTS AND LAW ENFORCEMENT OFFICERS

**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
(1) SCHOLARSHIP AWARDS	91		263,378	FMV	TO PARTICIPATE IN THE INSTITUTE'S SCHOOL PROGRAMS

**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 AFTER GIA RECEIVES THE SIGNED ACCEPTANCE FORM AND THE STUDENT ENROLLS, AN AWARD LINE IS SET UP IN PEOPLESOFT TO READY THE AWARD FOR DISBURSEMENT. THE AWARD IS DISBURSED THROUGH THE PEOPLESOFT SYSTEM AS A CREDIT TO THE STUDENT'S TUITION ACCOUNT. THE FUNDS ARE NOT DISBURSED DIRECTLY TO THE STUDENT UNLESS THE PROVISIONS OF THE SCHOLARSHIP INCLUDE LIVING EXPENSES, ANY SUCH AWARD IS DISBURSED THROUGH PEOPLESOFT IN THE SAME MANNER AS OTHER FINANCIAL AID DESIGNATED FOR LIVING EXPENSES

**Schedule J**  
(Form 990)**Compensation Information**

OMB No 1545-0047

**2011****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

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**

GEMOLOGICAL INSTITUTE OF AMERICA INC

**Employer identification number**

95-3797687

**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

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

**1b** Yes

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**2** Yes

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

**a** Receive a severance payment or change-of-control payment?

**4a** Yes

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**4b** No

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

**4c** No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

**5a** No

**a** The organization?

**5b** No

**b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

**6a** 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

**6b** No

**a** The organization?

**7** No

**b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

**8** 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

**9** No

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

**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				
(1) DONNA BAKER	(i) 401,970 (ii) 0	(i) 100,000 (ii) 0	(i) 1,270 (ii) 0	(i) 17,469 (ii) 0	(i) 37,382 (ii) 0	(i) 558,091 (ii) 0	(i) 0 (ii) 0
(2) THOMAS MOSES	(i) 356,914 (ii) 0	(i) 60,000 (ii) 0	(i) 16,161 (ii) 0	(i) 17,426 (ii) 0	(i) 20,639 (ii) 0	(i) 471,140 (ii) 0	(i) 0 (ii) 0
(3) DAVID TEARLE	(i) 286,008 (ii) 0	(i) 40,000 (ii) 0	(i) 1,270 (ii) 0	(i) 17,373 (ii) 0	(i) 20,668 (ii) 0	(i) 365,319 (ii) 0	(i) 0 (ii) 0
(4) TAWFIC FARAH	(i) 257,725 (ii) 0	(i) 25,000 (ii) 0	(i) 7,010 (ii) 0	(i) 17,351 (ii) 0	(i) 12,166 (ii) 0	(i) 319,252 (ii) 0	(i) 0 (ii) 0
(5) LINDA SCHOLL	(i) 219,782 (ii) 0	(i) 20,000 (ii) 0	(i) 2,074 (ii) 0	(i) 16,690 (ii) 0	(i) 6,225 (ii) 0	(i) 264,771 (ii) 0	(i) 0 (ii) 0
(6) KATHRYN KIMMEL	(i) 207,188 (ii) 0	(i) 25,000 (ii) 0	(i) 2,978 (ii) 0	(i) 16,137 (ii) 0	(i) 5,755 (ii) 0	(i) 257,058 (ii) 0	(i) 0 (ii) 0
(7) LINDA ELLIS	(i) 186,964 (ii) 0	(i) 20,000 (ii) 0	(i) 2,685 (ii) 0	(i) 14,512 (ii) 0	(i) 5,214 (ii) 0	(i) 229,375 (ii) 0	(i) 0 (ii) 0
(8) PHILLIP YANTZER	(i) 179,198 (ii) 0	(i) 30,000 (ii) 0	(i) 7,059 (ii) 0	(i) 15,200 (ii) 0	(i) 22,493 (ii) 0	(i) 253,950 (ii) 0	(i) 0 (ii) 0
(9) BRUCE LANZL	(i) 170,526 (ii) 0	(i) 0 (ii) 0	(i) 44,669 (ii) 0	(i) 14,316 (ii) 0	(i) 5,690 (ii) 0	(i) 235,201 (ii) 0	(i) 0 (ii) 0
(10) CYNTHIA SANDERS	(i) 171,778 (ii) 0	(i) 22,000 (ii) 0	(i) 1,579 (ii) 0	(i) 13,500 (ii) 0	(i) 5,820 (ii) 0	(i) 214,677 (ii) 0	(i) 0 (ii) 0
(11) BEVERLY HORI	(i) 282,875 (ii) 0	(i) 40,000 (ii) 0	(i) 2,374 (ii) 0	(i) 17,370 (ii) 0	(i) 19,054 (ii) 0	(i) 361,673 (ii) 0	(i) 0 (ii) 0
(12) JOHN M KING	(i) 176,866 (ii) 0	(i) 22,000 (ii) 0	(i) 11,911 (ii) 0	(i) 14,602 (ii) 0	(i) 12,693 (ii) 0	(i) 238,072 (ii) 0	(i) 0 (ii) 0
(13) DONALD J FOSTER	(i) 182,914 (ii) 0	(i) 14,000 (ii) 0	(i) 911 (ii) 0	(i) 13,785 (ii) 0	(i) 18,718 (ii) 0	(i) 230,328 (ii) 0	(i) 0 (ii) 0
(14) SUSAN SCHINDELAR	(i) 169,558 (ii) 0	(i) 19,000 (ii) 0	(i) 836 (ii) 0	(i) 13,210 (ii) 0	(i) 18,718 (ii) 0	(i) 221,322 (ii) 0	(i) 0 (ii) 0
(15) SABRA C NORRIS	(i) 165,886 (ii) 0	(i) 17,500 (ii) 0	(i) 540 (ii) 0	(i) 12,994 (ii) 0	(i) 9,571 (ii) 0	(i) 206,491 (ii) 0	(i) 0 (ii) 0
(16) TIMOTHY N THOMAS	(i) 171,654 (ii) 0	(i) 13,000 (ii) 0	(i) 1,579 (ii) 0	(i) 8,237 (ii) 0	(i) 18,091 (ii) 0	(i) 212,561 (ii) 0	(i) 0 (ii) 0

**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	AS PROVIDED IN THE GIA EMPLOYEE HANDBOOK, GIA PROVIDES TO ALL EMPLOYEES ON A ONE-TIME BASIS, REIMBURSEMENT UP TO \$100 OF THE EMPLOYEE'S HEALTH CLUB OR FITNESS PROGRAM MEMBERSHIP FEE. GIA WILL ONLY REIMBURSE THE EMPLOYEE ONCE RECEIPTS ARE SUBMITTED. THIS REIMBURSEMENT IS AVAILABLE TO ALL EMPLOYEES.
	PART I, LINE 4A	THE PAYMENT IN THE AMOUNT OF \$7,693 WAS SEVERANCE PAY FOR BRUCE LANZL, VP OF GRADING LAB OPERATIONS. THE PAYMENT WAS MADE BASED ON THE SEPARATION AGREEMENT.

## Schedule L

## **Transactions with Interested Persons**

OMB No 1545-0047

2011

Department of the Treasury  
Internal Revenue Service

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

**Open to Public  
Inspection**

**Name of the organization**

GEMOLOGICAL INSTITUTE OF AMERICA INC

**Employer identification number**

95-3797687

**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.

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

**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.

Complete if the organization answered 'Yes' on Form 950, Part IV, line 20, or Form 950-22, Part IV, line 20									
<b>(a)</b> Name of interested person and purpose	<b>(b)</b> Loan to or from the organization?		<b>(c)</b> Original principal amount	<b>(d)</b> Balance due	<b>(e)</b> In default?		<b>(f)</b> Approved by board or committee?		<b>(g)</b> Written agreement?
	To	From			Yes	No	Yes	No	Yes
Total									
				► \$					

### **Part III Grants or Assistance Benefitting Interested Persons.**

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

**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) SEE PART V		112,021			No
(2)					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
SCHEDULE L, PART IV		THE INSTITUTE STRIVES TO MAINTAIN A BOARD OF GOVERNORS COMPOSED OF OUTSTANDING INDIVIDUALS WITH VARIED BACKGROUNDS WHO ARE ABLE TO CONTRIBUTE IMPORTANTLY TO THE ACCOMPLISHMENT OF THE INSTITUTE'S EXEMPT PURPOSES THESE INCLUDE EXPERTS FROM THE FIELDS OF SCIENCE, ACADEMIA, FINANCE AND BUSINESS THE INSTITUTE IS ALSO FORTUNATE TO HAVE BEEN ABLE TO RECRUIT A NUMBER OF OUTSTANDING EXPERTS (BOTH RETIRED AND ACTIVE) IN THE VARIOUS ASPECTS OF GEMS AND JEWELRY THEREFORE, IT IS NOT SURPRISING THAT FIRMS ASSOCIATED WITH SOME OF THESE GOVERNORS HAVE PARTICIPATED IN THE INSTITUTE'S THREE EXEMPT ACTIVITIES PREVIOUSLY REPORTED TO AND APPROVED BY THE IRS EDUCATION, RESEARCH AND GEM LABORATORY ACTIVITIES (IN ADDITION, A RELATIVELY SMALL PORTION OF THE TRANSACTIONS INVOLVED SALES OF GEMOLOGICAL INSTRUMENTS, BOOKS AND SUPPLIES WHICH HAVE BEEN REPORTED AS NONEXEMPT ACTIVITIES ) SUCH PARTICIPATION BY THESE FIRMS, HOWEVER, BEGAN BEFORE THE ELECTION OF THESE INDIVIDUALS TO THE BOARD OF GOVERNORS AND REPRESENTS A TINY FRACTION OF THE TOTAL ACTIVITIES REPORTED ON FORM 990 OBVIOUSLY, TO BAR FIRMS AFFILIATED WITH BOARD MEMBERS FROM UTILIZING THE SERVICES OF THE INSTITUTE THEY HAD PREVIOUSLY ENJOYED WOULD LIKELY DEPRIVE GIA OF THE SERVICES OF COMMITTED AND TALENTED LEADERS SUCH AS THESE LABORATORYIN 2011, APPROXIMATELY 11,210 CLIENTS SUBMITTED GEMSTONES TO THE GIA LABORATORY, WHILE ONE FIRM ASSOCIATED WITH MEMBERS OF THE BOARD OF GOVERNORS AVAILED ITSELF OF THIS SERVICE AND PAID A REPORTABLE AMOUNT (UNDER SCHEDULE L OF FORM 990) IN THE AGGREGATE, THE FEES FROM TRANSACTIONS WITH SUCH FIRM WERE APPROXIMATELY 0 08 PERCENT OF THE TOTAL TRANSACTIONS OF THIS TYPE FIRMS ASSOCIATED WITH A MEMBER OF THE BOARD OF GOVERNORS PAID THE SAME FEES AS PAID BY ANY OTHER SIMILARLY-SITUATED CLIENT THIS FIRM WAS A CLIENT OF THE GIA LABORATORY BEFORE THE AFFILIATED INDIVIDUAL BECAME A MEMBER OF THE BOARD OF GOVERNORS GOVERNOR EPHRAIM ZIONAFFILIATED FIRM DEHRES LIMITED AGGREGATE AMOUNT PAID TO GIA \$112,021GENERAL COMMENTSTHE AFFILIATION OF THE GOVERNOR IDENTIFIED ABOVE WITH THE FIRM IS EPHRAIM ZION MR ZION IS THE MANAGING DIRECTOR OF DEHRES LTD THE INSTITUTE BELIEVES THAT MR ZION OWNS LESS THAN 35 PERCENT OF HIS RESPECTIVE FIRM NONE OF THE FOREGOING TRANSACTIONS INVOLVED A SHARING OF THE INSTITUTE'S REVENUE

SCHEDULE M  
(Form 990)

## NonCash Contributions

OMB No 1545-0047

2011

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Internal Revenue Service

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

Name of the organization  
GEMOLOGICAL INSTITUTE OF AMERICA INC

Employer identification number

95-3797687

## Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .	X	13	119,276	FMV
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( _____ ) . . . . .				
26 Other ► ( _____ ) . . . . .				
27 Other ► ( _____ ) . . . . .				
28 Other ► ( _____ ) . . . . .				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .		29		8

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	32a	No
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

**Part II**

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

Identifier	Return Reference	Explanation
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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.

**2011****Open to Public  
Inspection**

Name of the organization

GEMOLOGICAL INSTITUTE OF AMERICA INC

**Employer identification number**

95-3797687

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 1, ORGANIZATION MISSION STATEMENT	THE INSTITUTE'S MISSION AND MOST SIGNIFICANT ACTIVITIES TO ORGANIZATION MISSION STATEMENT ARE (A) OPERATING A SCHOOL PROVIDING EDUCATION AND GRANTING DIPLOMAS IN GEMOLOGY AND RELATED AREAS, (B) PROTECTING THE PUBLIC FROM MISREPRESENTATION PERTAINING TO GEMS, DETERRING GEM THEFT, ASSISTING IN THE RECOVERY OF STOLEN PROPERTY AND PROSECUTION OF CRIMINALS, AND PROMOTING STATE OF THE ART RESEARCH INTO THE TECHNIQUES BY WHICH GEMS ARE MODIFIED TECHNOLOGICALLY OR MANUFACTURED SYNTHETICALLY AND AS IMITATIONS OF GEMS, AND (C) SUPPORTING, PERFORMING, AND PUBLISHING SCIENTIFIC RESEARCH AND ANALYSIS RELATED TO GEMS AND GEMOLOGY AND LEARNING IN RELATED FIELDS

Identifier	Return Reference	Explanation
	FORM 990, PAGE 1, ITEM L, YEAR OF FORMATION	THE GEMOLOGICAL INSTITUTE OF AMERICA WAS ESTABLISHED IN 1931 BY ROBERT M SHIPLEY WHO INTRODUCED CORRESPONDENCE COURSES IN THE SAME YEAR. SUBSEQUENTLY, GIA CORPORATIONS WERE FORMED IN OHIO AND IN CALIFORNIA. THE CURRENT GEMOLOGICAL INSTITUTE OF AMERICA, INC., WHICH IS A CALIFORNIA PUBLIC BENEFIT CORPORATION, IS THE SUCCESSOR TO THE CALIFORNIA CORPORATION INITIALLY INCORPORATED IN 1982, WHICH IN TURN IS THE SUCCESSOR TO THE OHIO CORPORATION INCORPORATED IN 1943.

Identifier	Return Reference	Explanation
SIGNIFICANT ACTIVITIES	FORM 990, PAGE 1, LINE 1, ORGANIZATION MISSION STATEMENT AND MOST	GIA IS THE WORLD'S LARGEST AND MOST RESPECTED NONPROFIT INSTITUTE OF GEMOLOGICAL RESEARCH AND LEARNING. THE INSTITUTE'S MISSION AND MOST SIGNIFICANT ACTIVITIES ARE (A) OPERATING A SCHOOL PROVIDING EDUCATION AND GRANTING DIPLOMAS IN GEMOLOGY AND RELATED AREAS, (B) PROTECTING THE PUBLIC FROM MISREPRESENTATION PERTAINING TO GEMS, DETERRING GEM THEFT, ASSISTING IN THE RECOVERY OF STOLEN PROPERTY AND PROSECUTION OF CRIMINALS, AND PROMOTING STATE OF THE ART RESEARCH INTO THE TECHNIQUES BY WHICH GEMS ARE MODIFIED TECHNOLOGICALLY OR MANUFACTURED SYNTHETICALLY AND AS IMITATIONS OF GEMS, AND (C) SUPPORTING, PERFORMING, AND PUBLISHING SCIENTIFIC RESEARCH AND ANALYSIS RELATED TO GEMS AND GEMOLOGY AND LEARNING IN RELATED FIELDS. GIA OFFERS A COMPREHENSIVE GEMOLOGY CURRICULUM TAUGHT BY A FULL-TIME, PROFESSIONAL FACULTY TO REGULARLY ENROLLED STUDENTS AT ITS ON-CAMPUS FACILITIES IN CARLSBAD, CALIFORNIA AND NEW YORK CITY. GIA ALSO OFFERS EXTENSIVE DISTANCE EDUCATION. GIA'S RESEARCHERS UTILIZE SOPHISTICATED ANALYTICAL TECHNIQUES AND EQUIPMENT TO ADVANCE THE SCIENCE OF GEMOLOGY, AND TO DETECT SYNTHETIC AND ALTERED GEMS. ITS LIBRARY AND QUARTERLY PUBLICATION, GEMS & GEMOLOGY, COLLECT AND DISSEMINATE RESEARCH ON GEMS. THE GIA'S LABORATORY PROTECTS THE PUBLIC FROM MISREPRESENTATION ABOUT GEMS, DETERS GEM THEFT, AND HELPS LAW ENFORCEMENT BY TRACING STOLEN GEMS, WHILE PROMOTING STATE-OF-THE-ART RESEARCH.

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINES 4A	<p>EDUCATION GIA OFFERS A COMPREHENSIVE GEMOLOGY CURRICULUM AT THE INSTITUTE'S CALIFORNIA AND NEW YORK CAMPUSES, AND THROUGH INTERNATIONAL SUBSIDIARIES IN INDIA, THAILAND, HONG KONG, ENGLAND, SOUTH AFRICA, BOTSWANA, DUBAI, AND TAIWAN, AND LICENSEES IN ITALY, JAPAN, KOREA, AND RUSSIA DISTANCE EDUCATION COURSES ARE DISTRIBUTED DOMESTICALLY AND INTERNATIONALLY IN A VARIETY OF LANGUAGES IN 2011, TOTAL ENROLLMENTS WERE 15,892, COMPRISING 3,417 ON-CAMPUS, AND 12,475 DISTANCE-EDUCATION ENROLLMENTS GIA'S EDUCATIONAL OFFERINGS COVER THE GAMUT OF GEMOLOGY SUBJECTS, INCLUDING, BUT NOT LIMITED TO (A) THE USE OF GEMOLOGICAL INSTRUMENTS, (B) THE OPTICAL AND PHYSICAL PROPERTIES OF DIAMONDS, GEMSTONES, PEARLS AND OTHER NATURAL ORGANIC GEM MATERIALS, (C) SYNTHETIC DIAMONDS AND DIAMOND SIMULANTS, (D) DETECTION OF FRACTURE-FILLED DIAMONDS AND SYNTHETIC DIAMONDS, (E) DETERMINATION OF COLOR, CLARITY, CUT, AND CARAT WEIGHT OF DIAMONDS, (F) APPLICATION OF FTC GUIDELINES FOR JEWELRY TRANSACTIONS, (G) DETECTION OF SYNTHETIC, TREATED, IMITATION OR ASSEMBLED COLORED GEM MATERIALS, AND (H) DETECTION OF CULTURED, IMITATION, ASSEMBLED AND TREATED PEARLS A GRADUATE GEMOLOGIST (G.G.) DIPLOMA FROM GIA IS RECOGNIZED AROUND THE GLOBE AS A KEY CREDENTIAL IN THE GEMOLOGICAL WORLD IN 2003, IN RESPONSE TO A GROWING NEED FOR QUALITY SCIENCE COURSES FOR CHILDREN, GIA CREATED THE JUNIOR GEMOLOGIST PROGRAM THE JUNIOR GEMOLOGIST PROGRAM TEACHES GEMOLOGY, GEOLOGY AND MINERALOGY TO LOCAL STUDENTS AND YOUTH GROUPS, WITH INSTRUCTION PROVIDED BY THE INSTITUTE'S INSTRUCTORS AND MEMBERS OF THE GEM AND JEWELRY INDUSTRY THE MATERIAL IS PRESENTED IN AN INTERACTIVE AND SCIENTIFIC WORKSHOP THAT INCLUDES HANDS-ON TRAINING WITH GEMOLOGICAL INSTRUMENTS AND EQUIPMENT IN 2011, APPROXIMATELY 3,971 STUDENTS ATTENDED THE JUNIOR GEMOLOGIST PROGRAM GIA HOSTS A JEWELRY CAREER FAIR AND OPEN HOUSE AT ITS CAMPUS IN CALIFORNIA ON AN ANNUAL BASIS THE EVENT IS FREE AND OPEN TO THE PUBLIC AS THE JEWELRY INDUSTRY'S LARGEST JOB FAIR, THE EVENT ALWAYS ATTRACTS THE INDUSTRY'S TOP RETAILERS, MANUFACTURERS, LABORATORIES AND WHOLESALERS INTERESTED IN HIRING GIA STUDENTS AND GRADUATES IN 2011, APPROXIMATELY 600 INDIVIDUALS ATTENDED THE CAREER FAIR AND OPEN HOUSE EVENT THE MISSION OF THE INSTITUTE'S RICHARD T. LIDDOCAIT GEMOLOGICAL LIBRARY AND INFORMATION CENTER IN CARLSBAD, CALIFORNIA IS TO CONTINUE AS THE WORLD'S PREMIER RESOURCE FOR INFORMATION IN THE FIELDS OF GEM AND JEWELRY-RELATED STUDIES AS SUCH, THE INSTITUTE PROMOTES THE USE OF ITS RESOURCES FOR EDUCATION AND RESEARCH BY THE PUBLIC, THE GEM AND JEWELRY INDUSTRY, AND THE INSTITUTE'S STUDENTS, FACULTY AND ALUMNI THE INSTITUTE'S LIBRARY HOUSES THE WORLD'S LARGEST COLLECTION OF DIAMOND, GEM AND JEWELRY RESOURCE MATERIALS WHETHER BY PHONE, E-MAIL OR IN PERSON, THE LIBRARY STAFF SERVES SCIENTISTS, JEWELERS, GEMOLOGISTS AND STUDENTS FROM EVERY CORNER OF THE GLOBE THE EXPERT LIBRARY STAFF DRAWS UPON A GROWING COLLECTION OF OVER 13,000 VOLUMES IN ITS CIRCULATING COLLECTION, 25,000 VOLUMES IN THE RENOWNED CARTIER RARE BOOK REPOSITORY AND ARCHIVES, OVER 100,000 PHOTOGRAPHIC IMAGES, 1,300 VIDEOS/DVDS, APPROXIMATELY 700 JOURNAL AND MAGAZINE TITLES, 200 CD-ROMS AND 120 AUDIO CDS TO PROVIDE READY REFERENCE IN THE FIELDS OF GEMOLOGY AND JEWELRY THE INSTITUTE'S MUSEUM ALSO EDUCATES THE PUBLIC ON GEMS AND GEMOLOGY, DISPLAYING CUT GEMS, MINERAL SPECIMENS AND JEWELRY THE MUSEUM HAS HOSTED A SERIES OF THEMED EXHIBITS IN 2011, 4,898 GUESTS VISITED AND TOURED THE MUSEUM THROUGHOUT THE YEAR AS DISCUSSED BELOW, THE INSTITUTE PUBLISHES GEMS &amp; GEMOLOGY, WHICH EDUCATES ITS READERSHIP ABOUT THE LATEST DISCOVERIES IN GEMOLOGY</p>

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4B	<p>LABORATORY THE MISSION OF THE INSTITUTES LABORATORY IS TO PROTECT THE PUBLIC FROM MISREPRESENTATION PERTAINING TO GEMS (WHETHER INNOCENT, NEGIGENT OR INTENTIONAL), TO DETER GEM THEFT, TO ASSIST IN RECOVERY OF STOLEN PROPERTY AND PROSECUTION OF CRIMINALS, AND TO PROMOTE STATE-OF-THE-ART RESEARCH INTO THE TECHNIQUES BY WHICH GEMS ARE MODIFIED TECHNOLOGICALLY OR MANUFACTURED SYNTHETICALLY. THE FBI'S JEWELRY AND GEM PROGRAM HAS DESIGNATED GIA AS A PARTNER LISTED ON THE FBI WEBSITE IN COMBATING GEM THEFT. IN 2011, THE LABORATORY FLAGGED 529 STOLEN GEMSTONES IN ITS DATABASE, AND RECOVERED 35 GEMSTONES IN 28 CASES IN WHICH STONES WERE RESUBMITTED TO THE LABORATORY AFTER HAVING BEEN STOLEN. GIA ALSO REGULARLY ASSISTS OTHER GOVERNMENT AGENCIES. IN 2011, GIA ISSUED 5 DIAMOND GRADING REPORTS FOR LAW ENFORCEMENT AGENCIES PER REQUEST OF THE FBI. IN 2011, GIA OFFERED A TWO-WEEK GEMOLOGY TRAINING SEMINAR TO 10 FBI SPECIAL AGENTS, 7 SPECIAL AGENTS FROM IMMIGRATION AND CUSTOMS ENFORCEMENT, AND LOCAL LAW ENFORCEMENT OFFICERS FROM HOUSTON AND MIAMI. THE PURPOSE OF THE TRAINING SEMINAR WAS TO ASSIST THE LAW ENFORCEMENT OFFICERS IN THE INVESTIGATION AND PROSECUTION OF JEWELRY RELATED CRIMES. FURTHERMORE, GIA PROVIDED SUPPORT AND INFORMATION TO THE DEPARTMENT OF HOMELAND SECURITY. THE LABORATORY FULFILLS ITS MISSION BY EXAMINING AND CLASSIFYING INDIVIDUAL GEM MATERIALS SUBMITTED TO THE GIA LABORATORY AND ITS INTERNATIONAL SUBSIDIARIES' LABORATORIES. DIAMONDS AND SYNTHETIC DIAMONDS ARE IDENTIFIED AND GRADED, WITH REPORTS ISSUED ON THEIR PRECISE IDENTIFYING FEATURES AND WITH QUALITY ASSESSMENTS ON THE 4CS: COLOR, CLARITY, CUT AND CARAT WEIGHT. COLORED GEMSTONES, SYNTHETIC COLORED STONES, PEARLS AND CULTURED PEARLS ARE IDENTIFIED, WITH REPORTS ISSUED UPON CLIENT REQUEST. THE DISTINGUISHING CHARACTERISTICS AND FEATURES OF A GIVEN GEM ARE UNIQUE TO THAT GEM IN MUCH THE SAME WAY A FINGERPRINT IS UNIQUE TO AN INDIVIDUAL PERSON. ONCE A GEM HAS BEEN SUBMITTED FOR EXAMINATION, ITS CHARACTERISTICS AND FEATURES ARE RECORDED FOR FUTURE REFERENCE IN CASE IT IS EVER RESUBMITTED, EITHER IN THE NORMAL COURSE OR IN QUESTIONABLE CIRCUMSTANCES, SUCH AS WITH LOST OR STOLEN ITEMS. ADDITIONALLY, IF REQUESTED BY THE CLIENT, AN IDENTIFICATION CODE CAN BE LASER INSCRIBED UPON THE GEM. THE SUBSTANTIAL AND CONTINUOUS VOLUME OF GEM MATERIALS THAT ARE SUBMITTED FOR EXAMINATION, TOGETHER WITH THE LARGE COLLECTION OF COMPARISON GEMS ACQUIRED BY GIA, CONSTITUTE AN INVALUABLE DATABASE FOR RESEARCH AND PUBLIC SERVICE CONDUCTED BY THE INSTITUTE TO MAKE POSSIBLE THIS PUBLIC SERVICE. GIA CHARGES RELATIVELY MODEST FEES THAT VARY BY THE TYPE AND SIZE OF THE GEM MATERIAL. IT SHOULD BE NOTED THAT GIA DOES NOT APPRAISE ANY GEM MATERIALS OR OTHERWISE ESTABLISH THEIR MARKET VALUE. COMMERCE IN GEMS HAS BECOME MORE GLOBAL OVER THE PAST DECADE, WITH THE RESULT THAT MANY GEM MATERIALS ARE SOLD BY FOREIGN GEM OWNERS OR DEALERS BUT ULTIMATELY FIND THEIR WAY TO THE U.S. MARKET, EITHER THROUGH WHOLESALE DISTRIBUTION OR FUTURE RESALE. MOST DIAMONDS PURCHASED IN THE U.S. HAVE BEEN MINED AND PROCESSED OUTSIDE OF THIS COUNTRY. SOME PROPORTION OF THOSE DIAMONDS HAVE HISTORICALLY NOT BEEN SUBMITTED TO GIA'S LABORATORY BECAUSE OF THE GEOGRAPHIC DISTANCE BETWEEN GIA'S LABORATORY FACILITIES IN CALIFORNIA AND NEW YORK AND THE FAR FLUNG LOCATIONS OF MINES AND DEALERS. TO ENHANCE ITS ABILITY TO PURSUE THE MISSION OF PROTECTING THE GEM PURCHASING PUBLIC, DETERRING THEFT, AND ASSISTING IN RECOVERY OF STOLEN PROPERTY AND PROSECUTION OF CRIMINALS, GIA OPERATES LABORATORIES THROUGH ITS BRANCH AND WHOLLY-OWNED SUBSIDIARIES IN BOTSWANA, HONG KONG, INDIA, ISRAEL, SOUTH AFRICA, AND THAILAND, AND GIA OPERATES TAKE-IN WINDOWS OFFERING LOGISTICAL SUPPORT THROUGH ITS WHOLLY-OWNED SUBSIDIARY IN DUBAI.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4C	<p>RESEARCH &amp; PUBLICATIONS THE INSTITUTE'S RESEARCHERS UTILIZE SOPHISTICATED ANALYTICAL TECHNIQUES AND SCIENTIFIC EQUIPMENT TO ADVANCE THE SCIENCE OF GEMOLOGY, INCLUDING DETECTION OF SYNTHETIC GEMS, CULTURED PEARLS AND TREATED NATURAL GEMS THE MISSION OF THE RESEARCH DEPARTMENT IS TO (1) CHARACTERIZE THE GEMOLOGICAL PROPERTIES OF GEM MATERIALS AND DEVELOP PRACTICAL WAYS TO IDENTIFY THEM, (2) UNDERSTAND THE CONDITIONS OF GEMSTONE FORMATION IN THE EARTH, AS WELL AS THE CONDITIONS OF GEM TREATMENT AND SYNTHESIS IN THE LABORATORY, AS A FURTHER BASIS FOR DEVELOPING MEANS OF GEM IDENTIFICATION, (3) INVESTIGATE THE FACTORS THAT ARE RESPONSIBLE FOR THE APPEARANCE OF DIAMONDS AND OTHER GEM MATERIALS, SO AS TO ESTABLISH METHODS TO EVALUATE THEIR QUALITY, AND (4) DESIGN AND IMPROVE INSTRUMENTATIONS FOR GEM STONE TESTING THE INSTITUTE IS THE WORLD LEADER IN RESEARCHING THE METHODS BY WHICH GEM MATERIALS CAN BE ENHANCED IN COLOR OR CLARITY OR SYNTHESIZED IN A LABORATORY THIS RESEARCH HELPS PROTECT THE PUBLIC FROM POSSIBLE MISREPRESENTATIONS PERTAINING TO GEM MATERIALS THE INSTITUTE ACTS AS A CONSUMER ADVOCATE TO ENSURE THAT CONSUMERS, ALONG WITH RETAILERS AND WHOLESALERS, ARE FULLY APPRISED OF THE TRUE CHARACTER - NATURAL, ENHANCED, OR SYNTHETIC - OF ANY SPECIFIC GEM IN 2011, GIA ENTERED INTO AN AGREEMENT WITH UNITED STATES CUSTOMS AND BORDER PROTECTION TO COLLABORATE ON ANALYSES OF GEMSTONES IN ORDER TO DETERMINE THEIR IDENTITY (NATURAL, TREATED-NATURAL OR SYNTHETIC), INDICATIONS OF COUNTRY OF ORIGIN, AND DEVELOP A DATABASE FOR U.S. CUSTOMS AND BORDER PROTECTION THAT WILL FACILITATE TRADE AND LAW ENFORCEMENT THIS COLLABORATION WILL HELP TO LESSEN THE BURDENS OF GOVERNMENT TO DISSEMINATE THEIR FINDINGS, GIA RESEARCHERS SPEAK AT SEMINARS, POST DEVELOPMENTS ONLINE ON THE GIA RESEARCH WEB SITE, AND PUBLISH FREQUENTLY IN SCHOLARLY TEXTS AND JOURNALS, INCLUDING GEMS &amp; GEMOLOGY, GIA'S QUARTERLY SCIENTIFIC PUBLICATION GEMS &amp; GEMOLOGY, WHICH HAS BEEN IN CONTINUOUS PUBLICATION FOR MORE THAN 75 YEARS, PROVIDES INFORMATION ON NEW GEM MATERIALS, GEM LOCALITIES, TREATMENT AND SYNTHESIS TECHNIQUES, AND IDENTIFICATION METHODS THE JOURNAL KEEPS STUDENTS AND PROFESSIONALS ALIKE UP-TO-DATE ON THE MOST CRITICAL TOPICS IN GEMOLOGY IN RECENT YEARS, GIA HAS PUBLISHED THREE COMPENDIUMS OF ARTICLES FROM GEMS &amp; GEMOLOGY, ON SYNTHETIC, COLORED AND TREATED DIAMONDS THERE IS A CONSTANT DEMAND FOR BACK ISSUES BY STUDENTS, PROFESSIONALS AND HOBBYISTS RESEARCHING NUMEROUS GEMOLOGICAL SUBJECTS IN ADDITION, GIA SUMMARIZES TECHNICAL ARTICLES PUBLISHED BY GIA RESEARCHERS IN GEMS &amp; GEMOLOGY FOR REPUBLICATION IN TRADE JOURNALS NATIONALLY AND INTERNATIONALLY, SO THE INFORMATION CAN BE BROADLY DISSEMINATED SINCE NOVEMBER 2008, THE JOURNAL HAS BEEN AVAILABLE ONLINE AS WELL AS IN PRINT AND SINCE OCTOBER 2009, STAFF MEMBERS AT GEMS &amp; GEMOLOGY HAVE PRODUCED A MONTHLY ELECTRONIC NEWSLETTER CALLED THE G&amp;G EBRIEF, WITH SHORT, ORIGINAL REPORTS FROM GIA AND OTHER RESEARCHERS ABOUT THE NEW DEVELOPMENTS IN THE FIELD PUBLICATION INFORMATION FOR THE YEAR 2011 ISSUES DISTRIBUTED TO SUBSCRIBERS 16,466 CURRENT ISSUES ORDERED 2,118 BACK ISSUES ORDERED 2,292 TOTAL ISSUES 20,876</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	THE BY LAWS WERE RESTATED TO CHANGE THE NUMBER OF CONSECUTIVE TERMS FROM FOUR (4) TO THREE (3) FOR AN ELECTED MEMBER OF THE BOARD OF GOVERNORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OF GOVERNORS DELEGATES THE DETAILED REVIEW AND APPROVAL OF FORM 990 TO A 990 REVIEW TEAM. THE 990 REVIEW TEAM CONSISTS OF GIA PRESIDENT / CEO AND GOVERNOR, ITS VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, ITS VICE PRESIDENT AND CHIEF MARKETING OFFICER, GIA'S OUTSIDE COUNSEL SPECIALIZING IN NON-PROFIT TAX, DIRECTOR OF GLOBAL CORPORATE COMPLIANCE, AND GLOBAL TAX DIRECTOR OF GIA. THE 990 REVIEW TEAM SCHEDULES A MEETING WITH THE FIRM THAT PREPARES THE FORM 990 TO CONDUCT A DETAILED REVIEW. THE FIRM RESPONDS TO ANY OUTSTANDING QUESTIONS OR CONCERNS RAISED BY THE 990 REVIEW TEAM. ONCE THE REVIEW TEAM COMPLETES ITS DETAILED REVIEW, THE FORM 990 IS AVAILABLE TO THE BOARD OF GOVERNORS PRIOR TO ITS FILING WITH THE IRS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE INSTITUTE REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICIES THROUGH ANNUAL CIRCULATION OF A CONFLICT OF INTEREST QUESTIONNAIRE, WHICH IS COMPLETED AND SIGNED BY ALL MEMBERS OF THE BOARD OF GOVERNORS, OFFICERS, AND MEMBERS OF EXECUTIVE MANAGEMENT. IN ADDITION, GIA REQUIRES ALL EMPLOYEES (INCLUDING THOSE OF GIA AND ITS INTERNATIONAL AFFILIATES) TO REVIEW ITS CODE OF CONDUCT, AS IT MAY BE AUGMENTED BY GIA FROM TIME TO TIME, AND TO ACKNOWLEDGE BY SIGNATURE ADHERENCE TO ITS ETHICAL STANDARDS, INCLUDING ITS CONFLICT OF INTEREST POLICIES, AS A CONDITION OF EMPLOYMENT. THE LEGAL DEPARTMENT REVIEWS CONTRACTUAL RELATIONSHIPS ENTERED INTO BY THE ORGANIZATION AND IS RESPONSIBLE FOR MONITORING CONFLICTS OF INTEREST AS REPORTED THROUGH DISCLOSURES AND BY OTHER MEANS. FURTHER, IT IS INCUMBENT UPON ALL OF THE AFOREMENTIONED PARTIES TO DISCLOSE ANY CONFLICTS OF INTEREST IN THE COURSE OF THE YEAR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF GOVERNORS EXECUTIVE COMMITTEE MEETS ANNUALLY IN NOVEMBER TO REVIEW THE OFFICER COMPENSATION AND TO SET THE PAY RATE FOR THE SUBSEQUENT YEAR. GIA RETAINED THE SERVICES OF THE HAY GROUP, INTERNATIONAL COMPENSATION AND BENEFITS CONSULTANTS, WHICH DISTRIBUTES PERIODIC MARKET PAY COMPARISONS OF COMPARABLE JOBS TO THOSE OF GIA OFFICERS. THIS INFORMATION IS PROVIDED TO THE BOARD EXECUTIVE COMMITTEE FOR REVIEW AND USE. IN THE INTERIM YEARS BETWEEN COMPREHENSIVE MARKET STUDIES, GIA OBTAINS SUCH MARKET DATA AS AVERAGE MERIT INCREASES FROM THE HAY GROUP AND ALSO TAKES THE CPI INTO CONSIDERATION.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GIA'S EMPLOYEE CODE OF CONDUCT, WHICH INCLUDES A SECTION ON CONFLICTS OF INTEREST, IS POSTED ON GIA'S WEBSITE. THIS CODE GOVERNS EMPLOYEES OF GIA AND ITS GLOBAL SUBSIDIARIES. FINANCIAL STATEMENTS ARE INCORPORATED INTO THE FORM 990, WHICH, OF COURSE, IS AVAILABLE TO THE PUBLIC. THE INSTITUTE'S GOVERNING DOCUMENTS ARE ALSO AVAILABLE TO THE PUBLIC UPON REQUEST.

Identifier	Return Reference	Explanation
	FORM 990, PART VII, SECTION A	IN 2011 BOARD MEMBERS RECEIVED A STIPEND BASED ON THE NUMBER OF MEETINGS THEY ATTENDED. HOWEVER, EACH GOVERNOR HAS THE OPTION TO DECLINE THIS STIPEND.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	UNREALIZED INVESTMENT LOSSES -7,566,226 PENSION PLAN ADJUSTMENT -12,358,764 BOOK/TAX DIFFERENCE ON EQUITY EARNINGS OF SUBSIDIARIES 1,249,458 UNREALIZED FOREIGN EXCHANGE LOSS -81,653 DIVIDEND PAYMENT RECEIVED FROM FOREIGN SUBS -472,973 LOSS ON DISCONTINUED OPERATIONS -28,600 TOTAL TO FORM 990, PART XI, LINE 5 -19,258,758

SCHEDULE R  
(Form 990)

## Related Organizations and Unrelated Partnerships

OMB No 1545-0047

► 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.

2011

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

## Name of the organization

GEMOLOGICAL INSTITUTE OF AMERICA INC

## Employer identification number

95-3797687

## 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) GIA INSTRUMENTS UK LIMITED 35 VINE STREET LONDON, ECN 2AA UK	GEMOLOGICAL INSTRUMENT SALES	UK	7,415	129,564	GEMOLOGICAL INSTITUTE OF AMERICA INC
(2) GIA (ISRAEL) 21 TUVAL ST HAYAHALOM BLDG 1ST FL RAMAT GAN 52522 IS	LABORATORY SERVICES	IS	0	258,179	GEMOLOGICAL INSTITUTE OF AMERICA INC

## 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) GIA HOLDINGS INC 5345 ARMADA DRIVE CARLSBAD, CA 92008 33-0990032	TITLE HOLDING COMPANY FOR TAX-EXEMPT PARENT	CA	501(C)(2)		GEMOLOGICAL INSTITUTE OF AMERICA INC	Yes	
(2) GIA ENGLAND 104 GREAT RUSSELL STREET LONDON, WC1B 3LA UK	EDUCATIONAL SERVICES	UK			GEMOLOGICAL INSTITUTE OF AMERICA INC	Yes	
(3) GIA (INTERNATIONAL) COMPANY LTD U-CHU-LIANG BLDG 2ND FL 968 RAMA SILOM, BANGRAK, BANGKOK 10500 TH	EDUCATIONAL SERVICES	TH			GEMOLOGICAL INSTITUTE OF AMERICA INC	Yes	
(4) GIA INDIA 10TH FL TRADE CENTRE BANDRA KURLA BANDRA (EAST), MUMBAI, 400 051 IN	EDUCATIONAL SERVICES	IN			GIA HOLDINGS INC	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.)

**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
See Additional Data Table							

**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	Yes	
1b	Yes	
1c		No
1d	Yes	
1e		No
1f	Yes	
1g	Yes	
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p	Yes	
1q	Yes	
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)			

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

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

**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 V	THE TRANSACTIONS REPORTED BETWEEN GIA AND THE RELATED ORGANIZATIONS LISTED ON LINES 2(1) AND 2(2) OF PART V INVOLVE THE PAYMENT OF ROYALTIES BY THE RELATED ORGANIZATIONS TO GIA FOR THE USE OF CERTAIN INTELLECTUAL PROPERTY. THESE RELATED ORGANIZATIONS ARE NOT TAX EXEMPT UNDER SECTION 501(C)(3) OF THE CODE, BECAUSE THEY ARE NOT LOCATED IN OR OPERATING IN THE UNITED STATES. HOWEVER, IF THESE ORGANIZATIONS WERE TAX EXEMPT UNDER SECTION 501(C)(3) OF THE CODE WITH THE SAME EXEMPT PURPOSES AS GIA, THESE ORGANIZATIONS WOULD HAVE NO UNRELATED BUSINESS INCOME, SINCE ALL OF THEIR INCOME AND ACTIVITIES ARE IDENTICAL IN CHARACTER TO GIA'S INCOME AND ACTIVITIES. ACCORDINGLY, THESE ROYALTY PAYMENTS ARE NOT TREATED AS UNRELATED BUSINESS INCOME FOR GIA UNDER SECTION 512(B)(13) OF THE CODE. THE TRANSACTIONS REPORTED BETWEEN GIA AND THE RELATED ORGANIZATIONS LISTED ON LINES 14-16 ARE ASSOCIATED WITH THE PROVISION OF GRADING AND MANAGEMENT SERVICES BY GIA. THESE GRADING SERVICES ARE PERFORMED IN GIA'S ORDINARY COURSE OF BUSINESS AS DESCRIBED IN SCHEDULE O, PART III, LINE 4B. THE TRANSACTION REPORTED ON LINE 17 IS A DIVIDEND DISTRIBUTION FROM A RELATED ORGANIZATION.

**Additional Data****Software ID:**  
**Software Version:****EIN:** 95-3797687  
**Name:** GEMOLOGICAL INSTITUTE OF AMERICA INC**Form 990, Special Condition Description:****Special Condition Description****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
		Or director	Individual trustee	Institutional Trustee	Officer	Key Employee	Highest compensated employee		
DONNA BAKER PRESIDENT	40 00	X		X				503,240	0 54,851
RODNEY C EWING GOVERNOR	1 00	X						6,000	0 0
JEFFREY H FISHER GOVERNOR	1 00	X						6,000	0 0
JOHN A GREEN GOVERNOR	1 00	X						6,259	0 0
SUSAN JACQUES GOVERNOR	1 00	X						3,000	0 0
DIONE D KENYON GOVERNOR	1 00	X						0	0 0
FREDERICK N LEVINGER GOVERNOR	1 00	X						6,000	0 0
ANNA MARTIN GOVERNOR	1 00	X						3,000	0 0
ROLAND NAFTULE GOVERNOR	1 00	X						6,259	0 0
GLENN R NORD GOVERNOR	1 00	X						3,000	0 0
JAMES P SHINEHOUSE GOVERNOR	1 00	X						3,000	0 0
HANK B SIEGEL GOVERNOR	1 00	X						6,259	0 0
ARON SUNA GOVERNOR	1 00	X						6,111	0 0
EPHRAIM ZION GOVERNOR	1 00	X						3,000	0 0
PAUL KREUTZ GOVERNOR	1 00	X						6,000	0 0
STEVE RELYEA GOVERNOR	1 00	X						6,000	0 0
THOMAS YANG GOVERNOR	1 00	X						6,000	0 0
THOMAS MOSES SENIOR VICE PRESIDENT	40 00			X				433,075	0 38,065
DAVID TEARLE VP & CFO	40 00			X				327,278	0 38,041
TAWFIC FARAH VP, INTERNATIONAL OPS	40 00				X			289,735	0 29,517
LINDA SCHOLL VP, HUMAN RESOURCES	40 00				X			241,856	0 22,915
KATHRYN KIMMEL VP, CHIEF MKTG OFFICER	40 00				X			235,166	0 21,892
LINDA ELLIS VP, CHIEF ADVMT OFFICER	40 00				X			209,649	0 19,726
PHILLIP YANTZER VP, LABORATORY SERVICES	40 00				X			216,257	0 37,693
BRUCE LANZL VP, GRADING LAB OPS	40 00				X			215,195	0 20,006

**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			
CYNTHIA SANDERS VP, CORP SRVCS	40 00			X			195,357	0	19,320
BEVERLY HORI VP, EDUCATION	40 00			X			325,249	0	36,424
JOHN M KING CHIEF QLTY OFC	40 00				X		210,777	0	27,295
DONALD J FOSTER CHIEF INFO OFC	40 00				X		197,825	0	32,503
SUSAN SCHINDELAR DIR , GLOBAL MKTG	40 00				X		189,394	0	31,928
SABRA C NORRIS DIR , FNCL PLN & OP	40 00				X		183,926	0	22,565
TIMOTHY N THOMAS DIR , TECH-INSTR	40 00				X		186,233	0	26,328

**Software ID:**  
**Software Version:**  
**EIN:** 95-3797687  
**Name:** GEMOLOGICAL INSTITUTE OF AMERICA INC

**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				
DONNA BAKER	(i) 401,970 (ii) 0	100,000 0	1,270 0	17,469 0	37,382 0	558,091 0	0 0
THOMAS MOSES	(i) 356,914 (ii) 0	60,000 0	16,161 0	17,426 0	20,639 0	471,140 0	0 0
DAVID TEARLE	(i) 286,008 (ii) 0	40,000 0	1,270 0	17,373 0	20,668 0	365,319 0	0 0
TAWFIC FARAH	(i) 257,725 (ii) 0	25,000 0	7,010 0	17,351 0	12,166 0	319,252 0	0 0
LINDA SCHOLL	(i) 219,782 (ii) 0	20,000 0	2,074 0	16,690 0	6,225 0	264,771 0	0 0
KATHRYN KIMMEL	(i) 207,188 (ii) 0	25,000 0	2,978 0	16,137 0	5,755 0	257,058 0	0 0
LINDA ELLIS	(i) 186,964 (ii) 0	20,000 0	2,685 0	14,512 0	5,214 0	229,375 0	0 0
PHILLIP YANTZER	(i) 179,198 (ii) 0	30,000 0	7,059 0	15,200 0	22,493 0	253,950 0	0 0
BRUCE LANZL	(i) 170,526 (ii) 0	0 0	44,669 0	14,316 0	5,690 0	235,201 0	0 0
CYNTHIA SANDERS	(i) 171,778 (ii) 0	22,000 0	1,579 0	13,500 0	5,820 0	214,677 0	0 0
BEVERLY HORI	(i) 282,875 (ii) 0	40,000 0	2,374 0	17,370 0	19,054 0	361,673 0	0 0
JOHN M KING	(i) 176,866 (ii) 0	22,000 0	11,911 0	14,602 0	12,693 0	238,072 0	0 0
DONALD J FOSTER	(i) 182,914 (ii) 0	14,000 0	911 0	13,785 0	18,718 0	230,328 0	0 0
SUSAN SCHINDELAR	(i) 169,558 (ii) 0	19,000 0	836 0	13,210 0	18,718 0	221,322 0	0 0
SABRA C NORRIS	(i) 165,886 (ii) 0	17,500 0	540 0	12,994 0	9,571 0	206,491 0	0 0
TIMOTHY N THOMAS	(i) 171,654 (ii) 0	13,000 0	1,579 0	8,237 0	18,091 0	212,561 0	0 0

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## Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(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
GIA INSTRUMENT (TAIWAN) CO 3F 270 NANJING EAST ROAD SEC 3 TAIPEI, 105 ROC TW	EDUCATIONAL SERVICES	TW	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	1,586,782	1,612,124	100 000 %
GEMOLOGICAL RESEARCH (THAILAND) COMPANY LTD U-CHU-LIANG BLDG 10TH FL 968 RAM SILOM, BANGRAK, BANGKOK 10500 TH	LIMITED LABORATORY SERVICE	TH	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	3,819,715	5,724,978	100 000 %
GIA HOLDINGS COMPANY LTD U-CHU-LIANG BLDG 10TH FL 968 RAM SILOM, BANGRAK, BANGKOK 10500 TH	HOLDING COMPANY	TH	GEMOLOGICAL INSTITUTE OF AMERICA INC	C			100 000 %
GIA HONG KONG LIMITED ROOM 301 3/F AON CHINA BUILDING 29 QUEEN'S ROAD CENTRAL HK	EDUCATIONAL SERVICES	HK	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	1,829,756	4,209,495	100 000 %
GIA HONG KONG LABORATORY SERVICES CENTER LIMITED C/O ROOM 1411 NEW WORLD TOWER 16-18 QUEEN'S ROAD CENTRAL HK	LOGISTICAL SUPPORT	HK	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	34,279	5,351,906	100 000 %
GIA BELGIUM NV LANGE HERENTALSESTRAAT 20- 26 B-2018 ANTWERP BE	RESEARCH SERVICES	BE	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	836,078	904,155	78 770 %
GIA SWITZERLAND SA 4 ROUTE DE FLORISSAN CASE POSTALE CH-1211 GENEVE 12 SZ	LIMITED LABORATORY SERVICE	SZ	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	-2,252	16,929	100 000 %
GIA EDUCATION AND LABORATORY LIMITED SUITE 106 THE ATRIUM DIAMOND TECH 67782 BLK 8 INDUSTRIAL GABORONE BC	EDUCATIONAL AND LABORATORY SERVICES	BC	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	3,121,982	2,322,588	100 000 %
GEMOLOGICAL INSTITUTE INTERNATIONAL INC 5345 ARMADA DR CARLSBAD, CA 92008 26-3688898	EDUCATIONAL AND TRAINING SERVICES	CA	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	2,491,835	5,201,958	100 000 %
GIA INDIA LABORATORY PRIVATE LIMITED 10TH FLOOR TRADE CENTRE BANDRA KU BANDRA (EAST), MUMBAI, 400 051 IN	LABORATORY SERVICES	IN	GIA HOLDINGS INC	C	40,318,205	42,744,087	100 000 %
GIA MIDDLE EAST (LLC) BUILDING 6WA OFFICE 801 DUBAI AIR PO BOX 293800, DUBAI AE	EDUCATION AND LOGISTIC SUPPORT	AE	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	304,414	2,102,656	100 000 %
GIA EDUCATION AND LABORATORY (PTY) LTD SUITE 512 5TH FL SA DIAMOND CEN JOHANNESBURG, 2001 SF	EDUCATION AND LAB SERVICES	SF	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	5,146,911	2,516,942	100 000 %
GIA HONG KONG LABORATORY LIMITED ROOM 1411 NEW WORLD TOWER 16-18 QUEEN'S ROAD CENTRAL HK	LABORATORY SERVICE	HK	GEMOLOGICAL INSTITUTE OF AMERICA INC	C	4,362,355	6,016,442	100 000 %

**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) GIA INDIA LABORATORY PRIVATE LIMITED	A	14,137,158	FMV
(2) GIA EDUCATION AND LABORATORY (PTY) LTD	A	203,884	FMV
(3) GIA (INTERNATIONAL) COMPANY LTD	B	67,800	FMV
(4) GEMOLOGICAL RESEARCH (THAILAND) COMPANY LTD	B	203,400	FMV
(5) GIA MIDDLE EAST (LLC)	D	388,536	FMV
(6) GIA ISRAEL	D	268,594	FMV
(7) GIA INDIA LABORATORY PRIVATE LIMITED	F	183,995	FMV
(8) GIA EDUCATION AND LABORATORY (PTY) LTD	F	58,812	FMV
(9) GIA INDIA	P	145,727	FMV
(10) GIA INDIA LABORATORY PRIVATE LIMITED	P	398,390	FMV
(11) GIA EDUCATION AND LABORATORY (PTY) LTD	P	724,420	FMV
(12) GIA EDUCATION AND LABORATORY LIMITED	P	1,849,860	FMV
(13) GIA BELGIUM NV	Q	852,356	FMV
(14) GIA INDIA LABORATORY PRIVATE LIMITED	R	22,238,150	FMV
(15) GEMOLOGICAL RESEARCH (THAILAND) COMPANY LTD	R	139,997	FMV
(16) GIA EDUCATION AND LABORATORY (PTY) LTD	R	923,666	FMV
(17) GIA INSTRUMENT (TAIWAN) CO	R	391,506	FMV
(18) GEMOLOGICAL RESEARCH (THAILAND) COMPANY LTD	F	137,874	FMV
(19) GIA BELGIUM NV	G	108,241	FMV