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**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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** 

A	For the	e 2011 cale	ndar year, or tax year beginning October 01 , 2011, and ending	Septe	mber 30	, 20 12	
В	Check if	f applicable	C Name of organization American Center for Mongolian Studies	D Employ	er identification n	umber	
	Address	s change	Doing Business As			55-0799211	
	Name cl	hange	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	ne number	
	Initial ref	eturn	1155 Observatory Dr. Rm	. 333		360 356-1020	
	Termina	ated	City or town, state or country, and ZIP + 4				
	Amende	ed return	Madison, WI 53706		<b>G</b> Gross re	eceipts \$	137,235
$\overline{\Box}$		tion pending	F Name and address of principal officer Charles Krusekopf	H(a) is this		for affiliates?  Yes	√ No
		, ,	Same as C above			ncluded?	_
	Tax-exe	empt status	✓ 501(c)(3)			a list (see instruction	
J	Website		w.mongoliacenter.org	H(c) Grou	o exemption	n number ▶	
K	Form of		✓ Corporation Trust Association Other L Year of formation			of legal domicile	TX
	art I	Summ			1		
	1		scribe the organization's mission or most significant activities: Promot	ing Scholar	rship abou	ut Mongolia, su	pporting
	-		research, operating an academic resource center in Ulaanbaatar, Mongolia				
၁င္င	Į.		such as lectures and language learning.				
nar							
Activities & Governance	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed o	f more than	25% of	its net assets	
Ĝ	3		of voting members of the governing body (Part VI, line 1a)		3		49
<b>∞</b>	4		of independent voting members of the governing body (Part VI, line 1b)			·	49
tie	5		nber of individuals employed in calendar year 2011 (Part V, line 2a)	•, • • •	5		3
ξ	6		nber of volunteers (estimate if necessary)		6		-0-
¥	7a		elated business revenue from Part VIII, column (C), line 12		7a	· · · · · · · ·	-0-
	) 'a		ated business taxable income from Form 990-T, line 34		7b		-0-
_	-	INCL UITIE	ated business taxable income noni i oni i oso-i, line 54	Prior Y		Current Y	
	8	Contribut	ions and grants (Part VIII, line 1h)	407,992		125,145	
ĭČe	9				25,434		11,760
Revenue	10	-	service revenue (Part VIII, line 2g)		532		330
æ	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-0-		-0-
	12	Total rove	enue add lines Ethrough 11 (must equal Part VIII, column (A), line 12)	<del></del>			
	13		nd similar amounts paid (Part 18) column (A), lines 1–3)	·	433,958 103,307		137,235
	14		paid to or for members (Part IX) column (A), line 4)		-0-		89,762 -0-
			other compensation, employee benefits (Part IX, column (A), lines 5–10)				
Expenses	15				108,204		58,831
ë	16a		mal fundraising fees-(Part IX, column (A), line 11e)	090:007.00/00 ·1	-0-	11940/12810-W05-V-859738	-0-
X	b az		draising expenses (Rart IX, column (D), line 25)			\\$**	67.207
_	17		penses (Part-IX, column (A), lines 11a–11d, 11f–24e)		158,655		67,307
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		370,166		215,899
	19	Revenue	less expenses. Subtract line 18 from line 12	eginning of C	63,792	End of Ye	(78,665)
Net Assets or Find Balances	00	Tatal ass	<b>├</b>	egining of Ci		Lild of re	
\sse	20		ets (Part X, line 16)		255,021	<u> </u>	172,783
Zet /	21		illities (Part X, line 26)		3,573		-0-
_			ts or fund balances. Subtract line 21 from line 20		251,448	<u> </u>	172,783
	art II		ture Block -			<del></del>	
			ry, I declare that I have examined this return, including accompanying schedules and staten ete Declaration of preparer (other than officer) is based on all information of which preparer			my knowledge and	d belief, it is
_				<del></del>		VAY 2013	
Sig	n n	Sign	ature of officer		ate	M1 2013	
	ere	Ty Sign	David Dettmann US Director		116		
пе	;	Tyro					
_		<del></del>	e or print name and title pe preparer's name  Preparer's signature  Date of the property of th		<del></del>	- PTIN	
Pa	aid		po proparor o numo		Check	<b>□</b>	
	epare	1			self-em	pioyea	
Us	se On				m's EIN 🛌	<del></del>	
N 4 -	v tha !!		s this return with the propagar shown above? (see instructions)	Ph	one no		_ 🗆
IVIE	y me i	no discus	s this return with the preparer shown above? (see instructions)	<u> </u>	· · ·	<u> </u> ]Ye	s No

Part	· · · · · · · · · · · · · · · · · · ·
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The American Center for Mongolian Studies is an academic organization promoting scholarship and research about and in Mongolia.
	The organization provides support services to students and faculty conducting study or research in Mongolia at its full service
	resource center and library in Mongolia. It also conducts a variety of public outreach and educational activities including lectures
	and language training.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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 \$ 66,719 including grants of \$ 300 ) (Revenue \$ -0-)
	Resource Center and Library in Mongolia: the organization maintains a fully staffed resource center and research library in
	Ulaanbaatar, Mongolia. The center is housed in the Mongolian University of Science and Technology library building and is overseen
	by a full-time Resident Director who is a US citizen. The Resident Director is supported by a full-time US Director hosted at the
	Center for East Asian Studies at University of Wisconsin-Madison. Primary support for the center comes from the US Department of
	Education, US Department of State, Henry Luce Foundation, and donations. The resource center offers visiting US and international
	scholars a comfortable research environment which includes computers, office equipment, and a research library collection with
	over 4,000 volumes. The organization regularly acquires new books for the library in both the US and Mongolia. Grants supporting
	these activities in the current year were received at the beginning of fiscal year 2012 (October 2011).
	and a detrict of the content year were received at the beginning of fiscal year 2012 (October 2017).
4b	(Code: ) (Expenses \$ 94,011 including grants of \$ 100,000 ) (Revenue \$ -0- )
40	(Code:) (Expenses \$94,011 including grants of \$100,000 ) (Revenue \$0- )  Fellowships/Conferences/Lectures: the organization supported four fellowship programs with grant funds received at the beginning
	of fiscal year 2012 (October 2011) and in fiscal year 2011 from the US State Department, Henry Luce Foundation, Shelly Rubin
	Foundation. The programs provided \$89,762 in fellowship awards to 14 US students and faculty, 1 Faculty from Denmark, and 5
	scholars from Mongolia. Fellowships support field research and language acquisition for students and faculty. In addition, the
	organization held conferences and public lectures in Mongolia in support of the fellowship programs and as part of the
	organization's public outreach goals. These activities were organized by staff in Mongolia.
	organization's public outreach goals. These activities were organized by starr in Mongolia.
4 -	/OI
4c	(Code:) (Expenses \$
	Other expenses for program services development of a language program, digital scanning project, and services such as seminars,
	logistical support for visiting scholars, and acquisition of educational materials. In addition, materials expenses for providing
	services to scholars such as photocopying and printing are also included.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses 160 720

Part IV (	Checklist of	of Rea	uired So	chedules
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			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<b>\</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	•	1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>√</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			_
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			-
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		<b>√</b>
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	9		<b>-</b>
- •	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		<b>*</b> ✓
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	IIa		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	1	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>-</b>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		✓_
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	a		
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		<b>-</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓	
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, Parts I and IV	14b	✓	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		-	
46	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	✓	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<b>✓</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
00	If "Yes," complete Schedule G, Part III	19		✓
20 a		20a		<b>✓</b>
Q	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	- 000	<b>√</b>
		For	n yyU	(2011)

Part IV	Checklist	of Required Schedules	(continued)
	O I I CO I CITI O E	oi ricadii ca ociicadici	

			Yes	NO
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<b>\</b>
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	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 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_		<b>✓</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<b>✓</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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		<b>-</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>→</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>✓</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>·</u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		<b>✓</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>√</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	<b>√</b>	
		For	" aan	(2011)

Form **990** (2011)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			raye
	Check if Schedule O contains a response to any question in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			33
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	7	70.00	21.2
0-	reportable gaming (gambling) winnings to prize winners?	1c		✓
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		. 3.	4
L	Statements, filed for the calendar year ending with or within the year covered by this return	- 540000022	<u> </u>	100
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	725 3	21.29924
32	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	22.8	e e e	3
За b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<del> </del>	<b>/</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b	<del> </del>	✓
<del>4</del> a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	/	
b	If "Yes," enter the name of the foreign country: ► Mongolia	4a		(AKA )
~	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			THE S
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	98827	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			•
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).		<b>31.</b> , §	F (1)
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	A1.000000 1	<b>√</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year	1327		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>-</b>
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	* 382.	<b>√</b>
·	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	1 8822	
9	Sponsoring organizations maintaining donor advised funds.	200		<b>₹</b> 3
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:	*(1 ×10)	. 94	W.,
а	Initiation fees and capital contributions included on Part VIII, line 12	34-3	4. %	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1	X	198
11	Section 501(c)(12) organizations. Enter:		is the same	\$ · · ·
а	Gross income from members or shareholders	. é	F 85.	. 4
b	Gross income from other sources (Do not net amounts due or paid to other sources	]		
	against amounts due or received from them.)	. €	\$ 46 \$	Fa ( )
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	]		ž
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	t t	\$tote is desper	```
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
L	Note. See the instructions for additional information the organization must report on Schedule O.			,
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	1 )		49.20
_	100	<b>₽</b> %	*	,
C 14a	100	1		<u> </u>
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b	<del> </del>	
	100, mas it mod a form fize to report mose payments: ii Mo, provide an explanation in Schedule O	140	1	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
Cooki	Check if Schedule O contains a response to any question in this Part VI	<u>· · · · · · · · · · · · · · · · · · · </u>	<u>.</u>	<u>.                                    </u>
Secu	on A. Governing Body and Management			T
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		Yes	No
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<b>√</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	_6	✓	
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?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	<u> </u>
ь	Each committee with authority to act on behalf of the governing body?	_8b	✓	Ь—
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9	✓	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.,	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		<b>✓</b>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	#7.F	\$ 32	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	✓	<b>✓</b>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13	<b>✓</b>	
14 15	Did the organization have a written document retention and destruction policy?	14	<b>'</b>	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	Ž, ų	<u>                                     </u>
a	The organization's CEO, Executive Director, or top management official	15a	<del>  _</del>	₩
b	Other officers or key employees of the organization	15b	<b>√</b>	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	<u></u>	<b>✓</b>
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?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed <b>WI, TX</b> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.		-	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: David Dettmann, 1155 Observatory Dr. Room 333, Madison, Wi, 53706 Tel: 608-265-8039	of the	•	

-qrm	990	(201	11
Qtiii	000	1201	,,

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

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

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

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week	box, office	untes er and	Pos neck ss pe	sition more than one erson is both an director/trustee)			( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Dr. William Fitzhugh										
President	1	ŀ	<b>/</b>	1				-0-	-0-	-0-
(2) Dr. Julian Dierkes	T									
Vice-President for External Relations	1	İ	<b>/</b>	1				-0-	-0-	-0-
(3) Dr. Christopher Atwood										
Vice-President for Member Services	]		✓	✓				-0-	-0-	-0-
(4) Matt Schick										
Treasurer				✓	L.,			-0-	-0-	-0-
(5) Dr. Elizabeth Endicott Secretary	_	1		/				-0-	-0-	-0-
(6) Nancy Nix										
University of Alaska-Anchorage Rep.	1	ļ	✓					-0-	-0-	-0-
(7) Ganguli Rajive										
University of Alaska-Fairbanks Rep.			✓	<u>.</u>	}			-0-	-0-	-0-
(8) Jeanine Davis-Kimball										
American-Eurasian Research Institute Rep.			✓					-0-	-0-	-0-
(9) John W. Olsen	]									
University of Arizona Rep.			✓		<u> </u>	L		-0-	-0-	-0-
(10) Arts Council of Mongolia Rep.										
Arts Council of Mongolia Rep.			✓				辶	-0-	-0-	-0-
(11) Scott Langton	]									
Austin College Rep.			✓		<u>L</u>			-0-	-0-	-0-
(12) Thomas Barfield	_	1								
Boston University Rep.	<u> </u>		✓	<u> </u>		<u> </u>		-0-	-0-	0-
(13) Stepan Kalmykov	]									
Buryat State University Rep.			✓	<u> </u>	<u> </u>			-0-	-0-	-0-
(14) Jim Dwyer	]									
Business Council of Mongolia Rep.	1		✓	i	1	1	1	-0-	-0-	-0-

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (con	tinued)
(C)											
	(B)				ition			(D)	(E)	(F)	
	Average					than o		Reportable	Reportable	Estimated	
	hours per					ıs both or/trust		compensation	compensation from		
	week		_	_			<u> </u>	from	related	other	
	(describe hours for	흑호	stiti	Officer	eye	필	Former	the organization	organizations (W-2/1099-MISC)	compensation from the	
		related	ecta	utio	4	ᇕ	st c	4	(W-2/1099-MISC)		organization
		organizations	목글	nal .		Key employee	ğ				and related
		in Schedule O)	Individual trustee or director	Institutional trustee		ř	pen				organizations
		ĺ		tee			Highest compensated employee				
(15) Dr	. John Woods										
Unive	sity of Chicago Rep.			✓					-0-	-0	-0-
(16) Dr	. Kh. Lkhagvasuren										
Ching	is Khan College Rep.			✓					-0-	-0	-0-
(17) Dr	. Dennis Ojima									_	
Colora	do State University Rep.			✓					-0-	-0	-0-
<i></i>	. Gordon Jacoby	1							ļ		
	bia University Rep.			✓	ļ				-0-	-0	-0-
	. Edward Shultz										1
	sity of Hawaii at Manoa Rep.			✓	ļ	lacksquare			-0-	-0	-0-
J	. Nancy Abelman									_	
	sity of Illinois at Urbana-Champaign Rep Carla Freeman			✓		-			-0-	-0	-0-
3	Hopkins University Rep.			/					-0-	-0	
	Erik Herron			٧	<del> </del>				-0-		-0-
J	rsity of Kansas Rep.			<sub> </sub>					· -o-	-0	-O-
	. Holly Barcus		<del></del>				-				
	ester College								-0-	-0	-O-
	. Geoffrey Bradshaw			H							
J	on Area Technical College Rep.			<b> </b>					-0-	-0	-0-
	. Rıck Taupier										
Unive	rsity of Massachusetts Amherst Rep.			<b>✓</b>					-0-	-0	-0-
1b	Sub-total							<b>&gt;</b>	-0-	-0	-0-
c	<b>Total from continuation sheets to Part</b>	VII, Sectio	n A					<b>&gt;</b>	55,000	-0	-0-
d	Total (add lines 1b and 1c)		<u> </u>					<b></b>	55,000	-0	-0-
2	Total number of individuals (including but			ose	list	ted a	above	e) w	ho received m	ore than \$100,0	000 of
	reportable compensation from the organ	zation ► -	0-						-		
•	Part discussed and a Part of the	. "									Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete of the state of							-		· · · · · · · · · · · · · · · · · · ·	
4	For any individual listed on line 1a, is the organization and related organizations										
	individual								complete Scri	leaule J for St	
5	Did any person listed on line 1a receive of								related organia	 vation or individ	. 4 /
3	for services rendered to the organization										
Section	on B. Independent Contractors								, p	· · · · · · · · · · · · · · · · · · ·	. 13   14
1	Complete this table for your five highest	compensat	ed ind	depe	end	ent	contr	acte	ors that receive	ed more than \$	100.000 of
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	ar y	ear ending wit	h or within the	organization's tax
	year.										J
	(A)								(B)		(C)
	Name and business add	ress						<u> </u>	Description of s	ervices	Compensation
								-			
								-			
	······································							-			
2	Total number of independent contractor	ors (includi	ng bu	ıt n	ot	lımıt	ed to	th	nose listed abo	ove) who	· ARTHUR AND SANGER
	received more than \$100,000 of compen-								-0-		

Part	VIII	Statement of Reve	enue			<del></del>			- Fage 0
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s, Grants Amounts	1a b c	Federated campaigns Membership dues . Fundraising events .	[	1a 1b 1c	-0- 3,895 -0-				
ons, Gifts, Similar An	d e	Related organizations Government grants (con	tributions)	1d 1e	-0- 100,000				
Contributions, Gifts, Grants and Other Similar Amounts	f g	All other contributions, gi and similar amounts not inc Noncash contributions include	cluded above	<b>1f</b> 1f \$	21,250				
	h	Total. Add lines 1a-1	f. <u>.</u> .		🕨	- 125,145			
Program Service Revenue					Business Code		5	Year of the second	
evel	2a	Logistical Support Ser	vices		900099	10,144	10,144	-0-	-0-
ē.	b	<b>Educational Materials</b>			900099	1,616	1,616	-0-	-0-
ryic	C								
Se	đ						<u> </u>		
ran	e	All - Al.				-			
rog	T ~	All other program sen			<u> </u>	44 700	BANDE WAS TO THE TOTAL TO A STATE OF THE STA	Secretary and Carlette activities	el Carlo da antido Manda hallina a
	<u>g</u>	Total. Add lines 2a-2 Investment income	including	divid	ondo interest	11,760			
		and other similar amo		uiviu	enas, interest,	220	220		
	4	Income from investmen	•	nnth	and proceeds	330	330	-0-	-0-
	5	Royalties	i oi iax-exen	ipt be	ona proceeas	-0-	-0-	-0-	-0-
	3	noyalites	(ı) Real	· •	(II) Personal	-U-	- <b>U</b> -	-U-	-0-
	6a	Gross rents	(7)	-0-	-0-				
	b	Less: rental expenses	-	-0-	-0-	<b>264.13 1</b>			
	C	Rental income or (loss)		-0-	-0-				
	d	Net rental income or (loss)	loce)	-0-	-0-	0		•	<u> </u>
	7a	Gross amount from sales of	(i) Securiti	es	(II) Other	-U-	-0-	-U-	-0-
	, a	assets other than inventory	()	-0-	-0-	Electronic Control		7104. W	
	b	Less: cost or other basis		-0-	-0-				
•		and sales expenses		-0-					
	С	Gain or (loss)		-0-	-0-				
	d	Net gain or (loss)		-0-	-0-	-0-	-0-	0	
	u	iver gain or (1055) .		•	<u> </u>	-0-	<u>-0-</u> ₩ : : : : : : : : : : : : : : : : : :		-U-
Other Revenue	8a	Gross income from fuevents (not including \$		<del></del>					
Œ		of contributions reported See Part IV, line 18 .	ea on line 10	•					A. A
the									
Ö	b	Less: direct expenses			<u> </u>	<u> </u>		<u> </u>	
		Net income or (loss) f Gross income from ga			events . >	-0-		-0-	-0-
	Ja	See Part IV, line 19 .							
	_	Less: direct expenses					rado jakas jida r		h (1) 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2
	b	Net income or (loss) f					<u> </u>		
	_	Gross sales of in		-	Vides P	-0-	-0-	-0-	-0-
	104	returns and allowance		- a			ی د ال		
	b	Less: cost of goods s					mail.		
	С	Net income or (loss) f			entory ►	-0-	-0-	-0-	-0-
		Miscellaneous R	evenue		Business Code	· · · · · · · · · · · · · · · · · · ·	· 🚱 🙀 '	State of the state	124 3601.
	11a								<u></u>
	b								
	С								
,	d	All other revenue .							
,	е	Total. Add lines 11a-							
	12	Total revenue. See in	nstructions.		<u></u> <b>&gt;</b>	137,235	12,090	-0-	-0-

#### 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).

	Charle if Schodula O contains a recomm	aa ta amu ausatusa	in this Dort IV		
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8D, 9E	o, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and			(2017年) (2018年 年)	
	organizations in the United States. See Part IV, line 21	-0-	-0-		
2	Grants and other assistance to individuals in	-0-	-0-	1 A C C C C C C C C C C C C C C C C C C	7 39 4 400 80 43 7 124 45 800 1
_		_ :			
	the United States. See Part IV, line 22	67,366	67,366	Section 18	
3	Grants and other assistance to governments,				Walter Barrier
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	22,396	22 306		
4		-0-	22,330		77 Y 197 Y 1
4		-0-	-0-		
5	Compensation of current officers, directors,				
	trustees, and key employees	50,245	18,269	31,976	-0-
6	Compensation not included above, to disqualified				,
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	ام	•		
_		-0-	-0-	-0-	-0-
7	Other salaries and wages	-0-	-0-	-0-	-0-
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	-0-	-0-	-0-	-0-
9	Other employee benefits	5,670	2,322	3,348	
10	Payroll taxes	2,916	1,060	1,856	
		2,310	1,000	1,030	-0-
11	Fees for services (non-employees):	[			
а	Management	0-	-0-	-0-	-0-
b	Legal	-0-	-0-	-0-	-0-
С	Accounting	-0-	-0-	-0-	-0-
d	Lobbying	-0-	-0-	-0-	-0-
е	Professional fundraising services. See Part IV, line 17	-0-	A . 0 . 9 %		-0-
f	Investment management fees	-0-		-0-	
_			-0-		-0-
g	Other	-0-	-0-	-0-	-0-
12	Advertising and promotion	-0-	-0-	-0-	-0-
13	Office expenses	1,492	-0-	1,492	-0-
14	Information technology	785	-0-	785	-0-
15	Royalties	-0-	-0-	-0-	-0-
16	Occupancy	-0-	-0-	-0-	-0-
17	Travel	2,651	1,105	1,546	-0-
18	Payments of travel or entertainment expenses				,
	for any federal, state, or local public officials	-0-	-0-	-0-	-0-
19	Conferences, conventions, and meetings .	4,297	4,297	、 . <b>-0</b> -	-0-
20	Interest	-0-	-0-	-0-	-0-
21	Payments to affiliates	-0-	-0-	-0-	-0-
	-			<del></del>	
22	Depreciation, depletion, and amortization .	-0-	-0-	-0-	-0-
23	Insurance	3,675	-0-	3,675	-0-
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If		la di da a	Karaba	
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	*		<b>j</b> *	
_	Library books	2 574	3 574	- <b>0</b> -	· Sillio (S. Samunde Willia)
a		3,571	3,571	<u> </u>	-0-
ь	Mongolia Office Staff Salaries & Taxes	31,563		<del></del>	-0-
С	Mongolia Office expenses	4,719	4,719	-0-	-0-
d	Mongolia Office Travel	2,085	2,085	-0-	-0-
е	All other expenses Miscellaneous	12,469	1,192	11,277	-0-
25	Total functional expenses. Add lines 1 through 24e	215,899	160,730		<del></del>
26	Joint costs. Complete this line only if the	2.0,000	100,730	33,170	
20	organization reported in column (B) joint costs			İ	
	from a combined educational campaign and	'			
	fundraising solicitation. Check here	1		ĺ	
	following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2011)

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Total liabilities and net assets/fund balances . .

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 3,886 1 1,299 Savings and temporary cash investments . . . . . . . 2 150,551 2 92,923 3 56,353 3 54.813 4 4 -0--0-5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . 6 -0-7 -0-7 -0-8 -0-8 -0-9 Prepaid expenses and deferred charges . . . . . . -0-9 -0-Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation . . . . 10b b -0-10c -0-11 1,848 11 1,848 12 Investments—other securities. See Part IV, line 11 . . . . . . -0-12 -0-13 Investments—program-related. See Part IV, line 11 . . . . . . . . -0-13 -0-14 -0-14 -0-15 42,384 15 21,899 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 255,022 16 172,783 Accounts payable and accrued expenses . . . . . . . . . . . . . . . 17 (148) 17 -0-18 -0-18 -0-19 -0-19 -0-20 -0-20 -0-21 Escrow or custodial account liability. Complete Part IV of Schedule D . -0-21 -0-Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. -0-22 -0-23 Secured mortgages and notes payable to unrelated third parties . . . -0-23 -0-24 Unsecured notes and loans payable to unrelated third parties . . . -0-24 -0-Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X -0--n-Total liabilities. Add lines 17 through 25 . . . . . 26 3,573 26 -0-Organizations that follow SFAS 117, check here ▶ □ and complete 4.4 Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 187,656 30 251,448 31 Paid-in or capital surplus, or land, building, or equipment fund . . . -0-31 -0-32 Retained earnings, endowment, accumulated income, or other funds . 63,792 32 (78,665) 33 251,448 172,783 33

172,783

255,021

34

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u></u>	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		137	7,234
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,899
3	Revenue less expenses. Subtract line 2 from line 1	3			,665)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<del></del>	1,448
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-0-
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))			471	
Dort	XII Financial Statements and Reporting	6			2,783
ant	· · ·				_
	Check if Schedule O contains a response to any question in this Part XII	<del></del> -	<del>· · ·</del>	<del> i</del>	
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," expended to the organization changed its method of accounting from a prior year or checked "Other," expended to the organization changed its method of accounting from a prior year or checked "Other," expended to the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting from a prior year or checked "Other," expenses the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting the organization changed its method of accounting t	laın in		Yes	No
2a b	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a 2b	<b>✓</b>	<b>✓</b>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov of the audit, review, or compilation of its financial statements and selection of an independent accourt the organization changed either its oversight process or selection process during the tax year, expension of the committee	tant?	2c	<b>✓</b>	¥
	Schedule O.	, , , , , , , , , , , , , , , , , , ,	1		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	r were			
3a	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	orth in	*		
_	•	 عمامی	3a	}	✓
b 	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b_		
			Form	<b>990</b>	(2011)

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

**Public Charity Status and Public Support** 

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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. Name of the organization Employer identification number

	ican Center for M									99211	_	
Pai			rity Status (All orga						instruction	ons.		
The 6 1 2 3 4	A church, co A school des A hospital or A medical re	nvention of churc cribed in <b>section</b> a cooperative ho	ation because it is: (Fo thes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc e:	churches ch Sched ation des	s describe ule E.) cribed in s	ed in sec section	tion 170	(b)(1)(A)( (A)(iii).		(iii). Ente	er the	
5		ion operated for ( <b>b)(1)(A)(iv).</b> (Com	the benefit of a colle- plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernmen	tal unit c	lescri	bed in
6 7	An organizat	ion that normally	nment or government receives a substantia <b>)(A)(vi).</b> (Complete Par	al part of					nit or fror	n the ge	neral	public
8	☐ A community	trust described i	n section 170(b)(1)(A	<b>)(vi).</b> (Cor	nplete Pa	rt II.)						
9	receipts fron support fron	n activities relate n gross investme	receives: (1) more that d to its exempt funct ent income and unrel after June 30, 1975. Se	ions-su lated bus	bject to d siness ta	certain e xable ind	xceptions	s, and (2) ss section	) no more	e than 3	31/3%	of its
10 11 e	An organizar purposes of 509(a)(3). Cr	tion organized are one or more publick the box that I b Type this box, I certify bundation manage	d operated exclusively and operated exclusive plicity supported organ describes the type of that the organization ers and other than one	ely for the nizations supporting I-Function is not co	ne benefit described ng organiz nally integ ntrolled d	t of, to d in sect zation an grated lirectly o	perform ion 509(a d comple d  fr indirectl	the functal(1) or sete lines 1 Type III-fly by one	tions of, ection 50 11e through Non-functor more	9(a)(2). S gh 11h. tionally ir disqualif	See sontegra	ection ated ersons
f	organization,	check this box	a written determinatio							oe III su <sub>l</sub>	oporti	ing . 🔲
g	following per	rsons?	he organization acce	_				•				<b>.</b>
			indirectly controls, eithody of the supported of								Yes	No
	-	-	on described in (i) abo							11g(i	0	<u> </u>
1.			a person described in							11g(ıı	ı)	<u></u>
— <u>h</u> (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 o	organization sted in your document?	(v) Did y the orga col (i)	you notify nization in of your port?	organiza (i) organ	Is the tion in col ized in the S?	(vii) Amou	int of mul	onetary
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												
(D)												
(E)												
		4	÷	i <sub>k</sub> ×	,	** **		Jr. 16	· (* 3)			

	(Complete only if you checked the						alify under
Secti	Part III. If the organization fails to on A. Public Support	o quality unde	er the tests lis	stea below, p	lease comple	te Part III.)	<u> </u>
	dar year (or fiscal year beginning in)	(a) 2008	(h) 2000	(=) 0010	(4) 0011	(a) 0010	(D. T. ). 1
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	414,838	(b) 2009 426,966	(c) 2010 42,430	(d) 2011 433,426	(e) 2012 136,905	(f) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					•	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	414,838	426,966	42,430	433,426	136,905	1,453,565
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)						-0-
6	Public support. Subtract line 5 from line 4.	Mark Track Till		<b>海神学/森神学</b>	<b>新</b>	主動物體中的	1,453,565
	on B. Total Support		• • • • • • • • • • • • • • • • • • • •				
	dar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	<b>(f)</b> Total
7	Amounts from line 4	414,838	426,966	42,430	433,426	136,905	1,453,565
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,567	4,785	597	532	. 330	7,811
9	Net income from unrelated business activities, whether or not the business is regularly carried on		7,.00				7,5,1
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	330		-0-	-0-	-0-	330
11		s. 2043.4.5 (			re Baril		1,461,706
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for to organization, check this box and stop he	he organization	n's first, secon		, or fifth tax yo	ear as a sectio	
Secti	on C. Computation of Public Suppo		e				
14	Public support percentage for 2012 (line			1, column (f))		14	99.443 %
15	Public support percentage from 2011 Sc		-			15	99.372 %
16a	331/3% support test—2012. If the organ box and stop here. The organization qua				d line 14 is 33 <sup>1</sup>	•	
b	33 <sup>1</sup> / <sub>3</sub> % support test—2011. If the orga check this box and stop here. The organ					15 is 33 <sup>1</sup> / <sub>3</sub> %	or more, . ► □
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the " organization	ets the "facts-	and-circumsta	inces" test, che	eck this box ar	nd <b>stop here.</b> E	xplain ın
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part IV how the organization is supported organization	ition meets the	facts-and-ci	ircumstances"	test, check th	nis box and st	and line op here. I publicly
18	Private foundation. If the organization d	ld not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support	under the te	esis listed bei	ow, please co	ompiete Part	11.)	<del></del>
	dar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2000	(b) 2009	(6) 2010	(0) 2011	(e) 2012	(f) Total
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise		-			<del>                                     </del>	
	sold or services performed, or facilities						
	furnished in any activity that is related to the			ľ			
•	organization's tax-exempt purpose	·	_				
3	Gross receipts from activities that are not an unrelated trade or business under section 513			1		l i	
							<del>_</del>
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
_	•		ļ			ļ	
5	The value of services or facilities			-		_	
	furnished by a governmental unit to the		ļ			1	
_	organization without charge		<u> </u>				
6	Total. Add lines 1 through 5		1	<b> </b>		<u> </u>	•
7a	Amounts included on lines 1, 2, and 3			!		}	
	received from disqualified persons .		1	ļ			
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						
	Add lines 7a and 7b	1.000000 1 cc		make en an annual and an annual and an annual and an annual an annual an annual an an an an an an an an an an a	oles, females 12 or 200 de com		
8	Public support (Subtract line 7c from						
	line 6.)	e salah dari dari dari dari dari dari dari dari				465	
	on B. Total Support	( ) 0000	1 00000		I	1	<del></del>
	dar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(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.					]	
	•	<del></del>					
D	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975				ľ	1 1	
_			<u> </u>		<del></del>		
	Add lines 10a and 10b		<del>                                     </del>				
11	Net income from unrelated business						
	activities not included in line 10b, whether				1		
40	or not the business is regularly carried on		<del>                                     </del>	<del> </del>			
12	Other income. Do not include gain or loss from the sale of capital assets				1		
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,		<del>- </del>		<del> </del>	<del>  </del>	<u> </u>
13	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	n'e firet secon	d third fourth	or fifth toy y	par as a social	0.501(0)(2)
	organization, check this box and <b>stop he</b>						
Secti	on C. Computation of Public Suppor						· · · <u>- </u>
15	Public support percentage for 2012 (line			13. column (fl)		15	%
16	Public support percentage from 2011 Sci					16	<del></del>
	on D. Computation of Investment In			<u>· · · · · · · · · · · · · · · · · · · </u>	· · · · · ·		
17	Investment income percentage for 2012 (	_		ov line 13. colu	mn (fl)	17	%
18	Investment income percentage from 2011						<del></del>
19a	331/3% support tests—2012. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2011. If the organiz						
_	line 18 is not more than 331/2%, check this						
20	Private foundation. If the organization di						

Cabadula	٨	/C	$\alpha \alpha \alpha$	000	0040

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Page	4

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	······································
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	·································
	<del></del>
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#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

2

**2012** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

September   Sept	Name o	f the organization		Employ	er identification number
Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.  1 Total number at end of year	<u>Ameri</u> o	can Center for Mongolian Studies	_		55-0799211
1 Total number at end of year . 2 Aggregate contributions to (during year) . 3 Aggregate value at end of year . 4 Aggregate value at end of year . 5 Did the organization inform all denors 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?	Par			nds or a	Accounts. Complete if the
2 Aggregate contributions to (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 inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor or any other purpose only for charitable purposes and not for the benefit of the donor or donor advisors or for any other purpose only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose only for charitable purposes and not for the benefit of the donor or donor advisors or for any other purpose only for charitable purposes and the form of the donor or donor advisors or for any other purpose of the donor or donor advisors in the form of any other purpose on the first purposes of the donor of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education)   Preservation of a conservation area and purposes of preservation of open space.  2 complete lines 2 at hrough 2 dit the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year.  3 total number of conservation easements  4 Total number of conservation easements  5 Total acreage restricted by conservation easements.  6 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  1 Number of states where property subject to conservation easements is located.  2 Number of con			(a) Donor advised funds		(b) Funds and other accounts
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?	1	Total number at end of year			
Aggregate value at end of year.  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?	2	Aggregate contributions to (during 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?	3	Aggregate grants from (during year)			
funds are the organization's property, subject to the organization's exclusive legal control?	4				
Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?	5				
Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Protection of natural habitat   Preservation of on a certified historic structure   Preservation of on a certified historic structure   Preservation of one space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  Total number of conservation easements   2a   2b   2b   2b   2c   2d   2d   2d   2d   2d   2d   2d	6	only for charitable purposes and not for the	benefit of the donor or donor advisor, or	for any o	s can be used other purpose
Preservation of land for public use (e.g., recreation or education)	Par	Conservation Easements. Comp	lete if the organization answered "Yes"	to Forr	m 990, Part IV, line 7.
Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Protection of natural habitat   Preservation of open space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements   2a   2a   2b   2c   2d   2d   2d   2d   2d   2d   2d	1				
Protection of natural habitat				of an hist	torically important land area
Preservation of open space  Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements 2ab 5 Total acreage restricted by conservation easements 2b 6 Number of conservation easements 6 cartified historic structure included in (a) 2b 7 Number of conservation easements 6 cartified historic structure included in (a) 2c 8 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d 7 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 1 Number of states where property subject to conservation easement is located ▶ 2d 8 Number of states where property subject to conservation easement is located ▶ 2d 8 Number of states where property subject to conservation easement is located ▶ 2d 9 No 9 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 5 No 9 No 9 No 9 No 9 No 9 No 9 No 9 No					
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  Total number of conservation easements  Total acreage restricted by conservation easements  Number of conservation easements on a certified historic structure included in (a)  Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  S  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)		☐ Preservation of open space			
a Total number of conservation easements	2		tion held a qualified conservation contributi	on in the	e form of a conservation
a Total number of conservation easements  b Total acreage restricted by conservation easements.  c Number of conservation easements on a certified historic structure included in (a).  d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?			·		
b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a)				ſ	Held at the End of the Tax Year
b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a)	а	Total number of conservation easements .			2a
c Number of conservation easements on a certified historic structure included in (a)	b			<u>_</u>	•
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	С				
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	d				
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	-				2d
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	3				
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  S  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?  In Part XIII, 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.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), 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  It 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 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1  S  Revenues included in Form 990, Part VIII, line 1		Number of states where property subject to Does the organization have a written pole	cy regarding the periodic monitoring, in		· ·
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?  In Part XIII, 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.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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  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 (ASC 958) relating to these items:  Revenues included in Form 990, Part VIII, line 1  Revenues included in Form 990, Part VIII, line 1  Revenues included in Form 990, Part VIII, line 1  Revenues included in Form 990, Part VIII, line 1	6	Staff and volunteer hours devoted to monito			
(i) and section 170(h)(4)(B)(ii)?	7		inspecting, and enforcing conservation eas	ements	during the year
In Part XIII, 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.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 X	8	Does each conservation easement reported (i) and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements	of section	on 170(h)(4)(B) · · · · <b>☐ Yes ☐ No</b>
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.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under SFAS 116 (ASC 958), 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 X	9				
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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), 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					
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), 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					
If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), 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	Pari				Similar Assets.
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), 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	1a				e statement and balance sheet
b If the organization elected, as permitted under SFAS 116 (ASC 958), 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		works of art, historical treasures, or other s	sımilar assets held for public exhibition, e	ducation	n, or research in furtherance of
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	b				
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1	_	works of art, historical treasures, or other public service, provide the following amount	similar assets held for public exhibition, e s relating to these items:	ducatior	n, or research in furtherance of
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1		(i) Revenues included in Form 990, Part VIII,	line 1		. ▶ \$
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:  a Revenues included in Form 990, Part VIII, line 1		(ii) Assets included in Form 990, Part X			. > \$
a Revenues included in Form 990, Part VIII, line 1	2	following amounts required to be reported u	of art, historical treasures, or other similander SFAS 116 (ASC 958) relating to these	ır assets items:	s for financial gain, provide the
	_	Revenues included in Form 990, Part VIII, lin	e1		. • \$

Part	U Organizations Maintaining	Collections of	Art, His	torical 1	<b>Freasures</b>	, or Ot	her Similar As	sets (co.	$n$ tinu $\epsilon$	ed)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	ther reco	rds, chec	k any of th	ne follov	ving that are a s	ignificant	use o	f its
а	☐ Public exhibition		d	□toan	or exchang	ne prod	rame			
b	☐ Scholarly research									
C	Preservation for future generations	•	•	□ Otile	'					
4			احدده احسا	ما مناها	h	. 41				
•	Provide a description of the organizat XIII.	lion's collections :	and expla	ain now t	ney turtner	tne org	janization's exer	npt purpo	se in i	Part
5	During the year, did the organization	solicit or receive	donation	s of art.	historical t	reasure	s. or other simila	ar		
	assets to be sold to raise funds rather	than to be mainta	ained as i	part of the	e organizat	ion's co	llection?	 	<u>.</u> П	No
Part	IV Escrow and Custodial Arra									
	line 9, or reported an amoun	t on Form 990, I	Part X, Iı	ne 21.	,				- ait i	·,
1a	Is the organization an agent, trustee, included on Form 990, Part X?									
								☐ Ye	s⊔	No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	llowing to	able:	_	1			
							A	mount		
С	Beginning balance					10	;			
d	Additions during the year					10				
е	Distributions during the year					1e	,			
f	Ending balance					1f		•		
2a	Did the organization include an amour	nt on Form 990, P	art X, line	21? .				☐ Ye	s 🗔	No
b	If "Yes," explain the arrangement in Pa									
Pari		ete if the organiz	zation ar	swered	"Yes" to I	Form 9	90. Part IV. line	10.		
		(a) Current year		or year			(d) Three years back		vears ba	ack
1a	Beginning of year balance		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<del></del>		. ,	1 (7)		
b	Contributions					-				
							· · · · · · · · · · · · · · · · · · ·			
С	Net investment earnings, gains, and losses									
_					<u> </u>					
d	Grants or scholarships		ļ							
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									_
2	Provide the estimated percentage of t	he current year er	nd balanc	e (line 1d	ı, column (a	a)) held	as:			
а	Board designated or quasi-endowmer	nt 🕨	%	`	,					
b	Permanent endowment >	%	·							
C	Temporarily restricted endowment ▶	%								
_	The percentages in lines 2a, 2b, and 2	c should equal 10	20%							
3a	Are there endowment funds not in the			zation th	at are held	and ad	ministered for th	ıe		
	organization by:		5						Yes I	No
	(i) unrelated organizations							3a(i)	163 1	10
	(ii) related organizations									
h	If "Yes" to 3a(ii), are the related organi							3a(ii)	-	—
ь 4	Describe in Part XIII the intended uses							3b		
Part								<del></del>		
	Description of property	(a) Cost or of (investm		1	or other basis other)		Accumulated	(d) Book	c value	
		(investifi		"	········	0	epreciation			
1a	Land	·		ļ						
b	Buildings									
С	Leasehold improvements									
d	Equipment									
е	Other									
Total.	Add lines 1a through 1e. (Column (d) n	oust equal Form 9	90 Part	X column	(R) line 1	0(c) )				

(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must 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  (7) Funds held in Mongolia for Mongolia Office operating expenses 21,899  (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) . ▶ 21,899  Part X Other Liabilities. See Form 990, Part X, line 25.	Part VII	Investments—Other Securitie	s. See Form 990, Part X	, line 12.	
2) Closely-held equity interests			(b) Book value		
2) Closely-held equity interests	(1) Financi	al derivatives			
(A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C					<u> </u>
G    G    G    G    G    G    G    G					
Col.   Col.					
(b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d			<u>.</u>		
(G) (G) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F					
(F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (F) (G) (F) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F			-		
Gi   Gi   Gi   Gi   Gi   Gi   Gi   Gi				<del></del>	
10    10					······································
(1)			·		
Total (Column (b) must equal Form 990, Part X, col. (B) line 12)   Fart 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 (c) (d) (e) (e) (e) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f					
Investments - Program Related. See Form 990, Part X, Inne 13.		n (h) must equal Form 990 Part X col. (R) line 12.)	<b>&gt;</b>		
(a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) 101 101 101 101 101 101 101 101 101				(. line 13.	5,9 <b>59</b> 50, **Z#**********************************
Cost of end-of-year market value			1	T	valuation
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Assets. See Form 990, Part X, col. (B) line 15.)  Part X Other Assets. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 15.  (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) (3) (4) (4) (5) (6) (7) (8) (9) (10) (10) (11) (10) (11) (10) (10) (11) (10) (10					
(3) (4) (5) (6) (7) (8) (9) (10) (101) (101) (101) (102) (101) (102) (103) (104) (105) (107) (107) (107) (108) (109) (1	(1)				
(3) (4) (5) (6) (7) (8) (9) (10) (101) (101) (101) (102) (101) (102) (103) (104) (105) (107) (107) (107) (108) (109) (1	(2)				
(5) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, col. (B) line 13,) ▶  Part X Other Assets. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) Funds held in Mongolia for Mongolia Office operating expenses  (2) (3) (4) (5) (6) (7) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (11) (10) (11) (10) (11) (11					
(6) (7) (8) (9) (10) Total, (Column (b) must 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  (b) Book value  (1) Funds held in Mongolia for Mongolia Office operating expenses  (2) (3) (4) (5) (6) (7) (9) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (7) Federal income taxes  (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)  (8) (9) (10) (11) Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)  (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.	(4)				
(f) (8) (9) (10)			<u> </u>		· · · · · · · · · · · · · · · · · · ·
(B) (B) (B) (B) (B) (B) (B) (B) (Column (b)) must 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) Funds held in Mongolia for Mongolia Office operating expenses (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  21,899  Part X  Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of hability (b) Book value  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (11) (11) (10) (11) (11	-			-	
(9)		<del></del>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX		n (h) must equal Form 990, Part X, col. (R) line 13.)	<u> </u>	W. AND STREET	ornanda, vaggara
(a) Description (b) Book value  (1) Funds held in Mongolia for Mongolia Office operating expenses 21,899 (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15,) ▶ 21,899  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) (1) Funds income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶				U. L. Selfer Co. (C. 1)	STANDAR TO PROGRESS AND AND AND AND AND AND AND AND AND AND
(2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 21,899  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶					(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 21,899  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶	(1) Funds	s held in Mongolia for Mongolia Office or	perating expenses		21,899
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(7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					
(9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  (11)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶			<del></del> -		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X       Other Liabilities. See Form 990, Part X, line 25.         1. (a) Description of liability (b) Book value         (1) Federal income taxes         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         (10)         (11)         Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			<del></del>	· · · · · · · · · · · · · · · · · · ·	
Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶		lumn (h) must equal Form 990. Part X	col (R) line 15 )		04.000
1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					21,899
(1) Federal income taxes  (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	1.			The state of the s	
(2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	(1) Federa		.,		
(3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶			-		
(5) (6) (7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					
(6) (7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	(4)				r van Air aika aika 1900
(7) (8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					
(8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					u va i 👗
(9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶					
(10) (11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25)					i i i i i i i i i i i i i i i i i i i
(11)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶			<del> </del>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶		· · · · · · · · · · · · · · · · · · ·		<b>-</b>	,
		in (b) must equal Form 000. Part V and (D) line 05 1			
				ragnization's financial statements to	not roporto the over

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII . . . . . .

Schedule D (Form 990) 2012
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Page 4

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents 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:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	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 XIII.)		
	Add lines <b>4a</b> and <b>4b</b>		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	4c   5
	XII Reconciliation of Expenses per Audited Financial Statem		I
			er Return
1	Total expenses and losses per audited financial statements		1 1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	l a. l	
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
C.	Other losses		
d	Other (Describe in Part XIII.)	2d	
е	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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<b>[美]</b>
b	Other (Describe in Part XIII.)		10.00 20.00 20.00
_	Add lines <b>4a</b> and <b>4b</b>	• • • • • • • •	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5
	XIII Supplemental Information		
Comp Part V inform	ete this part to provide the descriptions required for Part II, lines 3, 5, and line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b ation.	9; Part III, lines 1a and 4; P  Also complete this part to	eart IV, lines 1b and 2b; coprovide any additional
			4
	······	· <del></del>	

chedule D (Fo	m 990) 2012	Page 5
art XIII	Supplemental Information (continued)	
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#### SCHEDULE 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. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Inspection
Employer identification number

Ameri	can Center for Mongolian Studi						0799211
Par	General Information Form 990, Part IV, line		es Outside	the United States. Com	plete if the organiz	ation answ	ered "Yes" to
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for the					☑Yes □No
2	For grantmakers. Describe		he organizati	on's procedures for moni	toring the use of	ıts grants	
	assistance outside the Unite	ed States.					
3	Activities per Region. (The fo	llowing Part	, line 3 table o	can be duplicated if additio	nal space is neede	d.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program serv describe specific service(s) in req	type of	(f) Total expenditures for and investments in region
(1)	Mongolia	1	5	Program Services	Resource Center		76,468
(2)							
(3)							
(4)							
(5)							
							<del></del> .
(6)							
(7)							<del></del>
(8)							
(9)							
(10)							
(11)							<u> </u>
(12)							
(13)							
(14)							
(15)							
(16)			-				
(17) 3a	Sub-total	1	5	<i>∞</i> 3: % ∰	\$ \$	8.4	76,468
b	Total from continuation sheets to Part I	1	5	* * *	\$ 1 \$ 4	ž. +j.	76,468
C	Totals (add lines 3a and 3b)	1	5				76,460

Schedule F (Form 990) 2012

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. Part II can be duplicated if additional space is needed. Part II

						-	-		
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	de (c) Region EIN	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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(2)			A Section .						
(3)		***		,					
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(16)	\$ .	9	ار در تر						

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 N

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

Schedule F (Form 990) 2012

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2012

Part III Grants ar

(a) Type of grant or assistance	(a)	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Fellowship to Individual	Denmark	1	2,000	2,000 wire-transfer	-0-		
(2) Fellowship to Individual	Mongolia	1	4,722	4,722 check	-0-		
(3) Fellowship to Individual	Mongolia	1	4,000	4,000 check	-0-		
(4) Fellowship to Individual	Mongolia	1	4,000	4,000 check	-0-		
(5) Fellowship to Individual	Mongolia	1	4,000	4,000 check	Ġ.		
(6) Fellowship to Individual	Mongolia	1	3,674	3,674 check	Ģ		
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sche	Schedule F (Form 990) 2012

Part	V 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, Return by a U.S. Transferor of Property to a Foreign Corporation (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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (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, Information 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	<b>√</b> No

Schedule F (Form 990) 2012

#### Part V

#### Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Center Operations in Mongolia: The Resident Director in Mongolia is responsible for maintaining financial records for the office in Mongolia.
Each month she submits a copy of the accounting books and scans of receipts to the US Director who reviews the records
concurrently with his preparation of the US books. Both are then submitted to the Executive Director for review. The office in Mongolia
generally receives transfers to cover operating costs, and expenses are booked in the month they accrued in both the US and Mongolia
financial records. The Mongolia office may request an advance of funds to cover expenses, and later reimbursements are adjusted
accordingly by subtracting out advance amounts. The Mongolia office maintains four accounts at a Mongolian banking institution, 2 in US\$
and 2 in Mongolian tugriks. The office also maintains a petty cash account in dollars and tugriks that normally should not exceed \$200 in
balance, although exceptions to this rule do occur when alternative methods of receiving or distributing payments are not available. All
transactions are recorded with receipts and monthly statements from the banking institution. Each year the Executive Director or US
Director visits the Mongolia office to review operations and verify records are being handled and stored properly.
Fellowship selection and oversight: Each fellow must submit an application to a competitive process which includes review of personal
statements and academic or professional achievement by a selection committee. After the selection committee makes their recommend-
ations for awards, awardees are notified in writing of their selection. Each awardee must complete administrative paperwork which includes
a liability waiver form, payment information, and the general terms and conditions of the award. After receiving the required paperwork, the
ACMS disburses the award amount minus \$250 to be held until successful completion of the program and submission of a final report on
the fellowship experience. Fellowship awards are intended to cover travel and living costs associated with conducting research or study in
Mongolia. All fellows are required to maintain communication with the Resident Director in Mongolia and are expected to meet at
least once during their stay in the country.
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# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

2012

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, °N □ (h) Purpose of grant or assistance √Yes 55-0799211 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . . (g) Description of non-cash assistance . Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section the selection criteria used to award the grants or assistance? if applicable General Information on Grants and Assistance (a) American Center for Mongolian Studies 1 (a) Name and address of organization (9) or government Part II Part I E N 0 2 Ξ 9 € 3 8 6 5 (12)

Schedule I (Form 990) (2012)

Cat No 50055P

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

Schedule I (Fo	schedule I (Form 990) (2012)	g.
Part III	art III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	
	Part III can be duplicated if additional space is needed.	

ļ	(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 ACMS	1 ACMS Field Research Fellowship	80	30,374	-0-		
2 ACMS	2 ACMS Visiting Scholar	3	15000	φ		-
3 ACMS	3 ACMS Library Fellowship	2	6,492	-0-		
4						
ဟ						
9						
Part IV	Supplemental Information. Complete this part to information.	e this part to pro	vide the information	n required in Part I,	line 2, Part III, column (b)	provide the information required in Part I, line 2, Part III, column (b), and any other additional
	leading and improve has sense sense of motives and indices and ind	e di deciliare de di ma	::::	you gobuloui doidu. oox	e standards leadston to moi	ba acadomic or professional

complete administrative paperwork which includes a liability waiver form, payment information, and the general terms and conditions of the award. After receiving the required paperwork, are intended to cover travel and living costs associated with conducting research or study in Mongolia. All fellows are required to maintain communication with the Resident Director in the ACMS disburses the award amount minus \$250 to be held until successful completion of the program and submission of a final report on the fellowship experience. Fellowship awards Mongolia and are expected to meet with her at least once during their stay in the country. Fellows are required to submit boarding passes to confirm compliance with the fly America act achievement by a selection committee. After the selection committee makes their recommendations for awards, awardees are notified in writing of their selection. Each awardee must Fellowship selection and oversight: Each fellow must submit an application to an competitive process which includes review of personal statements and academic or professional when appropriate. Schedule I (Form 990) (2012)

## SCHEDULE J-2 (Form 990)

#### Continuation Sheet for Form 990°

20**19** 

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

**At-Large Director** 

Employer identification number

American Center for Mongolian Studies 55 0799211

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I **Employees** (B) (C) (D) (E) (F) (A) Average hours Position (check all that apply) Reportable Reportable Estimated Name and title compensation per week compensation amount of Key Individual trustee Institutional Highest compensated employee from from related other director employee the organizations compensation (W-2/1099-MISC) organization from the (W-2/1099-MISC) organization l trustee and related organizations Dr. Cliff Montagne Montana State University Rep. -0--0--0-Dr. S. Davaa National University of Mongolia Rep. -0--0--0-Dr. Scott Gardner -0--0--0-University of Nebraska Rep. Dr. Joseph A. Cook -0--0--0-University of New Mexico Rep. Mr. Steve Saunders North America-Mongolia Bus. Cou. Rep. -0--0--0-Dr. Timothy May -0--0--0-North Georgia College & State Uni Rep. Dr. Alessandra Higa -0--0--0-Oglala Lakota College Rep. Dr. Jane Walster -0--0--0-Portland Community College Rep. Dr. Tony Boydell Royal Roads University Rep. -0--0--0-Dr. John Williams Principia College Rep. -0--0--0-Dr. Andrea Insley Seattle Community College Rep. -0--0--0-Dr. Craig R. Janes -0--0-Simon Fraser University Rep. -0-Dr. Marta Mikkelsen University of Washington Rep. -0--0--0-Dr. Edward Vajda Western Washington Univ. Rep. -0--0--0-Dr. Kelly Kester Whatcom Community College Rep. -0--0--0-Dr. Richard Miller -0--0-University of Wisconsin-Madison Rep. -0-Dr. Michael Lastinger West Virginia University Rep. -0--0--0-Dr. William Honeychurch Yale University Rep. -0--0--0-Dr. Dawn Bazely York University Rep. -0--0--0-Mr. Layton Croft At-Large Director -0--0--0-Dr. Saruul-Erdene Myagmar

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#### SCHEDULE J-2 (Form 990)

#### **Continuation Sheet for Form 990**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the Organization

Employer identification number

**American Center for Mongolian Studies** 55 0799211 Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I (A) (B) (C) (D) (E) (F) Name and title Average hours Position (check all that apply) Reportable Reportable Estimated per week compensation compensation amount of Individual trustee or director Institutional trustee employee Key employee Highest from from related other organizations compensation organization (W-2/1099-MISC) from the compensated (W-2/1099-MISC) organization and related organizations Mr. Joseph Lake At-Large Director -0--0--0-Dr. Morris Rossabi At-Large Director -0--0--0-Dr. Jack Weatherford At-Large Director -0--0--0-Dr. Charles Krusekopf **Executive Director** 10 16,500 -0--0-Mr. Brian White **US Director** 20 -0-\_ 2,500 -0-Dr. David Tinnin **Resident Director** 40 36,000 -0--0-

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

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

American Center for Mor	igolian Studies			55-0799211
Part VI Line 7a: Members	join the organization by payir	ng annual dues. Mem	bership comprises stude	nts and individuals. Every three years
elections are held for five	= "At-Large" members of the b	ooard of directors for	three year terms. Active n	nembers, as defined as having paid the
annual dues for the curre	ent year, are eligible to vote in	these elections. Mem	bers are also eligible to r	nominate candidates. As of writing this,
the ACMS has over 400 a	octive members. Membership i	s defined in the corpo	orate by-laws to begin Se	ptember 1 and end August 30 of each
year for purposes of dete	ermining a member's active or	non-active status.		,
Institutional members jo	in the organization by paying a	annual dues. Institution	onal members may select	a representative on the board of
directors. Institutional re	presentatives along with "At-I	arge" directors may	nominate and vote for off	licers and members of the Executive
committee. They may als	o, as outlined in the corporate	e by-laws appoint mer	nbers to committees. As	of writing this, the ACMS has 43
institutional members.				
Don't Million 40 . The comm				
				along with a list of institutioal members
				ns a policy manual to guide operations.
This manual is available	upon request but is not norma	ally shared with the p	ublic. It is, however, avail	lable to all officers, directors, and .
employees. Within this p	olicy manual are the conflict o	of interest policy, as v	ell as other rules and rec	gulations. At each annual meeting of
members, which is open	to the public, a general stater	nent of the organizati	on's finances are present	ted by the Treasurer or other officer
present at the meeting. (	Other financial records are ava	nilable upon request b	ut are not normally share	ed with the public.
Part XI Line 2c: The Exec	cutive Committee, which comp	orises the officers of t	he board, reviews the fin	ancial statements quarterly.
The Executive Director s	ubmits an annual financial sta	ntement to the board (	or review. This statemen	t is in addition to the 990 form, because
the annual meeting is ge	nerally held in spring before f	iling the 990. The org	anization is not required t	to submit to an annual A-133 audit,; how-
ever, it does receive a re	view of its books and financia	l statements by an in	dependent auditing firm.	The review reports are provided to the
President, Treasurer, an	d Executive Director in origina	al hardcopy form whe	n received, and copies ar	e available on request.

Name of the organization	Page 2
	Employer identification number
American Center for Mongolian Studies	55-0799211
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