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DLN: 93493311008373

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public

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

itemai	revenue	e oeivice						Inspection	
			endar year, or tax year beginning C Name of organization	g 01-01-2012 , 2012, and ending 12	-31-2012	B.E		ostion remb	
_		applicable	APPRAISAL INSTITUTE					cation number	
	Iress ch	,	Doing Business As			36-373	9643		
_	ne cha								
_	ıal retu		Number and street (or P O box if m 200 W Madison Street	nail is not delivered to street address) Room/	suite	E Telephon	e number		
Ter	mınate	ed	Suite 1500			(312)3	35-4100	0	
Am	ended	return	City or town, state or country, and 7 Chicago, IL 60606	ZIP + 4		(312)3		-	
App	lication	n pending				G Gross red	eıpts \$ 19,	213,421	
			F Name and address of prir	ncipal officer	H(a)	Is this a group r	eturn for		
			Frederick H Grubbe 200 W Madison St			affiliates?		▼ Yes ▼ No	
			Suite 1500		н(ь)	Are all affiliates	ıncluded	2 Ves V No	
			Chicago,IL 60606			If "No," attach a			
Ta	x-exen	npt status	「 501(c)(3)	insert no)		6	•		
W	ebsite	e: 🕨 ww	w appraisalinstitute org		H(c)	Group exemptio	n numbe	r ► 9464	
. Forn	n of or	rganization	Corporation Trust Associatio	n Cother ▶	I Yea	r of formation 1991	M Stat	e of legal domicile IL	
	rt I		mary	ny odier P	L rea	Torronnation 1991	. Justac	e or legar dornielle 12	
			escribe the organization's mission	on or most significant activities					
				dvance professionalism and ethics, g	lobal stan	dards, methodolo	ogies and	d practices	
13	:	through	the professional development of	property economics worldwide					
ankellidilice	.								
5	'								
2	2	Check th	nis box দ 🗆 if the organization di	scontinued its operations or disposed	of more t	han 25% of its n	et asset	s	
			,						
AVII YILIGO Q	3	Number	of voting members of the govern	ing body (Part VI, line 1a)		· ·	3	2	
	4	Number	of independent voting members	of the governing body (Part VI, line 1	b)		4	2	
	5	Total nu	mber of individuals employed in	calendar year 2012 (Part V, line 2a)			5	10	
ť	6	Total nu	mber of volunteers (estimate if n	ecessary)			6	13:	
	l			art VIII, column (C), line 12			7a	123,338	
	ь	Net unre	lated business taxable income f	rom Form 990-T, line 34	<u> </u>		7b	(
						Prior Year	_	Current Year	
a.	8			ne 1 h)		65,00		89,500	
Revenue	9			ne 2g)		18,192,37	_	18,693,565	
ž.	10		,	ı (A), lınes 3, 4, and 7d)	٠ 📙		94,653		
_	11		, , , , , , , , , , , , , , , , , , , ,	lines 5, 6d, 8c, 9c, 10c, and 11e)		389,83	12	355,942	
	12			(must equal Part VIII, column (A), li	ne	18,741,86	5 4	19,213,421	
	13			IX, column (A), lines 1-3)			0	10,375	
	14			X, column (A), line 4)			0	0	
	15			ee benefits (Part IX, column (A), lines					
Expenses		5-10)				8,582,07	6	8,796,316	
क्	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)		0		0	
ਡੋ	Ь		ndraısıng expenses (Part IX, column (D				_		
	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		9,083,41	. 5	9,215,839	
	18			st equal Part IX, column (A), line 25)		17,665,49		18,022,530	
	19	Reven	ue less expenses Subtract line	18 from line 12		1,076,37	_	1,190,891	
5 % 2 %					Begi	inning of Current Year		End of Year	
nechased of Fund Balances	20	Total	assets (Part Y line 16)		<u> </u>	14,237,61	1	16,463,945	
98	21					9,160,06		10,153,626	
	22			line 21 from line 20		5,077,55	_	6,310,319	
	t II		ature Block	La nominio Lo i i i i i		5,577,55		0,010,015	
nde ny kr	r pena nowled	alties of dge and	perjury, I declare that I have exa	amined this return, including accompanplete Declaration of preparer (other					
		T.				1			
		Signs	ature of officer			2013-11-07 Date			
Sign Iere		1.				Date			
iere	=		erick H Grubbe CEO or print name and title						
		17	Print/Type preparer's name	Preparer's signature	Date	Check I If F	PTIN		
Paid	1	[, 17po proparor 3 flame			Check If F self-employed			
			irm's name 🕨			Firm's EIN			
	pare		Firm's address 🕨			Phone no			
Jse	On	' ıy ˈ	iiii a duuleaa 🗲			FHORE HO			

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

□Yes □No

Part IV	Check	dist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f g}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3	Yes	
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? <i>If</i> "Yes," complete Schedule C, Part II	4		
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	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2012)

GII	Statements Regarding Other 1RS Filings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	-	Yes	. l No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 204		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
1	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	35		
	2. 100/ to the building and the organization menorial to the first to	5c		
1	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 as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	74 Test, indicate the number of Forms 9292 med during the year 1 1 1 1	-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u> </u>		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand	Į ļ		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a	Yes	
h	more members of the governing body?	7a 7b	Yes	
	or persons other than the governing body?	,,,	163	
8	year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	organization of manning address 1	_		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	
Se		evenu	ue Cod Yes	
		evenu 10a		e.)
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R		Yes	e.)
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	e.)
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	e.)
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	e.)
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	e.)
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	e.)
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	e.)
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	e.)
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes	e.)
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes	e.) No

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization WILLIAM T ZIMMERMANN 200 W Madison Street Suite 1500 Chicago, IL (312) 335-4100

Form	990	(2012)
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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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1039-M13C)	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han c n is l	ne b ooth	oox, an c			(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	amo	npens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		relate relate ganiza	
1b	Sub-Total			•				•					
c	Total from continuation sheet				•	•	•		1 906 500	0			101 000
 	Total (add lines 1b and 1c) . Total number of individuals (in							e) w	1,896,599 ho received more th				181,080
	\$100,000 of reportable compe	-						-,					
												Yes	No
3	On line 1a? If "Yes," complete S					key •	emplo	yee, •	or highest compen		3		No
4	For any individual listed on line organization and related organ individual									uch	4	Yes	
5	Did any person listed on line 1 services rendered to the organ			•						or individual for	5		No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization	e highest comp										year	

(A) Name and business address	(B) Description of services	(C) Compensation
Rich Feuer Group 1133 Connecticut Ave NW 5th Floor Washington DC 20036	Consulting Fees	130,189
Thomas R Kırby , 9420 Steeplehill Drive Las Vegas NV 89117	Instructor Fees	110,990
John P Wintrol LLC 2000 M Street NW Suite 700 Washington DC 20036	Legal Fees	107,266
Appraisal Consultants 2570 Rice Street Roseville MN 55113	Instructor Fees	103,670
2. Total number of independent contractors (including but not limited to the	so listed above) who received more than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►4

Part V		Statement o	f Revenue ule O contains a respor	nse to any question i	in this Part VIII .			
		Circle ii Schede	are o contains a respon	ise to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
ഗമ	1a	Federated cam	paigns 1a	0				
ant a	b	Membership du	es 1b	0				
0 m	С	Fundraising eve	ents 1c	0				
TŞ,	d	Related organiz		0				
<u>:</u>		Government grants						
ns,	е	_						
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	89,500				
년 동	g		ons included in lines	0	İ		i	
ont od (.	1a-1f \$	s 1a-1f		89,500			
ರ ಹ	h	Total. Add filles	5 Id-II	▶	03,300			
e l				Business Code				
ven	2a	Membership Dues		541900	10,304,149	10,304,149	0	0
22	b	Education & Regula	ation Fees	611600	6,369,001	6,369,001	0	0
M C K	С.	Publication Sales		511130	799,478	799,478	0	0
ja K	d	Admission & Gradin	ng Fees	611600	744,175	744,175	0	0
Program Serwce Revenue	e	Periodicals		511120	197,050	81,637	115,413	0
Į,	f	All other progra	im service revenue		279,712	0	0	279,712
<u>~</u>	g	Total. Add lines	s 2a – 2f		18,693,565			
	3		ome (including dividend ar amounts)		63,822	О	o	63,822
	4		tment of tax-exempt bond		0	0	0	0
	5	Royalties		🕨	280,942	0	0	280,942
			(ı) Real	(II) Personal				
	6a	Gross rents	0	0				
	ь	Less rental expenses	0	0				
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0	0	0	0
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	10,592	0				
	b	Less cost or other basis and	0	0				
	_	sales expenses Gain or (loss)	10,592					
	c d	Net gain or (los			10,592	o	0	10,592
en	8a	Gross income f events (not inc	rom fundraising					
Other Revenue		\$of contributions See Part IV , lin	reported on line 1c)					
<u> </u>	ь	less director	a penses b	0				
₹	С		loss) from fundraising	events 🛌	0		0	0
	9a		rom gaming activities	-				
	Ь	Less direct ex	a penses b	0				
	С	Net income or (loss) from gaming activ	vities	0	0	0	0
	10a	Gross sales of returns and allo		0				
	b	Less cost of a	oods sold b	0				
		=	(loss) from sales of inve	entory 🛌	0	0	0	0
		Miscellaneous	s Revenue	Business Code				
	11a	Website Advert	cising	541900	7,925	0	7,925	0
	b							
	С							
	d	All other reven	l		67,075	0	0	67,075
	е	Total. Add lines	s 11a-11d	🕨	75,000			
	12	Total revenue.	See Instructions		19,213,421	18,298,440	123,338	702,143

Part IX Statement of Functional Expenses

ectio	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All				
	Check if Schedule O contains a response to any question in this Pa	rt I X			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	10,375			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,334,146			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	6,033,979			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	243,493			
9	Other employee benefits	661,006			
10	Payroll taxes	523,692			
11	Fees for services (non-employees)				
а	Management	66,938			
b	Legal	287,623			
С	Accounting	39,700			
d	Lobbying	120,162			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	10,000			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	505,417			
12	Advertising and promotion	596,367			
.3	Office expenses	822,551			
.4	Information technology	293,359			
.5	Royalties	284,530			
.6	Occupancy	628,212			
L 7	Travel	835,620			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,002,884			
20	Interest	12,508			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	542,336			
23	Insurance	150,086			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Outside Services	537,835			
b	Printing and Publications	212,042			
c	Credit Card Fees	250,451			
d	Education Certification and License Fees	726,386			
е	All other expenses	290,832			
25	Total functional expenses. Add lines 1 through 24e	18,022,530	0	0	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

FG	τχ	Check if Schedule O contains a response to any question in this	s Part	×			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			4,935,840	1	6,170,693
	2	Savings and temporary cash investments			1,395,904	2	1,805,910
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			186,226	4	71,203
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II o	f	0	5	0
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploye	utıng employers			0
Š	7	Notes and loans receivable, net			0	 	0
₹.	8	Inventories for sale or use			148.426	- -	117,435
	9				321,891	- -	342,862
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D					
	ь	Less accumulated depreciation	10b	3,576,454	2,453,055	10c	2,315,592
	11	Investments—publicly traded securities			4,368,364	\vdash	5.153.739
	12	Investments—other securities See Part IV, line 11		0		0	
	13	Investments—program-related See Part IV, line 11			0	\vdash	0
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			427,905		486,511
	16	Total assets. Add lines 1 through 15 (must equal line 34).			14,237,611	16	16,463,945
	17	Accounts payable and accrued expenses			1,462,165	H	1,373,976
	18	Grants payable	1,402,100		1,575,576		
	19	Deferred revenue			4,458,301	19	4,823,430
	20		4,430,301	H H	4,023,430		
		Tax-exempt bond liabilities		0		0	
eS.	21	Escrow or custodial account liability Complete Part IV of Sche			21		
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	fied	·	504.000		500 400
<u>.e</u>		persons Complete Part II of Schedule L			584,209	\vdash	590,163
_	23	Secured mortgages and notes payable to unrelated third partie			0		0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa D	rt X of	Schedule	2.655.386	25	3,366,057
	26	Total liabilities. Add lines 17 through 25			9,160,061	26	10,153,626
—— Ф	20	Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.			5,135,551	20	13,732,323
Fund Balance	27	Unrestricted net assets		_	5,066,988	27	6,282,257
<u>छ</u>	28	Temporarily restricted net assets	•		10,562	28	28,062
<u> </u>	29	Permanently restricted net assets			0	 	0
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check h				25	
		complete lines 30 through 34.	CIC F	, and			
0.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other f				32	
Net /	33	Total net assets or fund balances			5,077,550	33	6,310,319
ž	34	Total liabilities and net assets/fund balances			14,237,611	34	16,463,945
		rotar nabinates and net assets/land balances	• •	• •	17,237,011	J-4	10,700,340

Pai	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		19,2	213,421
2	Total expenses (must equal Part IX, column (A), line 25)	2		18,0	022,530
3	Revenue less expenses Subtract line 2 from line 1	3		1,1	190,891
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		5,0	77,550
5	Net unrealized gains (losses) on investments	5			31,878
6	Donated services and use of facilities	6			0
7	Investment expenses	7			10,000
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		6,3	310,319
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 「
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepassis, consolidated basis, or both	oarate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	tht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	:he	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

Software ID: 12000197 **Software Version:** v1.00

EIN: 36-3739643

Name: APPRAISAL INSTITUTE

Form 990, Part VII - Compensation of Compensated Employees, and Indeper	Officers, Dir	ectors	,Trı	ıst∈	es,	, Key	, Em	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Positio more unless an d	than	o not one son is er and trust	box s bot d a tee)	th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	illey	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
SARA W STEPHENS MAI President	30 0	х		х				134,020	0	0
RICHARD L BORGES II MAI SRA President-Elect	20 0	х		х				102,676	0	0
KEN P WILSON MAI SRA Vice President / Treasurer	20 0	х		х				77,414	0	0
JOSEPH C MAGDZIARZ MAI SRA Immediate Past President	10 0	х		х				56,700	0	0
JIM AMORIN MAI SRA Director	0	х						0	0	0
SCOTT F BIETHAN MAI Director	0	х						0	0	0
TERRY O BERNHARDT JD SRA Director	0	х						0	0	0
MACKENZIE S BOTTUM MAI Director	0	х						0	0	0
ROBERT E DIETRICH MAI Director	2	х						0	0	0
SHAUNA E ELMER-GEHRING SRA Director	0	х						0	0	0
ROBERT D GRACE MAI SRA Director	2 0	х						0	0	0
M RALPH GRIFFIN JR MAI Director	2 0	х						0	0	0
CELEN GUNIZ MAI Director	2 0	х						0	0	0
JAMES L HENDERSON SRA Director	2 0	х						0	0	0
JONI L HERNDON SRA Director	2 0	х						0	0	0
GAIL G HUNYAR SRA Director	2 0	х						0	0	0
RICHARD J MURRAY SRA Director	0	х						0	0	0
JAMES L MURRETT MAI SRA Director	0	х						0	0	0
THOMAS C REYNOLDS III SRPA Director	0	х						0	0	0
ROSCOE W SHIPLETT MAI Director	0	х						0	0	0
KERN G SLUCTER MAI SRA Director	0	х						0	0	0
RUSSELL K STERLING MAI Director	0	х						0	0	0
DETLEF H WEILER MAI Director	0	х						0	0	0
SHAWN E WILSON MAI Director	0	х						0	0	0
SANDRA M WINTER MAI Director	0	x						0	0	0

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)		than	o not one son is er and trust	box s bot d a tee)	, th	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GARY S WRIGHT MAI SRA Director	2 0	х						0	0	0
FREDERICK H GRUBBE CEO/BOD Secretary	60 0			х				324,159	0	46,140
WILLIAM T ZIMMERMANN CFO	50 0			х				246,933	0	23,427
JEFFREY E LISKAR General Counsel	50 0				х			251,915	0	38,351
WILLIAM GARBER Director Government Affairs	37 50 0					х		186,163	0	22,882
KENNETH CHITESTER Director Communications	37 50 0					х		138,538	0	11,225
SHEILA BARNES Director Human Resources	37 50 0					х		128,892	0	16,437
STEPHANIE COLEMAN Director Screening	37 50 0					х		125,706	0	15,302
BEATA SWACHA Controller	37 50 0					x		123,483	0	7,316

DLN: 93493311008373

OMB No 1545-0047

Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	-		(Proxy Tax) or Form	990-EZ, Part V, line 350	(Proxy Tax), then
Na	ime of the organization	·		Employer ide	ntification number
A Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Name of the organization Remposarization Apprexisal. Institute 36-3739643					
Approximation Approximatio					
1	Provide a description of the o	rganızatıon's dırect and ındırect p	olitical campaign activ	vities in Part IV	
2	Political expenditures			▶	\$0
3	Volunteer hours				0
Par	t I-B Complete if the o	rganization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization	n under section 4955	▶	\$
2	Enter the amount of any excis	e tax incurred by organization ma	anagers under section	4 955 ►	\$
3	If the organization incurred a		┌ Yes ┌ No		
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the o	rganization is exempt und	ler section 501(c), except section 50	01(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	or section 527 exempt	function activities 🕨	\$0
2	=	organization's funds contributed t	o other organizations	for section 527	\$0
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 1120	-POL, line 17b ►	¢ 0
4	Did the filing organization file	Form 1120-POL for this year?			Ψ
	organization made payments amount of political contribution	n the filing organization's o a separate political org	funds Also enter the anization, such as a		
	(a) Name	(b) Address	(c) EIN	filing organization's funds If none, enter -	contributions received and promptly and directly delivered to a separate political organization If none,
(1)	Appraisal Institute PAC	Suite 1500	36-3739643		25,565
					+

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa		is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_		an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
			l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c					
f	Lobbying nontaxable amount Enter the amount fo	Complete if the organization is exempt under section 501(c)(3) and filed Form 576 under section 501(h)). If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's nare expenses, and share of excess lobbying expenditures) If the filing organization checked box A and "Ilmited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) In general times to influence public opinion (grass roots lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to influence a legislative body (direct lobbying) In general times to general times to and 1d) In ontaxable amount Enter the amount from the following table in both In the filing times to general times to and 1d) In the filing times to general times to and 1d) In ontaxable amount (enter the amount from the following table in both In the filing times to general times to and 1d) In ontaxable amount (enter 25% of line 1f) In eight from line 1a If zero or less, enter -0- In eight from line 1a If zero or less, enter -0- In eight from line 1a If zero or less, enter -0- In eight from line 1a If zero or less, enter -0- In amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting A-Year Averaging Period Under Section 501(h) Expenditures that made a section 501(h) election do not have to complete all of columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) In on				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	·	•		-		
i	- · ·			-		
_			organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	versaina Period II	Inder Section	F01/b)		
	(Some organizations that made a	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Part II-B	Complete if the o	rganization is exempt under section 501(c)(3) and has NOT	
	filed Form 5768 (election under section 501(h)).	

 -	- No. 1 West was a second of the second of t	(a)	(b)
ror e activ	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	O ther activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1 1		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		Νo

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	10,304,149
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	342,763
b	Carryover from last year	2b	0
c	Total	2c	342,763
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	362,992
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-20,229

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation						
SchC_P1A_S00_L01	Schedule C, Part I-A, Line 1	Administrative costs of the PAC are paid directly by AI						
SchC_P1C_S00_L05		Appraisal Institute PAC (AI PAC) provides a means for designated members, candidates, and affiliates to participate in the political process on a national level. Contributions can be made by individual designated members, candidates, and affiliates of the Appraisal Institute and their families, as well as by Appraisal Institute employees. Contributions from AI PAC support the primary and general election campaign efforts of candidates for the U.S. Congress who support and promote the principles of the appraisal profession. AI PAC does not contribute to political parties, to presidential candidates, or to leadership political action committees.						

DLN: 93493311008373

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Inspection **Employer identification number** Name of the organization APPRAISAL INSTITUTE 36-3739643 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during 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? 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? 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 a certified historic structure 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 Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 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? 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

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.

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

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

- 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

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

Assets included in Form 990, Part X

and section 170(h)(4)(B)(II)?

Part	•••• Organizations Maintaining Co	<u>llections of Art</u>	t, His	<u>stori</u>	<u>cal Tr</u>	<u>easu</u>	res, or O	<u>the</u>	<u>r Similar As</u>	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other recor	ds, cl	heck	any of t	the foll	owing that a	re a	significant use	of its	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams			
b	Scholarly research		e	Г	Othei	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	iin ho	w the	y furthe	er the c	organızatıon	's ex	empt purpose ı	n	
5	During the year, did the organization solicit of	or receive donations	s of a	rt, hıs	torical	treasu	res or other	rsım			
	assets to be sold to raise funds rather than t								<u>.</u>	Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	d "Y	es" to Form 9 ————	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	y for c	ontribu	itions (or other ass	ets r	not J	_ _{Yes}	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	able		_				
							_		Am	ount	
с	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance							1f		_	
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 217	?					ſ	Yes	□ No
_ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pa	rt V Endowment Funds. Complete	f the organizatio (a)Current year		swer)Prior					t IV, line 10. Three years back	(a)Four v	oars back
1a	Beginning of year balance	(a)Curient year	(D	PHOL	усаі	D (C)	wo years back	(u)	Tillee years back	(e)i oui y	ears back
b	Contributions										
c	Net investment earnings, gains, and losses										
								<u> </u>			
d	Grants or scholarships							 			
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	ent year end balan	ce (lır	ne 1g	, colum	n (a)) l	held as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment ►										
c	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are held	d and a	dmınıstered	d for	the	Yes	No
	(i) unrelated organizations								3a(
	(ii) related organizations								3a(i		
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the							•	3b	<u> </u>	
4 Par	t VI Land, Buildings, and Equipme					10					
T G I	Description of property	inc. See roim 33	,0,10	(a) Cost or	other	(b)Cost or o		(c) Accumulated	(d) Bo	ook value
				bas	is (inves	tment)	basıs (othe	r)	depreciation		
1a	Land					0		0			0
Ь	Buildings					0		0		0	0
c	Leasehold improvements					0	1,583	,171	140,67	2	1,442,499
d I	Equipment					0	965	,641	384,75	5	580,886
	Other	<u> </u>				0	3,3.3		3,051,02	7	292,207
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	umn (B), line	10(c).)					2,315,592

Part VIII Investm	n ents—Other Securities. See l	<u>Form 990, Part X, line 12</u>	2.	
(a) Descript	ion of security or category	(b)Book value	(c) Metho	od of valuation
(ınclud	ing name of security)		Cost or end-o	f-year market value
)Fınancıal derivative	s			
)Closely-held equity	interests			
ther				
tal. (Column (b) must ed	qual Form 990, Part X, col (B) line 12) 🕒 🕨			
art VIIII Investr	nents—Program Related. See	Form 990, Part X, line	13.	
	ption of investment type	(b) Book value	(c) Metho	od of valuation
			Cost or end-o	f-year market value
			<u> </u>	
otal. (Column (b) must ed	qual Form 990, Part X, col (B) line 13)			
art IX Other A	ssets. See Form 990, Part X, lın	e 15.		
<u> </u>	(a) Descrip			(b) Book value
	t equal Form 990, Part X, col.(B) line 15.			
	- L'IIII C F 000 D - 1 V	. line 25.		
Part X Other Li	abilities. See Form 990, Part X			
Part X Other Li	Description of liability	(b) Book value		
Part X Other Li (a)		(b) Book value		
Part X Other Li (a)		(b) Book value		
Other Li (a) deral income taxes 7 b Plan Liability	Description of liability	(b) Book value 0 106,587		
Other Li (a) deral income taxes 7 b Plan Liability	Description of liability	(b) Book value		
Part X Other Li (a) deral income taxes 70 Plan Liability apital Lease Obligation	Description of liability	(b) Book value 0 106,587		
ederal income taxes To Plan Liability apital Lease Obligation	Description of liability ons	(b) Book value 0 106,587 81,015 761,754		
deral income taxes To Plan Liability Apital Lease Obligation eferred Rent Credit	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
Part X Other Li	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A eferred Dues - Chapt	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A eferred Dues - Chapt	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
ederal income taxes To Plan Liability Applial Lease Obligation Eferred Rent Credit Enant Improvement A	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		
ederal income taxes To Plan Liability apital Lease Obligation eferred Rent Credit enant Improvement A eferred Dues - Chapt ue to Others	ons	(b) Book value 0 106,587 81,015 761,754 1,416,718 816,260		

A mounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
a Net unrealized gains on investments 2a 41,878 b Donated services and use of facilities 2b 0 c Recoveries of prior year grants 2c 0 d Other (Describe in Part XIII) 2d 0 a Add lines 2a through 2d 2e 41,878 3 Subtract line 2e from line 1 3 19,203,421 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 10,000 b Other (Describe in Part XIII) 4d 10,000 b Other (Describe in Part XIII) 4c 10,000 c Add lines 4a and 4b 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements 4c 10,000 c Amounts included on line 1 but not on Form 990, Part IX, line 25 5 18,012,530 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 0 b Prior year adjustments 2a 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0 b Prior year adjustments 2e 0 c Other losses 2c 0 d Other (Describe in Part XIII) <th< td=""><th>1</th><td>Total revenue, gains, and other support per audited financial statements</td><td>1</td><td>19,245,299</td></th<>	1	Total revenue, gains, and other support per audited financial statements	1	19,245,299
b Donated services and use of facilities 2b 0 c Recoveries of prior year grants 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 2e 41,878 3 Subtract line 2e from line 1 3 19,203,421 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 4c 10,000 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part IX, line 25 1 18,012,530 a Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 0 a Donated services and use of facilities 2b 0 b Prior year adjustments 2c 0 c Other (Describe in Part XIII)	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
c Recoveries of prior year grants 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 2e 41,878 3 Subtract line 2e from line 1 3 19,203,421 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 3 19,203,421 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 4c 10,000 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part IX, line 25 1 18,012,530 a Donated expenses and losses per audited financial Statements With Expenses per Return 1 18,012,530 b Prior year adjustments 2a 0 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0	а	Net unrealized gains on investments		
d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d .	b	Donated services and use of facilities		
e Add lines 2a through 2d 2e 41,8788 3 Subtract line 2e from line 1 3 19,203,421 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 18,012,530 a Donated services and use of facilities 2a 0 b Prior year adjustments 2b 0 c Other (Describe in Part XIII) 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 0 2e 0 3 Subtract line 2e from line 1 4a 10,000 10,000 b Other (Describe in Part XIII) 4a 10,000 10,000 d Add lines 4a and 4b 0 4a 10,000	С	Recoveries of prior year grants		
Subtract line 2e from line 1	d	Other (Describe in Part XIII)		
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 .	e	Add lines 2a through 2d	2e	41,878
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 4c 10,000 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 18,012,530 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 0 a Donated services and use of facilities 2a 0 b Prior year adjustments 2b 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 2e 0 3 3 18,012,530 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 3 18,012,530 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,000 b Other (Describe in Part XIII) <td< td=""><th>3</th><td>Subtract line 2e from line 1</td><td>3</td><td>19,203,421</td></td<>	3	Subtract line 2e from line 1	3	19,203,421
b Other (Describe in Part XIII)	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
Add lines 4a and 4b 4c 10,000 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 19,213,421 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 1 18,012,530 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a 0 b Prior year adjustments 2b 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0 a Add lines 2a through 2d 2e 0 3 Subtract line 2e from line 1 3 18,012,530 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a 10,000 4 Donated services and use of facilities 2e 0 2e 0 4 Add lines 2a through 2d 2e 0 3 Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: 4a 10,000 b Other (Describe in Part XIII) 4b <t< td=""><th>а</th><td>Investment expenses not included on Form 990, Part VIII, line 7b . 4a 10,000</td><td></td><td></td></t<>	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 10,000		
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	b	Other (Describe in Part XIII)		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements	С	Add lines 4a and 4b	4c	10,000
Total expenses and losses per audited financial statements	5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	19,213,421
Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities	Part :	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
a Donated services and use of facilities 2a 0 b Prior year adjustments 2b 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 2e 0 3 Subtract line 2e from line 1 3 18,012,530 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 3 10,000 b Other (Describe in Part XIII) 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 4c 10,000	1	Total expenses and losses per audited financial statements	1	18,012,530
b Prior year adjustments 2b 0 c Other losses 2c 0 d Other (Describe in Part XIII) 2d 0 e Add lines 2a through 2d 2e 0 3 Subtract line 2e from line 1 3 18,012,530 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a 10,000 b Other (Describe in Part XIII) 4b 0 c Add lines 4a and 4b 4c 10,000	2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
c Other losses	а	Donated services and use of facilities		
d Other (Describe in Part XIII)	b	Prior year adjustments		
e Add lines 2a through 2d	C	Other losses		
3 Subtract line 2e from line 1	d	Other (Describe in Part XIII) 2d 0		
A mounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,000 b Other (Describe in Part XIII)	e	Add lines 2a through 2d	2e	0
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a 10,000 b Other (Describe in Part XIII) .	3	Subtract line 2e from line 1	3	18,012,530
b Other (Describe in Part XIII)	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,000		
	b	Other (Describe in Part XIII)		
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	С	Add lines 4a and 4b	4c	10,000
	5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	18,022,530

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The Appraisal Institute (AI) is a tax-exempt organization under Section 501(c)(6) of the Internal Revenue Code and, except for taxes pertaining to unrelated business income, is exempt from federal and state income taxes. No provision has been made for income taxes as AI had no material unrelated business income AI Holdings is a for-profit subsidiary of AI, which did not have taxable income in 2012 or 2011. Therefore, no income taxes have been recorded. Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by AI and recognize a tax liability if AI has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS or other applicable taxing authorities. Management has analyzed the tax positions taken by AI, and has concluded that as of December 31, 2012 and 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the consolidated financial statements. AI is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. Management believes it is no longer subject to income tax examinations for years prior to 2009.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493311008373

OMB No 1545-0047

SCHEDULE F (Form 990)

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

> Open to Public **Inspection**

Department of the Treasury

APPRAISAL INSTITUTE

▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Internal Revenue Service Name of the organization

Employer identification number

36-3739643

Pa	rt I General Informatio "Yes" to Form 990, Pa			ne United States. C	omplete if the organiza	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization m gibility for the (aıntaın record grants or assıs	stance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fui	nds outside
3	Activites per Region (The follow	ving Part I, line 3	B table can be du	uplicated if additional sp	ace is needed)	
	(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 in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	East Asia and the Pacific	0		Program Services	Education & Admission	211,761
3a	Sub-total					
b	Total from continuation sheets to Part I					
•	: Totals (add lines 3a and 3b)	0	0	1	1	211,761

Part I	Grants Part IV,	and Other As line 15, for any	sistance to Organ y recipient who rece	izations or Entiti Ived more than \$5,	es Outside the Ur 000. Part II can be	nited States. Comp duplicated if addition	olete if the organizational space is needed	tion answered "Yes' l.	' to Form 990,
	Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
_									
_									
_									
_									
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_									
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_									
_									
_									
_									
_									
2 Er ta	iter total nu x-exempt b	mber of recipie y the IRS, or fo	ent organizations list or which the grantee	ed above that are in or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as 	
3 Er	nter total nu	mber of other	organizations or ent	cities					
								Schedule F	(Form 990) 2012

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
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)	Г	Υ	'es	<u> </u>	Νo
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).	Γ	Υ	'es	<u> </u>	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).

as applicable. Also	o complete this part to provide any	y additional information (see instructions).
Identifier	ReturnReference	Explanation
SchF_P01_S00_L03	Schedule F, Part I, Line 3	To achieve global uniformity in professional standards and ethical practices, Appraisal Institute offers continuing education and designation programs outside the United States Expenditures are recorded using the accrual method and in U S Dollars All expenses are recognized as incurred by the program
	•	Schedule F (Form 990) 2012

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

OMB No 1545-0047

Open to Public

DLN: 93493311008373

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Name of the org							Employer identificati	on number
APPRAISAL	INSTITUTE						36-3739643	
Part I	General Informatio	n on Grants and	l Assistance				•	
the sele 2 Describ	he organization maintain i ection criteria used to aw be in Part IV the organiza	ard the grants or as: ition's procedures fo	sistance [?] r monitoring the use o	f grant funds in the Unite	ed States			✓ Yes
	Grants and Other A s Form 990, Part IV, line							es" to
org	e and address of anization overnment	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	
	otal number of section 50 otal number of other orga						-	
	Reduction Act Notice see				Cat No. 50055P			le I (Form 990) 2012

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

(a)Type of grant or assis	stance	(b) Number of recipients		(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) The Appraisal Journal Awa Articles	rd for Best	3		7,000	C) Cash	N/A
(2) Scholarships-AI Courses- Students	Enrolled	7	1	3,375	C) Cash	N/A
Part IV Supplementa	al Informati	on.	<u> </u>			L	ı
Complete this part to provide th			ne 2, Par	t III, column (b), and	d any other additional in	formation	
Tdentifier De	turn Deference		Evnlanat	ion			

Complete this part to provide the information required in Part 1, line 2, Part 111, column (b), and any other additional information							
Identifier	Return Reference	Explanation					
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Scholarships are awarded to eligible students upon the successful enrollment into Appraisal Institute courses					

Schedule I (Form 990) 2012

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DLN: 93493311008373

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization APPRAISAL INSTITUTE

Employer identification number

36-3739643

Pa	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		103	
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	ٿ		
_	section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	` '	(E) Total of columns	` '
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)FREDERICK H GRUBBE CEO/BOD Secretary	(i) (ii)	305,159 0	19,000 0	17,000 0	12,500 0	16,640 0	370,299 0	0
(2)JEFFREY E LISKAR General Counsel	(i) (ii)	240,431 0	11,484 0	10,000 0	11,576 0	16,775 0	290,266 0	0
(3)WILLIAM T ZIMMERMANN CFO	(i) (ii)	231,409 0	15,524 0	11,241 0	11,241 0	945 0	270,360 0	0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any additional information			
Identifier	Return Reference	Explanation	
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	Travel and Expense Policy 3 05 - Executive Committee Spouse - In accordance with IRS guidelines, spouse expenses for travel, meals and lodging are generally not reimbursable by the Appraisal Institute Exceptions include instances where there is a real business purpose, in conformance with Appraisal Institute guidelines, for the presence of a spouse at an Appraisal Institute function or meeting, or at an approved function or meeting that the Appraisal Institute participates. The elected officers and CEO of the Appraisal Institute may travel with their spouses to meetings of the Board of Directors, Regional Meetings of the Appraisal Institute, and other meetings. The Appraisal Institute will reimburse ordinary and necessary expenses in accordance with established policy. Officers may elect to cover the cost of spouse travel to meetings with funds from the Officer's pooled travel budget. Spousal travel reimbursements are typically treated as taxable income to the Officers and Directors in accordance with IRS rules.	
SchJ_P01_S00_L03	Schedule J, Part I, Line 3	Compensation for all employees is determined by the guidelines contained in the Institute's wage and salary program. This program was developed by outside HR consultants in conjunction with a consulting firm. The program includes the establishment of position grades and salary ranges for all Appraisal Institute positions (including the CEO and other positions). Position grades and salary ranges are based on the market rates of organizations of similar size and budget. The CEO approves all staff salaries. The same evaluation form is used for the CEO as well as the rest of the staff. The Past President of the organization is responsible for completing the CEO's evaluation and can solicit input from the other officers. The Executive Committee approves changes to the CEO's compensation package.	

Schedule J (Form 990) 2012

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DLN: 93493311008373

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization APPRAISAL INSTITUTE	Employer identifi	cation number
	36-3739643	

ldentifier	Return Reference	Explanation
F990_P03_S00_L00a	Form 990, Part III (Cont 1)	The Appraisal Institute is an Illinois not for profit corporation organized under the Illinois General Not For Profit Corporation Act of 1986, as amended, (the "Act") for general education, research and professional association purposes relating to appraisal services. The objectives of the Appraisal Institute are to serve the general public, to establish, maintain and publicize minimum requirements for designated membership and confer appropriate membership designations to properly qualified appraisers, to formulate and maintain a Code of Professional Ethics and Standards of Professional Appraisal Practice for the real estate appraisal profession and enforce that Code and Standards on and for Members, Candidates, Practicing Affiliates and Affiliates of the Appraisal Institute, to identify the body of knowledge in which the appraisal profession operates, to establish, maintain and publicize educational standards and the means for education for its Members, Candidates, Practicing Affiliates, Affiliates and others interested in the appraisal and real estate professions, to promote research and publication of materials that further the education and professional needs of the appraisal and real estate professions, to establish and maintain effective liaison with governmental agencies concerned with appraising and represent itself in legislative and regulatory matters concerning the appraisal and real estate professions, to provide and maintain an effective and responsive organization and staff that serves the needs of Members, Candidates, Practicing Affiliates and Affiliates, to conduct meetings, conferences, seminars, educational courses and other activities that further the objectives of the Appraisal Institute, and to cooperate with other organizations on issues of mutual concern such as legislative and regulatory matters, education and research activities

ldentifier	Return Reference	Explanation
F990_P06_S0A_L04	Form 990, Part VI, Section A, Line 4	The Appraisal Institute modified the Bylaw's to include the Candidate for Designation program

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06		The Appraisal Institute shall have two (2) categories of Members Designated Members and Honorary Members A Designated Member is an individual who holds an Appraisal Institute designation. An Honorary Member is an individual who, in the opinion of the Board of Directors, has made a significant contribution to the appraisal profession.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Board of Directors shall consist of 1) the officers of the Appraisal Institute, 2) the Chair and Vice Chair of each Regional Committee, 3) one International Designated Member in good standing elected by the Board of Directors, 4) any member of the Audit Committee who is not serving on the Board by virtue of holding the position of Chair or Vice Chair of a Regional Committee, and 5) the Chief Executive Officer of the Appraisal Institute. The Regional Committee, consisting of eligible Designated Members and/or Candidates, shall hold elections for all Regional positions, including the Third Regional Director, at a regular meeting the first of each year. A Regional Director shall serve in the following positions during his or her term. 1) in the first year of his or her term, the Regional Director shall serve as the Third Regional Director, 2) in the second and third years of his or her term, the Regional Director shall serve as Vice Chair of the Region and a national Director from the Region, and 3) in the fourth and fifth years of his or her term, the Regional Director from the Region.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07b	Form 990, Part VI, Section A, Line 7b	Designated Members in good standing, except Temporarily Non-Practicing Members, shall be entitled to vote on (a) the disposition of all or substantially all of the assets of the Appraisal Institute, (b) any merger or consolidation and the substantial terms, and any substantial amendment of the terms, of any such transaction, (c) any dissolution of the Appraisal Institute, and (d) any amendment, restatement or repeal of the Articles of Incorporation, with all such votes requiring a sixty percent (60%) majority of those Designated Members in good standing present and voting for approval Designated Members in good standing, except Temporarily Non-Practicing Members, shall have one (1) vote and shall be entitled to attend membership meetings and vote by proxy

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b		Once a draft of the 990 has been completed, the 990 is distributed to all Audit Committee and Board of Director Members of the organization via a secure website. The Board Members are then able to review the 990 draft and respond with questions, concerns or comments. At the end of the review period, including any time needed to address questions and comments, the 990 is finalized and filed with the IRS. Prior to finalizing the 990, it is reviewed by outside accountants.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c		In January of each year, all members of the Board of Directors are required to read and sign the Board of Directors Certification and Disclosure Statement. This statement requires that each Board member certifies that they "are not aware of any matter in which I am personally involved that may present an actual or potential conflict of interest." If any potential or actual conflict of interest arises during their term, they agree to immediately disclose the conflict and if appropriate remove themselves from discussion, vote and/or further service. Members of the Board of Directors agree and understand that they may be subject to evaluation and self-assessment at any time.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	Compensation for all employees is determined by the guidelines contained in the Institute's wage and salary program. This program was developed by outside HR consultants in conjunction with a consulting firm. The program includes the establishment of position grades and salary ranges for all Appraisal Institute positions (including the CEO and other positions). Position grades and salary ranges are based on the market rates of organizations of similar size and budget. The CEO approves all salaries. The same evaluation form is used for the CEO as well as the rest of the staff. Also, all staff must complete a self-evaluation. The Past President of the organization is responsible for completing the CEO's evaluation and can solicit input from the other Officers.

ldentifier	Return Reference	Explanation
		Appraisal Institute Bylaws are available to the public on our website at www appraisalinstitute org The Conflict of Interest Policy is available upon request to the Appraisal Institute's Executive Department and the financial statements are available upon request to the Appraisal Institute's Finance Department

DLN: 93493311008373

OMB No 1545-0047

2012

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SCHEDULE R (Form 990)

Name of the organization APPRAISAL INSTITUTE

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number

36-3739643

Part I Identification of Disregarded Entities (Comple	te ıf the organızatıon	answered "Yes" to	Form 990, Par	t IV, line 33.)				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	[(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	e tax year.)	<u>-</u>			Part IV,			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	n Public charity (if section 501		(f) Direct controlling entity	Section (13) contact en	ontrolle tity?
(1) Appraisal Institute Education Trust	Grants to Eligible	IL	501(c)(3)	509(a)(3)			Yes	No No
200 W Madison Street Suite 1500 Chicago, IL 60606 36-6076334	Individuals					N/A		
(2) Appraisal Institute Relief Foundation	Grants to Eligible Individuals	IL	501(c)(3)	509(a)(1)				No
200 W Madison Street Suite 1500 Chicago, IL 60606 20-3950855						N/A		
(3) Appraisal Institute Political Action Committee 200 W Madison Street Suite 1500 Chicago, IL 60606	Political Action Committee	IL	527			N/A		No

		/h)	101	(d)	(~)	765	(a)	/L	• • • • • • • • • • • • • • • • • • • •	/:>		/:	, I	/1/1
(a) Name, address, and EIN related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direct controlling entity	(e) Predomir income(rel unrelate excluded tax und sections 5 514)	ated, total incomed, from er	(g) Share of e end-of-year assets	(h Disprop alloca	prtionate	(i) e Code V- amount II 20 o Schedule (Form 1	-UBI n box f e K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
Part IV Identification of Related O line 34 because it had one or (a) Name, address, and EIN of related organization			s a cor) al cıle foreign	poration (ring the tax y		ıl Sha	(g) are of erof-year assets	nd- Po	(h) ercenta	age ·	Se	(i) ection 512 (b)(13) ontrolled entity?
			,	l									_	es No
(1) Appraisers Liability Ins														
Program	Insurance Administration			N/	A	С		0	2,:	157 1	00 %			
Program 200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085	Insurance Administration	П	-	N/	A	С		0	2,	157 1	00 %			
200 W Madison Street Suite 1500 Chicago, IL 60606	Insurance Administration Holding Company	II	-	N/		С		0	2,:		00 %			
200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085 (2) Appraisal Institute		II DI				С			2,:					
200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085 (2) Appraisal Institute Holdings Inc 200 W Madison Street Suite 1500 Chicago, IL 60606						С			2,:					
200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085 (2) Appraisal Institute Holdings Inc 200 W Madison Street Suite 1500 Chicago, IL 60606						С			2,:					
200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085 (2) Appraisal Institute Holdings Inc 200 W Madison Street Suite 1500 Chicago, IL 60606						С			2,:					
200 W Madison Street Suite 1500 Chicago, IL 60606 36-3633085 (2) Appraisal Institute Holdings Inc 200 W Madison Street Suite 1500 Chicago, IL 60606						С			2,					

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

Yes

1 During the tax year, did the orgr	anization engage in any of the following transactions with one or more	related organızatıons lı	sted in Parts II-IV?				
a Receipt of (i) interest (ii) and	nuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes	
b Gift, grant, or capital contribu	ition to related organization(s)				1b		No
c Gift, grant, or capital contribu	tion from related organization(s)				1c	Yes	
d Loans or loan guarantees to d	or for related organization(s)				1d		No
e Loans or loan guarantees by	related organization(s)				1e		No
f Dividends from related organ	zation(s)				1f		No
g Sale of assets to related orga	ınızatıon(s)				1 g		No
h Purchase of assets from relat	:ed organization(s)				1h		No
i Exchange of assets with relat	ed organization(s)				1 i		No
j Lease of facilities, equipment	, or other assets to related organization(s)				1j		No
$oldsymbol{k}$ Lease of facilities, equipment	r, or other assets from related organization(s)				1k		No
l Performance of services or me	embership or fundraising solicitations for related organization(s)				11	Yes	
m Performance of services or me	embership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipmen	it, mailing lists, or other assets with related organization(s)				1n	Yes	
• Sharing of paid employees wi	th related organization(s)				10		No
p Reimbursement paid to relate	d organization(s) for expenses				1р		No
q Reimbursement paid by relate	ed organization(s) for expenses				1q	Yes	
						V	
r Other transfer of cash or prop	·				1r	Yes	No
s Other transfer of cash or prop	perty from related organization(s)				1s		NO
2 If the answer to any of the abo	ove is "Yes," see the instructions for information on who must complet	te this line, including co	overed relationships	and transaction thresholds			
Na	(a) ime of other organization	(b) Transaction	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved	
4) Annual control of the Control of		type (a-s)	226 020				
1) Appraisers Liability Ins Program		а-ш	226,928				
2) Appraisal Institute Education Trust		С	72,000				

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: 12000197

Software Version: v1.00

EIN: 36-3739643

Name: APPRAISAL INSTITUTE

TY 2012 Affiliate Listing

Name: APPRAISAL INSTITUTE

EIN: 36-3739643

Software ID: 12000197

Software Version: v1.00

TY 2012 Affiliate Listing

Name	Address	EIN	Name control			
Appraisal Institute Region I	200 W Madison Street Suite 1500 Chicago, IL 60606	93-1085131	APPR			
Appraisal Institute Region II	200 W Madison Street Suite 1500 Chicago, IL 60606	Suite 1500				
Appraisal Institute Region III	200 W Madison Street Suite 1500 Chicago, IL 60606	APPR				
Appraisal Institute Region IV	200 W Madison Street Suite 1500 Chicago, IL 60606	uite 1500				
Appraisal Institute Region V	200 W Madison Street Suite 1500 Chicago, IL 60606	35-1844185	APPR			
Appraisal Institute Region VI	200 W Madison Street Suite 1500 Chicago, IL 60606	36-3967949	APPR			
Appraisal Institute Region VII	200 W Madison Street Suite 1500 Chicago, IL 60606	99-0294918	APPR			
Appraisal Institute Region VIII	200 W Madison Street Suite 1500 Chicago, IL 60606	76-0370518	APPR			
Appraisal Institute Region IX	200 W Madison Street Suite 1500 Chicago, IL 60606	58-1409476	APPR			
Appraisal Institute Region X	200 W Madison Street Suite 1500 Chicago, IL 60606	65-0335543	APPR			