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Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Inspection

Do not enter Social Security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public

A For the 2013 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable FOUNDATION OF THE AMERICAN INSTITUTE FOR Address change CONSERV. OF HISTORIC & ARTISTIC WORKS Name change 23-7424418 Doing Business As initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Termin-320 202-452-9545 1156 15TH STREET, NW Amende return 1386737. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica-WASHINGTON, DC 20005 H(a) Is this a group return pending F Name and address of principal officer ERYL WENTWORTH Yes X No for subordinates? SAME AS C ABOVE Yes H(b) Are all subordinates included? Tax-exempt status:  $\mathbf{X}$  501(c)(3)  $\mathbf{\Box}$  501(c) ( ) ◀ (insert no ) 4947(a)(1) or If "No." attach a list, (see instructions) J Website: ► WWW.CONSERVATION-US.ORG **H(c)** Group exemption number ▶ K Form of organization X Corporation Trust Association Other > L Year of formation 1973 M State of legal domicile DC Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b SCANNED NOV 21 2014 **Prior Year Current Year** 700432. Contributions and grants (Part VIII, line 1h) 630883 63757. Program service revenue (Part VIII, line 29) 54378. 218288. 409846. Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
Total revenue · add lines 8 through 11 (must equal Part VIII, column (A 698. 904247. 1174035. 367991. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 673239. Benefits paid to or for members (Part IX) column (A) mean UT 0. 0. 272471. 261167. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Ö. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 17208. **b** Total fundraising expenses (Part IX, column (D), line 25) 901365 779694. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1541827. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1714100. -637580. -540065. 19 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year End of Year** 6767240. 6383667. 20 Total assets (Part X, line 16) 320545. 283813. 21 Total liabilities (Part X, line 26) Ege Ege 6446695. 6099854 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign ERYL WENTWORTH, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name 10-26-14 ROBERT J. COCCHIARO P01203311 Paid self-employed Firm's name COCCHIARO & ASSOCIATES, 20-4534812 Preparer Firm's EIN Firm's address 211 NORTH UNION STREET, SUITE Use Only Phone no 703-519-1226 ALEXANDRIA, VA 22314 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

	· FOUNDATION OF THE AMERICAN INSTITUTE FOR	
Form	1990 (2013) CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Page	де <b>2</b>
-Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO UNDERTAKE AND UNDERWRITE PROGRAMS AND INITIATIVES TO ADVANCE THE	
	CONSERVATION PROFESSION IN ALL ITS FACETS, TO SUPPORT CONSERVATION	
	EDUCATION AND CAREER DEVELOPMENT, AND TO APPLY THE EXPERTISE OF THE	
	PROFESSION IN ADDRESSING THE NATION'S ARTISTIC, CULTURAL, AND HISTORIC	<u>;</u>
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
4	revenue, if any, for each program service reported  (Code ) (Expenses \$ 1479926 • Including grants of \$ 661845 • ) (Revenue \$ 63757	<del>, ,</del>
4a	(Code) (Expenses \$ 1479926. Including grants of \$ 661845.) (Revenue \$ 63757) PROFESSIONAL DEVELOPMENT AND EDUCATION: THE FOUNDATION OF THE AMERICA	_ ′
	INSTITUTE FOR CONSERVATION RECEIVES GRANTS FROM A VARIETY OF FEDERAL	TTA
	AGENCIES AND PRIVATE FOUNDATIONS. NATIONAL ENDOWMENT FOR THE	
	HUMANITIES (NEH) GRANTS SUPPORT PROFESSIONAL DEVELOPMENT WORKSHOPS AND	<u> </u>
	SCHOLARSHIPS. GETTY FOUNDATION GRANTS SUPPORT DISTANCE LEARNING COURSE	
	AND, PERIODICALLY, A LATIN AMERICAN SCHOLARSHIP PROGRAM, IN ADDITION T	
	STRATEGIC PLANNING. INSTITUTE FOR MUSEUM AND LIBRARY SERVICES (IMLS)	<u> </u>
	GRANTS HAVE SUPPORTED TRAINING AND OUTREACH IN EMERGENCY PREPAREDNESS	
	AND RESPONSE. SAMUEL H. KRESS FOUNDATION GRANTS HAVE SUPPORTED AIC	
	EMERGENCY RESPONSE EFFORTS, PRINTING OF BOOKS, AN ONGOING PUBLICATIONS	;
	GRANT TO SUPPORT COMPLETION OF MANUSCRIPTS, AND INTERNATIONAL TRAVEL	
	COSTS FOR CONFERENCE SPEAKERS. A KRESS GRANT SUPPORTS A CONSERVATION	
4b	(Code) (Expenses \$23263 • including grants of \$10000 • ) (Revenue \$	
	PUBLICATIONS - FAIC MAINTAINS AN ONLINE RESOURCE LIBRARY AND	<u> </u>
	INTERNATIONAL DISTRIBUTION LIST FOR CONSERVATION AND PRESERVATION,	
	CONSERVATION ONLINE (COOL) AND ITS CONSERVATION DISTLIST.	
4c	(Code) (Expenses \$	
40	(Code) (Expenses \$ 89087. including grants of \$1394. ) (Revenue \$	— <sup>)</sup>
	OTHER TROOTER RELIVITIES	
4d	Other program services (Describe in Schedule O)	

including grants of \$ 1592276.

Form **990** (2013)

4e Total program service expenses ▶

	990 (2013) CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424	418	P	age 3
Pai	t IV Checklist of Required Schedules		·	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<b>_</b>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			١,,
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			,,
_	Schedule D, Part III	8	ļ	X
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?	_		
40	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	_ ا	v	
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	44.		Х
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	ļ	
Ü	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d		110		
•	Part X, line 16° If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	:
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a

20b

Form 990 (2013) Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,		ĺ	
	column (A), line 2 <sup>7</sup> If "Yes," complete Schedule I, Parts I and III	22	Х	
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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		ļ	
	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 25a	24a	_	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	<u></u>	<u></u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
þ	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		1	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		1	
	complete Schedule L, Part II	26		X
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	İ	Ì	
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	, , , , , , , , , , , , , , , , , , , ,	1		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			ļ
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			8
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		
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	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1_		1,7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	990	(0010
		FORM	14 MI I	フロナマ

CONSERV. OF HISTORIC & ARTISTIC WORKS

-Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ļ.,,	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country	-		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	ļ <u></u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor			<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7-		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	l	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	·   · · · · · ·		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them )	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
Ь	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  13b	$\dashv$		
	Enter the amount of reserves on hand  Did the expectation receive any payments for indeed to place the tay year?	-	$\vdash \vdash \vdash$	~
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes" has it filed a Form 720 to report these payments? If "No " provide an explanation in Schooling O.	14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	ممو	(2013)
		FUIL	. 330	(2013)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

_	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year   1a 9										
	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  1b										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, or trustees, or key employees to a management company or other person?	_3_		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5		X							
6	Did the organization have members or stockholders?	6	Х								
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a	X								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		_								
	persons other than the governing body?	7b	X								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following										
а	, , , , , , , , , , , , , , , , , , ,	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
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		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
	Did the organization have local chapters, branches, or affiliates?	10a		X							
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?										
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X							
	b 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	12a	X								
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v								
13	In Schedule O how this was done	12c	X								
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	13	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	Λ								
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
	Other officers or key employees of the organization	15b		X							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		- 42							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
_	taxable entity during the year?	16a	•	Х							
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100									
-	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure	100									
17	List the states with which a copy of this Form 990 is required to be filed ▶DC										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	availab	le								
	for public inspection. Indicate how you made these available Check all that apply.										
	Own website Another's website X 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	d finan	cıal								
	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	tion.									
	THE ORGANIZATION - 202-452-9545										
	1156 15TH STREET, NW, NO. 320, WASHINGTON, DC 20005										
2200	3 10.29.13	Form	990	20131							

## CONSERV. OF HISTORIC & ARTISTIC WORKS

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Name and Title	Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	rs for ated atsolved at a strong at a stro		Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERYL WENTWORTH	25.00 25.00	X		X				53114.	64917.	14177
EXECUTIVE DIRECTOR/SECRETA (2) PAMELA HATCHFIELD	1.00	Λ	┢	A		<del> </del>	-	33114.	04317.	141//
PRESIDENT	1.00	X		Х		l		0.	0.	0
(3) MARGARET HOLBEN ELLIS	1.00	1		71				•		U
/ICE PRESIDENT	1.00	X		Х				0.	0.	0
(4) JENNIFER HAIN TEPER	1.00		<u> </u>							
TREASURER		X		Х				0.	0.	0
(5) MAX ANDERSON (TO MAY 2013)	1.00						<b></b>		<del> </del>	
DIRECTOR		X						0.	0.	0
(6) INGRID BOGEL	1.00									
DIRECTOR		X						0.	0.	0
(7) JEANNE DREWES	1.00									_
DIRECTOR		X						0.	0.	0
(8) JULIE HEATH	1.00									
DIRECTOR		Х			L	<u> </u>		0.	0.	0
(9) MICHAEL MOHAMAD	1.00	ļ							_	
DIRECTOR	1 00	X						0.	0.	0
(10) PETER TRIPPI	1.00								0	0
DIRECTOR	1 00	X			_	_		0.	0.	0
(11) MEG LOWE CRAFT (TO MAY 2013)	1.00	х		х				0.	0.	0
PRESIDENT				A				0.	0.	U
		_			_					
		<u> </u>							·	

Form 990 (2013)

									INSTITUTE FO				
									STIC WORKS	23-7424	418	<u> </u>	age (
Part	VII Section A. Officers, Directors, Trus		ploy	ees/			ighe	st (		es (continued)			
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average	(do	not c	Pos heck		l than	one	Reportable	Reportable	1 -	stımat	-
		hours per week					is bot or/trus		· '	compensation	a	mount	
		(list any	-	T				T ,	from the	from related	l	othe	
		hours for	director				-			organizations (W-2/1099-MISC)		npens rom th	
		related	8	trustee			Isate		(W-2/1099-MISC)	(44-2/1099-14160)		ganiza	
		organizations	trustee	Ĕ		8	mper		(11 12 1000 111100)		1 .	id rela	
		below	dual	Insttutonal	<u></u>	e e	S SC	5				anızat	
		line)	Individual	lus#	E SE	Key employee	Highest compensated employee	튎					
						_				•			
			·	$\vdash$									
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			1										
								Г					
										·			
			1		ĺ								
				L.	<u> </u>								
1b	Sub-total							▶	53114.	64917.		141	77.
C	Total from continuation sheets to Part VI	I, Section A						▶	0.	0.			0.
<u>d</u>	Total (add lines 1b and 1c)							<b></b>	53114.	64917.		141	77.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wł	no r	eceived more than \$100	,000 of reportable			
	compensation from the organization	·											(
												Yes	No
3	Did the organization list any <b>former</b> officer,	director, or tru	uste	e, ke	y en	nplo	yee,	or	highest compensated e	mployee on			
I	ine 1a <sup>9</sup> If "Yes," complete Schedule J for s	uch individual								ı	3	<u> </u>	X
4	For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	ation	and	d ot	her compensation from	the organization			
;	and related organizations greater than \$150	0,000 <i>? If "Yes</i> ,	" co	mple	ete S	Sche	edule	∍ J i	for such individual		4		X
5	Did any person listed on line 1a receive or a	accrue comper	nsati	ion f	rom	any	unr	elat	ted organization or indivi	dual for services	•		
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or st	ıch į	oers	on				5		X
	on B. Independent Contractors										***		
	Complete this table for your five highest co									·	ation	from	
1	the organization Report compensation for	the calendar y	ear e	endi	ng w	/ith «	or w	<u>ithir</u>	n the organization's tax	/ear.			
	(A)	oddrono							(B)			C)	
M 1 1	Name and business							$\dashv$	Description of s		Compe	nsatio	on 
	0, INC BROOKS STREET, BOSTON	מא די	111	25				- 1	PROJECT MANA	GEMENT	1	240	
103	BROOKS STREET, BOSTOL	V, MA UZ	213	33				-	CONSULTING	<u>-</u>		349	44.
								ŀ					
	<del></del>							-	<del>-</del>				
										-			
								$\dashv$					
								_					
2	Total number of independent contractors (i	ncluding but n	ot lir	mite	d to	thos	se lis	stec	d above) who received m	ore than			

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Page 9

·		Check if Schedule O conf	tains a response	or note to any lin	e in this Part VIII			
-					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
	c	Fundraising events	1c					
		Related organizations	1d					
s, C		Government grants (contribut		68616.				
Ö	f		•					
the the		similar amounts not included abo	1 1	631816.				
ĒÓ	a	Noncash contributions included in lines						
a Co	-	Total. Add lines 1a-1f		•	700432.			
				Business Code		·		
ဗွ	2 a	WORKSHOPS		900099	63757.	63757.		
ē Ž	b	·						
Program Service Revenue	С							
ev ev	d	l						
90 T	е							
۵	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<b>•</b>	63757.			
	3	Investment income (including	ı dıvidends, intere	est, and				
		other similar amounts)		▶	47488.			47488.
	4	Income from investment of ta	x-exempt bond p	roceeds 🕨	, <u>.</u>			
	5	Royalties		<u> </u>			nn -	
			(i) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
		Rental income or (loss)		L		•		
	d	Net rental income or (loss)		, <u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	575060.					
	b	Less cost or other basis	010700					
		and sales expenses	212702.			-		
	С	Gain or (loss)	362358.		262250			250050
	d	• , ,		<b>•</b>	362358.		***************************************	362358.
ne	8 a	Gross income from fundraisin	• '					
Other Reven		including \$	of					
Re		contributions reported on line						
her		Part IV, line 18	a	<del></del>		ļ		
ਠੋ		Less: direct expenses	, b	<u> </u>		ŀ		
		Net income or (loss) from fund	<del>-</del>	<b>•</b>				<u> </u>
	у а	Gross income from gaming at				1		
	L	Part IV, line 19 Less: direct expenses	a b	<del>                                     </del>				
		Net income or (loss) from gan	_	<b>.</b>				
		Gross sales of inventory, less	-					
	IV a	and allowances						
	h	Less cost of goods sold	a b					
		Net income or (loss) from sale	-	L				1
		Miscellaneous Revenu		Business Code			······································	
	11 a	<del></del>		23233 0000		į		1
	a							
	c						·	
	d						<del></del>	
	_	Total. Add lines 11a-11d	:	<b>&gt;</b>				
	12	Total revenue. See instructions		<b>•</b>	1174035.	63757.	0.	409846.
33200 10-29								Form <b>990</b> (2013)

Form 990 (2013) CONSERV. OF H
Part IX Statement of Functional Expenses

	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and	20225			
	organizations in the United States See Part IV, line 21	283065.	283065.		
2	Grants and other assistance to individuals in	41573	41572		
_	the United States. See Part IV, line 22	41573.	41573.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	348601.	348601.		
4	Benefits paid to or for members	340001.	340001.	· · · · · · · · · · · · · · · · · · ·	
5	Compensation of current officers, directors,				
J	trustees, and key employees	59494.	27367.	28557.	3570
6	Compensation not included above, to disqualified		270071	20337.	3370
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	158120.	134325.	17725.	6070
8	Pension plan accruals and contributions (include	-			
	section 401(k) and 403(b) employer contributions)	7700.	6567.	845.	288
9	Other employee benefits	19815.	16179.	2864.	772
10	Payroll taxes	16038.	12105.	3252.	681
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	F	11677.		11677.	
d	, ,		··············		
e					
f	Investment management fees				
9		407084.	405209.	1075	
12	column (A) amount, list line 11g expenses on Sch 0 ) Advertising and promotion	407004.	403209.	1875.	
13	Office expenses	25793.	20277.	4387.	1129
14	Information technology	23,733.	202771	4307.	1129
15	Royalties				
16	Occupancy				
17	Travel	175363.	166487.	8876.	
18	Payments of travel or entertainment expenses	,			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	23.	23.		
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	SHARED AND ALLOCATED OV	103930.	78406.	20940.	4584.
ь	CO-SPONSORSHIPS	32145.	32145.		2001
С	WORKSHOP AND MEETING EX	18854.	15182.	3618.	54.
d	MISCELLANEOUS EXPENSE	4825.	4765.	0.	60.
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	1714100.	1592276.	104616.	17208
26	Joint costs Complete this line only if the organization	T			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

332010 10-29-13

Form **990** (2013)

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 84818. 128649. 1 Cash - non-interest-bearing 1 238905. 1090004. 2 Savings and temporary cash investments 2 1952370. 3 Pledges and grants receivable, net 35000. 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 Inventories for sale or use 8 2606. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 628469 992093. 11 Investments - publicly traded securities 11 3860072. 4137921. Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 6767240. 16 Total assets. Add lines 1 through 15 (must equal line 34) 6383667. 16 38368. 95067. 17 Accounts payable and accrued expenses 17 32000. 18 Grants payable 2696. 18 19 Deferred revenue 17185. 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 250177. Schedule D 25 168865. 320545. 283813. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 415490. 27 Unrestricted net assets 302288. 27 3347574. 3113935. 28 Temporarily restricted net assets 28 29 2683631. 2683631. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 6446695 6099854. 33 Total net assets or fund balances 33

> 6383667. Form **990** (2013)

Total liabilities and net assets/fund balances

6767240.

34

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2013)

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Act and OMB Circular A-133?

### **SCHEDULE A**

· (Form 990 or 990-EZ)

Department of the Treasury

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

FOUNDATION OF THE AMERICAN INSTITUTE FOR

**Employer identification number** 

			V. OF HISTORI							3-/424418	
Part I	Reason	for Public Cha	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.			
he orga	nization is not	a private foundation	because it is (For lines	1 through	11, check	only one b	oox.)			<u>,,,-</u>	
1 🔲			es, or association of chur					).			
2			70(b)(1)(A)(ii). (Attach Sc					-			
з 🗔			oital service organization			170(6)(1)	(A)(iii).				
4		•	operated in conjunction					/6\/1\/ <b>6</b> \/i	ii) Enter	the hospital's name	
<b>-</b>	city, and sta		operated in conjunction	with a not	pital desc	iibed iii se	cuon ire	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	iii). Linter	the hospital s hame,	
5	-		benefit of a college or u	nivoralty o	wood or o	paratad by		mantal un	ıt danarıl		_
<b>э</b>			=	iliversity o	wited of of	Jerated by	a govern	memar un	it descrit	oed in	
•		)(b)(1)(A)(iv). (Comp	•								
6 🖳			nent or governmental uni								
7 X			ceives a substantial part	of its supp	oort from a	governme	ental unit d	or from the	e general	public described in	
		<b>(b)(1)(A)(vi).</b> (Compl	•								
8 📙			section 170(b)(1)(A)(vi).								
9 📖			ceives: (1) more than 33								
	activities rela	ated to its exempt fu	inctions - subject to certa	ain excepti	ons, and (	2) no more	than 33 ·	1/3% of its	s suppor	t from gross investmer	nt
	income and	unrelated business	taxable income (less sec	tion 511 ta	x) from bu	sinesses	acquired b	y the orga	anızatıon	after June 30, 1975	
	See section	509(a)(2). (Complet	e Part III.)								
10 🖳	An organizat	ion organized and o	perated exclusively to te	st for publ	ic safety. S	See <b>sectic</b>	n 509(a)(4	4).			
11 📖	An organizat	ion organized and c	perated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the	e purposes of one or	
	more publicly	y supported organiz	ations described in secti	on 509(a)(	1) or section	on 509(a)(2	2) See <b>se</b> e	ction 509	(a)(3). Ch	eck the box that	
	describes th	e type of supporting	organization and compl	ete lines 1	1e through	11h					
	а 🔲 Туре	I <b>b</b> 🔲 T	ype II c 🔲 T	ype III - Fu	nctionally	integrated		ј 🔙 Тур	e III - No	n-functionally integrate	ec
е 🗀	By checking	this box, I certify th	at the organization is not	controlled	d directly o	r indirectly	by one o	r more dis	qualified	persons other than	
	foundation n	nanagers and other	than one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 50	9(a)(1) or	section 509(a)(2).	
f			tten determination from						. , ,	, , ,	
		rganization, check t			•						
9	Since Augus	t 17, 2006, has the	organization accepted ar	nv aift or c	ontribution	from anv	of the foll	owina per	sons?	_	
_			directly controls, either al			•		• •		, Yes No	_
			supported organization?		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		()	() 50.01.	11g(i)	<u> </u>
	=		on described in (i) above?	,						11g(ii)	_
	-	•	a person described in (i) o		۵2					11g(iii)	_
h		-	a bout the supported or	• •						riggan	_
	1 TOVIGE LITE I	ollowing information	about the supported of	ganization	(5)						
(-) Ni		() =101		km) le the	rganization	(v) Did vo	- notify the	(vi) is	the .	I	
	e of supported	(II) EIN	(iii) Type of organization (described on lines 1-9	r .	sted in your		•	organizati	on in col	(vii) Amount of monetai	гу
ury	anization		above or IRC section		document?		r support?	(i) organiz U S	ted in the	support	
			(see instructions))	Yes	No	Yes	No	Yes	No	-	
			<del>                                     </del>	103	110		110	163	140		_
			<del> </del>		<del> </del>						
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332021 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

### FOUNDATION OF THE AMERICAN INSTITUTE FOR

Schedule A (Form 990 or 990-EZ) 2013 CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support	· · · · · · · · · · · · · · · · · · ·	•	·			• •
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and	\ <del>0</del> /2003	(2) 20.0	(0) 20 1.	(4) 2012	(0) 2010	(i) rotal
membership fees received (Do not		}				
include any "unusual grants.")	396414.	468063.	813458.	682158.	700432.	3060525.
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		,				
4 Total. Add lines 1 through 3	396414.	468063.	813458.	682158.	700432.	3060525.
5 The portion of total contributions						
by each person (other than a		[				
governmental unit or publicly		[				
supported organization) included						
on line 1 that exceeds 2% of the		į				
amount shown on line 11,						
column (f)		-				1331274.
6 Public support. Subtract line 5 from line 4				<del>, , , , , , , , , , , , , , , , , , , </del>	1-17-	1729251.
Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	396414.	468063.	813458.	682158.	700432.	3060525.
8 Gross income from interest,					-	
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources	149347.	189134.	202981.	188551.	409952.	1139965.
9 Net income from unrelated business					<del></del>	
activities, whether or not the				}		
business is regularly carried on						
10 Other income Do not include gain						·
or loss from the sale of capital						
assets (Explain in Part IV)		248.		698.		946.
11 Total support. Add lines 7 through 10						4201436.
12 Gross receipts from related activities,	etc. (see instructio	ons)			12	267563.
13 First five years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth tax	x year as a section	n 501(c)(3)	
organization, check this box and stop						<u> </u>
Section C. Computation of Publi				<del></del>		11 10
14 Public support percentage for 2013 (li		•	olumn (f))		14	41.16 %
15 Public support percentage from 2012		· ·	h 40	4 00 4/22/	15	39.72 %
16a 33 1/3% support test - 2013. If the o			iine 13, and line 1	4 is 33 1/3% or m	iore, check this bo	
stop here. The organization qualifies a		-	40 40	h <b>45</b> 00 4/55		► X
b 33 1/3% support test - 2012. If the c				ine 15 is 33 1/3%	or more, check th	nis box
and stop here. The organization quali				40.40. 40.	11: 44 4004	
17a 10% -facts-and-circumstances test						
and if the organization meets the "fac					t iv now the organ	ization
meets the "facts-and-circumstances"	_	· · · · · · · · · · · · · · · · · · ·		•	7	1000
b 10% -facts-and-circumstances test						
more, and if the organization meets the						
organization meets the "facts-and-circ						
18 Private foundation. If the organization	i dia not check à b	DOX ON line 13, 16a	, 100, 1/a, or 1/b,	<del></del>		
				Sche	dule A (Form 990	or 990-EZ) 2013

### Part III

Schedule A (Form 990 or 990-EZ) 2013						Page 3
Part III Support Schedule for Or	ganizations	Described in	Section 509(a)	)(2)		
(Complete only if you checked the	he box on line 9	of Part I or if the o	rganization failed t	to qualify under Pa	rt II If the organiza	ation fails to
qualify under the tests listed bel					•	
Section A. Public Support		,				
Calendar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513	-					
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5			-			
7a Amounts included on lines 1, 2, and						

3 received from disqualified persons		<u> </u>	
<b>b</b> Amounts included on lines 2 and 3 received			
from other than disqualified persons that			
exceed the greater of \$5,000 or 1% of the			
amount on line 13 for the year			
c Add lines 7a and 7b			

**Section B. Total Support** 

8 Public support (Subtract line 7c from line 6)

Catendar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses				1		
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)				1		<u> </u>

14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,
	check this box and <b>stop here</b>
Sec	tion C. Computation of Public Support Percentage

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15		%
16	Public support percentage from 2012 Schedule A, Part III, line 15	16		%
Se	ction D. Computation of Investment Income Percentage			
17	Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17		%
18	Investment income percentage from 2012 Schedule A, Part III, line 17	18		%
19a	33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than	33 1/3	3%, and line 17 is not	
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ation	I	
t	33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is m	ore th	nan 33 1/3%, and	
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supp	orted	dorganization	

332023 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

		FOUNDAT						24410
Schedule A Part IV	(Form 990 or 990-EZ) 2013 Supplemental Infor	mation Provide	te the explanat	OTORIC &	ARTIST	10: Part II line 1	5 23-74	24418 Page 4
L	Also complete this part fo					io, rait ii, iiile	17a 01 17b, and 1	ait III, IIIIe 12
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332024 09-25-	-13					Sch	nedule A (Form 9	90 or 990-EZ) 2013

### **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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization

FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS

Employer identification number 23-7424418

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		<del>-</del>
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's		Yes No
6	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?		Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, I	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or	education) Preservation of an his	storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements o	during the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year 🕨 \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170	0(h)(4)(B)(t)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue stater	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ince of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

FOUNDATION OF THE AMERICAN INSTITUTE FOR Schedule D (Form 990) 2013 CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): а Public exhibition Loan or exchange programs h Scholarly research Other □ Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Yes to be sold to raise funds rather than to be maintained as part of the organization's collection? No Part IV | Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included Yes on Form 990, Part X? No **b** If "Yes," explain the arrangement in Part XIII and complete the following table. Amount c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V | Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 3783882 3900228 4795389 4490935 3838680. 25300 b Contributions 19707 19150 10775 8060. Net investment earnings, gains, and losses 488350 482012 -83305 491187 821822. 21600 22000 21600 d Grants or scholarships 20970 15970. Other expenditures for facilities 93663 and programs 596065 809406 176538 161657. Administrative expenses g End of year balance 4182269. 3783882. 3900228. 4795389 4490935. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as. .00 Board designated or quasi-endowment 64.00 Permanent endowment 36.00 c Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes

(i) unrelated organizations

(ii) related organizations

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

4	Descri	be in	Part :	XIII the	ıntended	uses	of the	organization's	s endowment	funds.
						-				

No Х 3a(i) Х 3a(ii) 3ь

### Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value depreciation basis (investment) basis (other) 1a land **b** Buildings c Leasehold improvements d Equipment Other 0. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2013

23-7424418 Page **3** 

Schedule D (Form 990) 2013

		_									•
CONSERV.	OF	ΗI	STOR	IC 8	Ç.	ARTI	STI	C	WO	RKS	

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"  (a) Description of security or category (including name of security)	to Form 990, Part IV, line (b) Book value	11b See Form 990, Part X, line 12 (c) Method of valuation: Cost of	or and of year market value
	(b) Book value	(c) Wethod of Valuation. Cost of	or end-or-year market value
Financial derivatives     Closely-held equity interests	<u></u>	-	······································
(3) Other			
(A) TIFF MULTIASSET FUND -			
(B) NON PUBLICALLY TRADED	3639934.	END-OF-YEAR MARI	KET VALUE
(C) TIFF SHORT TERM			
(D) INVESTMENT FUND - NON			
(E) PUBLICALLY TRADED	497987.	END-OF-YEAR MARI	KET VALUE
( <del>F</del> )	-		
(G)			
(H)			→ 11 /s 11 <del>10</del> - 10
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	4137921.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"  (a) Description of investment			
	(b) Book value	(c) Method of valuation Cost of	or end-of-year market value
(1)			· · · · · · · · · · · · · · · · · · ·
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15	
	Description		(b) Book value
(1)	<del></del>		-
(2)			
(3)			
(4) (5)			<del></del>
(6)			
(7)	<del></del>	· · · · · · · · · · · · · · · · · · ·	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities.	e 15 )		<b>&gt;</b>
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11e or 11f. See Form 990, Part X. lin	e 25
1. (a) Description of liability		(b) Book value	······································
(1) Federal income taxes			
(2) DUE TO AIC		168865.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		160065	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)	168865.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2013

332053 09-25-13

CONSERV.	OF	HISTORIC	æ	ARTISTIC	WORKS

	Reconciliation of Revenue per Audited Financial Stateme	ents Witl	n Revenue per R		121110 Page 4
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				1435681.
1	Total revenue, gains, and other support per audited financial statements			1	1433001.
2 a	Amounts included on line 1 but not on Form 990, Part VIII, line 12:  Net unrealized gains on investments	2a	193226.		
b	Donated services and use of facilities	2b	68420.	1	
c	Recoveries of prior year grants	2c	001201	1 1	
d	Other (Describe in Part XIII.)	2d		1	
е	Add lines 2a through 2d			2e	261646.
3	Subtract line 2e from line 1			3	1174035.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			- "	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1174035.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents Wit	th Expenses per	Retur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a  Total expenses and losses per audited financial statements		<del></del>		1782520.
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	1702320.
a	Donated services and use of facilities	2a	68420.		
b	Prior year adjustments	2b	00420.	1	
c	Other losses	2c	· · · · · · · · · · · · · · · · · · ·	1	
d		2d		1	
e	Add lines 2a through 2d		<del></del>	2e	68420.
3	Subtract line 2e from line 1			3	1714100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b		1	
С	Add lines 4a and 4b			4c	0.
_5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1714100.
Pa	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add			4; Part λ	K, line 2, Part XI,
PAI EXI	RT V, LINE 4: PLANATION: PERMANENT ENDOWMENTS MAINTAINED	BY TI	HE ORGANIZA	TION	REMAIN IN
PEI	RPETUITY AND THE EARNINGS MAY BE USED TO F	UND PI	ROFESSIONAL	DEV	ELOPMENT
PRO	OGRAMS AND ACTIVITIES, SCHOLARSHIPS, AND G	RANTS	IN ACCORDA	NCE	WITH DONOR
INT	TENT FOR USE OF THE ENDOWMENT EARNINGS.				
PAF	RT X, LINE 2:			<del></del>	w
EXI	PLANATION: THE AIC AND THE FAIC ARE EXEMPT	FROM	THE PAYMEN	T OF	INCOME
TAX	KES UNDER SECTIONS 501(C)(6) AND 501(C)(3)	OF TH	HE INTERNAL	REV	ENUE CODE,
RES	SPECTIVELY. AS SUCH, BOTH ORGANIZATIONS A	RE TAX	KED ONLY ON	THE	IR NET
UNE	RELATED BUSINESS INCOME. NO PROVISION FOR	INCO	ME TAXES HA	S BE	EN MADE IN
THI 332054 09-25-	CONSOLIDATED FINANCIAL STATEMENTS FOR TH	E YEAI			
09-25-	24			ocnedi	ıle D (Form 990) 2013

### SCHEDULE F (Form 990)

Department of the Treasury

### Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

FOUNDATION OF THE AMERICAN INSTITUTE FOR

Employer identification number

CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (a) Region (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region services, investments, grants to describe specific type Independent investments contractors recipients located in the region) of service(s) in region in region in region PROGRAM SERVICES AND GRANTS STATE HERMITAGE MUSEUM RUSSIA & THE NEWLY TO RECIPIENTS LOCATED IN PROJECT IN ST. INDEPENDENT STATES -THE REGION PETERSBURG RUSSIA 361068. EUROPE (INCLUDING PROGRAM SERVICES AND GRANTS STATE HERMITAGE MUSEUM ICELAND & GREENLAND) TO RECIPIENTS LOCATED IN PROJECT TRAINING IN THE REGION EUROPE 48273. NORTH AMERICA -CANADA AND MEXICO. GRANTS TO RECIPIENTS BUT LOCATED IN THE REGION 32000. SOUTH AMERICA -GRANTS TO RECIPIENTS 1000. ARGENTINA, BOLIVIA LOCATED IN THE REGION EAST ASIA AND THE GRANTS TO RECIPIENTS IN THE PACIFIC REGION 2200. 444541. 3 a Sub-total 0 **b** Total from continuation sheets to Part I 0 0. c Totals (add lines 3a and 3b) 444541.

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

Schedule F (Form 990) 2013

23-7424418

CONSERV. OF HISTORIC & ARTISTIC WORKS Schedule F (Form 990) 2013 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part

(i) Method of valuation (book, FMV, appraisal, other)			FAIR MARKET VALUE			
(h) Description of non-cash assistance			EQUIPMENT PURCHASED BY THE ORGANIZATION AND 40000 DONATED TO THE			
(g) Amount of non-cash assistance	0.	.0	40000.			cempt by
(f) Manner of cash disbursement	WIRE	CHECK				recognized as tax-ex
(e) Amount of cash grant	253229.	32000.CHECK	•0			foreign country,
(d) Purpose of grant	PURCHASE OF EQUIPMENT AND SUPPLIES FOR PHOTOGRAPH CONSERVATION	HOSTING CONSERVATION FELLOWSHIP	DONATION OF EQUIPMENT FOR PHOTOGRAPH CONSERVATION LABORATORY			Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by
(c) Region	RUSSIA & THE NEWLY INDEPENDENT STATES	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	RUSSIA & THE NEWLY INDEPENDENT STATES - ARMENIA, AZERBIJAN,			is listed above that are r
(b) IRS code section and EIN (if applicable)						recipient organization
1 (a) Name of organization						2 Enter total number of r

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

Schedule F (Form 990) 2013

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FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS

Page 3

23-7424418

Part Itf Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Schedule F (Form 990) 2013

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, RMV, (book, RMV)
	EAST ASIA AND THE	•		6 6 7	c		appraisar, orner)
FAIC/MELLON COLLABORATIVE WORKSHOPS IN PHOTOGRAPH		-1		1.55			
PS	SOUTH AMERICA	1	1000.WIRE	IRE	0		
	EUROPE (INCLUDING ICELAND &						
TRAVEL SCHOLARSHIPS	GREENLAND) - ALBANIA, ANDORRA,	10	20172.WIRE	IRE	0.		
PAIC/KRESS AIC ANNUAL MEETING	EAST ASIA AND THE	•	0000		c		
					S		
							!

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Part IV Foreign Forms 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With Yes X No a U.S. Owner (see Instructions for Forms 3520 and 3520-A) 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 Yes X No Certain Foreign Corporations (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund Yes X No (see Instructions for Form 8621) 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 Yes X No Foreign Partnerships (see Instructions for Form 8865) Did the organization have any operations in or related to any boycotting countries during the tax year? If 6 "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions X No for Form 5713)

Schedule F (Form 990) 2013

## FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 Page 5 Schedule F (Form 990) 2013 Supplemental Information 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. PART I, LINE 2: EXPLANATION: GRANT FUNDS PROVIDED OUTSIDE OF THE U.S. ARE MONITORED BY ORGANIZATION PROGRAM MANAGEMENT STAFF AND PAID CONSULTANTS. FINAL REPORTS FOR GRANTS ARE REQUIRED, INCLUDING AN ACCOUNT OF EXPENDITURES. PART I, LINE 3: EXPLANATION: ACCRUAL BASIS PART II, COLUMN (D): (D) PURPOSE OF GRANT: PURCHASE OF EQUIPMENT AND SUPPLIES FOR PHOTOGRAPH CONSERVATION LABORATORY (H) DESCRIPTION OF NON-CASH ASSISTANCE: EQUIPMENT PURCHASED BY THE ORGANIZATION AND DONATED TO THE HERMITAGE MUSEUM

SCHEDULE (Form 990)

Department of the Treasury

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

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

ъ 8 ž Employer identification number 23-7424418 (h) Purpose of grant or assistance TO HOST CONSERVATION X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any FELLOWSHIP FELLOWSHIP FELLOWSHIP FELLOWSHIP FELLOWSHIP FELLOWSHIP Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) o ٥. ö ö Ö ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States FOUNDATION OF THE AMERICAN INSTITUTE FOR recipient that received more than \$5,000. Part II can be duplicated if additional space is needed 32000 32000. (d) Amount of 32000 32000 32000 32000 CONSERV. OF HISTORIC & ARTISTIC WORKS cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table STATE GOVERNMENT (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 13-1624100 16-1019635 23-1365388 74-2652689 04-2103580 04-2104334 General Information on Grants and Assistance (**b**) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization UNIVERSITY OF ARIZONA, ARIZONA STATE MUSEUM - TUCSON, AZ 85721 ISABELLA STEWART GARDNER MUSEUM PHILADELPHIA MUSEUM OF ART or government 90 MOUNT AUBURN STREET NATURAL HERITAGE TRUST PA 19101 MUSEUM OF MODERN ART Name of the organization CAMBRIDGE, MA 02138 WATERFORD, NY 12188 HARVARD UNIVERSITY NEW YORK, NY 10019 BOSTON, MA 02115 280 THE FENDWAY PEEBLES ISLAND 11 W. 53RD ST PHILADELPHIA, PO BOX 7646 Part II Part 8

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

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

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Schedule I (Form 990) (2013)

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Schedule | (Form 990) CONSERV. OF HISTORIC & ARTISTIC WORKS

Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part | | ).

Page 1

23-7424418

						,,,,		
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	•
TRUSTEE OF THE UNIVERSITY OF PA, MUSEUM OF ARCHAEOLOGY AND ANTHROPOLOGY - 3260 SOUTH STREET - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	32000.	0.			TO HOST CONSERVATION FELLOWSHIP	
WALTERS ART MUSEUM 600 N. CHARLES STREET BALTIMORE, MD 21201	52-1194738	501(C)(3)	32000.	.0			TO HOST CONSERVATION FELLOWSHIP	
	:							
								1

32

Schedule I (Form 990)

# FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS

Page 2

23-7424418

Schedule I (Form 990) (2013)

Part III Grants and Other

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 assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	,				
GAEHDE SCHOLARSHIP - PROFESSIONAL DEVELOPMENT FOR	-	10000.			
HORTON SCHOLARSHIP -PROFESSIONAL DEVELOPMENT FOR BOOK AND PAPER CONSERVATORS	4	2000.	, o		
STOUT SCHOLARSHIP - STUDENT TRAVEL TO PROFESSIONAL DEVELOPMENT ACTIVITIES	15	8000.	0.0		
GENERAL PROFESSIONAL DEVELOPMENT SCHOLARSHIPS	6	7000	0		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ured in Part I, lin	e 2, Part III, column	(b), and any other ad	ditional information.	
PART I, LINE 2:	;				
EXPLANATION: GRANTS TO INDIVIDUALS	IN THE	UNITED STA	STATES:		
GRANT AND SCHOLARSHIP RECIPIENTS A	ARE SELEC	LECTED THROUGH	H A RATING	SYSTEM	
PROVIDED BY A PANEL OF AT LEAST THI	THREE INDE	NDEPENDENT EX	EXPERTS IN A	APPROPRIATE	
FIELDS. PROJECTS AND BUDGETS ARE EV	EVALUATED	AGAINST	PUBLISHED CH	CRITERIA.	
RECIPIENTS ARE REQUIRED TO SUBMIT	A REPORT	OF THEIR	ACTIVITY,	INCLUDING	
DETAILS OF EXPENDITURES. AWARDS FOR	A ATTENDANCE	AT	AIC OR FAIC I	EVENTS ARE	
CHECKED AGAINST ROSTERS. PUBLICATION		FELLOWSHIPS ARE	AWARDED IN	V THREE	
PAYMENTS - AN INITIAL PAYMENT OF 1,	1/3 UPON 8	SELECTION;	1/3 ON SUE	SUBMISSION OF	
332102 10-29-13		33			Schedule I (Form 990) (2013)

FOR
INSTITUTE
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23-7424418 Part III | Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.) CONSERV. OF HISTORIC & ARTISTIC WORKS Schedule I (Form 990)

Page 2

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 0 0 °. Ö 8385. 4025. 963. 200. (c) Amount of cash grant (b) Number of recipients ø. 10. FAIC/IMLS COLLECTIONS EMERGENCY RESPONSE TEAM FAIC/NEH INDIVIDUAL PROFESSIONAL DEVELOPMENT (a) Type of grant or assistance TRAINING SCHOLARSHIPS TAKE A CHANCE GRANT LECTURE GRANT SCHOLARSHIPS

Schedule I (Form 990)

Schedule I (Form 990)

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

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

OMB No 1545-0047

Name of the organization

FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS

**Employer identification number** 23-7424418

CONDERV. OF MIDIORIC & PROTIDITE WORKD 25-7424410
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO UNDERTAKE AND UNDERWRITE PROGRAMS AND INITIATIVES TO ADVANCE THE
CONSERVATION PROFESSION IN ALL ITS FACETS, TO SUPPORT CONSERVATION
EDUCATION AND CAREER DEVELOPMENT, AND TO APPLY THE EXPERTISE OF THE
PROFESSION IN ADDRESSING THE NATION'S ARTISTIC, CULTURAL, AND HISTORIC
PRESERVATION PRIORITIES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PRESERVATION PRIORITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
FELLOWSHIP PROGRAM FOR ONE-YEAR POST-GRADUATE INTERNSHIPS IN ADVANCED
CONSERVATION. ANDREW W. MELLON FOUNDATION ENDOWMENT GRANTS SUPPORT
COLLABORATIVE WORKSHOPS IN PHOTOGRAPH CONSERVATION AND A FOUR-YEAR
INITIATIVE TO ESTABLISH A PHOTOGRAPH CONSERVATION DEPARTMENT AT THE
STATE HERMITAGE MUSEUM IN ST. PETERSBURG, RUSSIA. IN 2010, NEH, IMLS,
AND NEA GRANTS SUPPORTED EMERGENCY RESPONSE EFFORTS IN HAITI FOLLOWING
ITS DEVASTATING EARTHQUAKE. A 2011 GRANT FROM THE INGE FOUNDATION
SUPPORTED PRODUCTION OF COLLECTIONS CARE WEBINAR IN PARTNERSHIP WITH
THE AMERICAN ALLIANCE FOR MUSEUMS. FAIC ALSO SUPPORTS PROFESSIONAL
CONTINUING EDUCATION AND ATTENDANCE AT THE AIC ANNUAL MEETING BY GRANTS
FROM ENDOWED FUNDS AS WELL AS FROM THE FAIC BOARD-DESIGNATED FUNDS.
FORM 990, PART VI, SECTION A, LINE 6:
EXPLANATION: THE ORGANIZATION HAS ONE MEMBER, THE AMERICAN INSTITUTE FOR

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

CONSERVATION OF HISTORIC AND ARTISTIC WORKS.

Schedule O (Form 990 or 990-EZ) (2013)

Employer identification number 23-7424418

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: THE SOLE MEMBER APPOINTS THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: THE MEMBER HAS THE SOLE AUTHORITY TO MODIFY THE BYLAWS OF THE ORGANIZATION, ADOPT NEW BYLAWS IN PLACE OF ANY PROVISIONS DELETED, AND TO APPROVE ANY DECISIONS DEEMED NECESSARY AND/OR REQUIRED BY LAW.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE FORM 990 IS PREPARED BY A CERTIFIED PUBLIC ACCOUNTANT AND REVIEWED AND APPROVED BY MANAGEMENT. THE EXECUTIVE DIRECTOR REVIEWS,

APPROVES AND SIGNS THE RETURN PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE ORGANIZATION REQUIRES ANNUAL DISCLOSURE OF POTENTIAL OR
ACTUAL CONFLICTS OF INTEREST. EACH YEAR, FAIC BOARD MEMBERS ARE PROVIDED A
COPY OF THE CONFLICT OF INTEREST POLICY. EACH BOARD MEMBER AFFIRMS ON A
WRITTEN FORM THAT THEY HAVE RECEIVED A COPY OF THE CONFLICT OF INTEREST
POLICY, HAVE READ AND UNDERSTAND THE POLICY, AND AGREE TO COMPLY WITH THE
POLICY. IN ADDITION, ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST ARE
ADDRESSED DURING THE YEAR AS NEEDED AND APPROPRIATE ACTION IS TAKEN BY THE
BOARD OF DIRECTORS. AS A MATTER OF POLICY, THE ORGANIZATION DOES NOT ALLOW
TRANSACTIONS BETWEEN THE ORGANIZATION AND INTERESTED PARTIES WHICH COULD
RESULT IN AN ACTUAL OR PERCEIVED CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: THE EXECUTIVE DIRECTOR OF THE ORGANIZATION IS A PAID EMPLOYEE

332212
09-04-13
Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization FOUNDATION OF THE AMERICAN INSTITUTE FOR Employer identification number CONSERV. OF HISTORIC & ARTISTIC WORKS 23-7424418 OF THE AMERICAN INSTITUTE FOR CONSERVATION OF HISTORIC AND ARTISTIC WORKS (AIC), A RELATED 501(C)(6) ORGANIZATION. THE ORGANIZATION SHARES ALL STAFF, FACILITIES AND OTHER COSTS WITH AIC. THE COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR IS ESTABLISHED BY THE BOARD OF DIRECTORS OF HER EMPLOYER, AIC, AND WAS ORIGINALLY ESTABLISHED BASED ON MARKET BASED DATA AT THE TIME OF HIRE FOR EXECUTIVE DIRECTORS OF ORGANIZATIONS OF SIMILAR SIZE AND SCOPE AND WITHIN BUDGETARY CONSTRAINTS OF THE ORGANIZATION. THE AIC ALLOCATES THE SALARY AND BENEFITS OF THE EXECUTIVE DIRECTOR BETWEEN THE ORGANIZATIONS BASED ON TIMESHEETS. THERE ARE NO OTHER INDIVIDUALS THAT ARE COMPENSATED WHICH MEET THE DEFINITION OF AN OFFICER. KEY EMPLOYEE OR HIGHEST COMPENSATED EMPLOYEE. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THESE DOCUMENTS ARE NOT MADE PUBLICALLY AVAILABLE UNLESS REQUIRED BY LAW OR AT THE DISCRETION OF THE BOARD OF DIRECTORS. FORM 990, PART IX, LINE 11G, OTHER FEES: PROGRAM CONSULTANTS: PROGRAM SERVICE EXPENSES 405209. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 405209. OTHER: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 1875. FUNDRAISING EXPENSES 0. TOTAL EXPENSES Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization FOUNDATION OF THE AMERICAN INSTITUTE FOR CONSERV. OF HISTORIC & ARTISTIC WORKS	Employer identification number 23-7424418
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	407084.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ROUNDING	-3.
PART XII, LINE 2C	
EXPLANATION: NO CHANGE FROM PRIOR YEAR	

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

➤ Attach to Form 990.

➤ See separate instructions. Related Organizations and Unrelated Partnerships Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

► See separate instructions.

Open to Public Inspection

**Employer identification number** 

FOUNDATION OF THE AMERICAN INSTITUTE FOR

23-7424418

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

CONSERV. OF HISTORIC & ARTISTIC WORKS

Name of the organization

	(a)	( <b>Q</b> )	(0)	9	(e)	€
	Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total Income	End-of-year assets	Direct controlling
	of disregarded entity		foreign country)			entity
:						
Part II	Identification of Related Tax-Exempt Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year	ions Complete if the organization ar	ıswered "Yes" on Form 990, Par	rt IV, line 34 because	e it had one or more rel	ated tax-exempt

(a)	(q)	(0)	Ð	(e)	<b>(£)</b>	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	2(b)(13) led
of related organization	-	foreign country)	section	status (if section	entity	entity?	6
			,	501(c)(3))		Yes	Ŷ
AMERICAN INSTITUTE FOR CONSERVATION OF							
HISTORIC AND ARTISTIC WORKS - 23-7291, 1156							
15TH STREET, NW SUITE 320, WASHINGTON, DC	MEMBERSHIP ORGANIZATION	DISTRICT OF COLUMBIA 501(C)(6)	501(C)(6)	NA	NA		×
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	,						

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2013

FOUNDATION OF THE AMERICAN INSTITUTE FOR

Schedule R (Form 990) 2013 CONSERV. OF HISTORIC & ARTISTIC WORKS

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

Page 2

23-7424418

Percentage ownership Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. 3 managing partner? Yes 8 Code V-UBI amount in box r 20 of Schedule K-1 (Form 1065) ž Disproportionate allocations? Ξ Yes Share of end-of-year assets <u>6</u> Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) e (d)
| Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization Part IV

ļ	<u>-</u>	5)(13)	rolled 147	Yes								
		512(	controlled entity?	Yes								
	£	Percentage	ownership									
			end-of-year									
	E	Share of total	), income									
	(e)	Type of entity	(C corp, S corp,	5								
	(d)	Direct controlling	entity									
	<u>©</u>	Legal domicile	(state or foreign	country)								
my the tax year:	<b>(</b> 2)	Primary activity										
כופת ישיבוויסווים ווכתוכת מס מ כסולטומויסון כן נותפו תחווות וויס ומי לכמוי	(a)	Name, address, and EIN	of related organization									

Schedule R (Form 990) 2013

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## FOUNDATION OF THE AMERICAN INSTITUTE FOR

CONSERV. OF HISTORIC & ARTISTIC WORKS Schedule R (Form 990) 2013

Page 3

23-7424418

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Yes

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Transactions With Related Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

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

	e in any of the following transactions with one or more related organizations listed in Parts II-IV?	
	id the organization engage in	•
c. Complete me I any chiny is iisted in I are	anizatic	
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2	the ta	
<u>1</u>	uring t	
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- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s)

  - Gift, grant, or capital contribution from related organization(s)
    - d Loans or loan guarantees to or for related organization(s)
      - Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)

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- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
  - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
  - Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(c) (d) Method of determining amount involved
AMERICAN INSTITUTE FOR CONSERVATION OF (1) HISTORIC AND ARTISTIC WORKS	0	261165.ACTUAL	ACTUAL
AMERICAN INSTITUTE FOR CONSERVATION OF (2) HISTORIC AND ARTISTIC WORKS	Z	103930.ACTUAL	ACTUAL
AMERICAN INSTITUTE FOR CONSERVATION OF (3) HISTORIC AND ARTISTIC WORKS	д	450641.ACTUAL	ACTUAL
AMERICAN INSTITUTE FOR CONSERVATION OF (4) HISTORIC AND ARTISTIC WORKS	ပ	14950.	14950.ACTUAL
(9)			

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## FOUNDATION OF THE AMERICAN INSTITUTE FOR

CONSERV. OF HISTORIC & ARTISTIC WORKS Schedule R (Form 990) 2013 Part Vi Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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

Schedule R (Form 990) 2013

Form 8868 (Re	ev. 1·2014)					Page 2			
	ing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	s box	<b>•</b>	X			
	mplete Part II if you have already been granted an				B868.				
<ul> <li>If you are fil</li> </ul>	ing for an Automatic 3-Month Extension, comple								
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed).				
			Enter filer's	identifyin	ng number, see ins	tructions			
• •	ame of exempt organization or other filer, see instru	Employer	aployer identification number (EIN) or						
	UNDATION OF THE AMERICAN					_			
	NSERV. OF HISTORIC & ARTIS				23-742441	.8			
	" 1156 15mu compress Nat NO 220				curity number (SSN	)			
	ity, town or post office, state, and ZIP code. For a for SHINGTON, DC 2005	oreign add	lress, see instructions.						
						<del></del>			
Enter the Retu	urn code for the return that this application is for (file	в а ѕерага	te application for each return)			0 1			
Application		Return	Application		-	Return			
ls For		Code	is For			Code			
Form 990 or F	form 990-EZ	01			-				
Form 990-BL		02	Form 1041-A			08			
Form 4720 (in	dividual)	03	Form 4720 (other than individual)			09			
Form 990-PF		04	Form 5227			10			
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11			
	rust other than above)	06	Form 8870						
STOP! Do not	t complete Part II if you were not already granted								
			1156 15TH STREET,	IAM, IA	0. 320 -				
	are in the care of $\blacktriangleright$ WASHINGTON, DC No. $\blacktriangleright$ 202-452-9545	2000.	Fax No. ▶						
•	nization does not have an office or place of busines	a la tha Lir	<del></del>	<u>_</u> _					
	a Group Return, enter the organization's four digit			f thin in fo	the whole group, a	haak thia			
box D			ch a list with the names and EINs of						
			BER 15, 2014.	an njemb	ala ma avremaion is	101.			
5 For calendar year 2013, or other tax year beginning, and ending									
6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return									
Change in accounting period									
7 State in	State in detail why you need the extension								
	ADDITIONAL TIME IS NEEDED TO THE OBTAIN REQUIRED INFORMATION NECESSARY								
TO FILE A COMPLETE AND ACCURATE RETURN AND TO ALLOW FOR REVIEW OF THE									
	BY BOARD MEMBERS AND/OR D			HE CO	RPORATION.				
8a If this ap	oplication is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any						
	ndable credits. See instructions.			8a	\$				
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated									
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid									
previously with Form 8868. 8b \$									
Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using  EFTPS (Electronic Federal Tax Payment System). See instructions.  8c S									
EFIPS			st be completed for Part II o	8c	<u> </u>				
Under nensities					f my knowledge and h	aliaf			
it is true, correc	of perfect that I have examined this form, included, and that I am authorized to prepare this fo		7 A	v 1118 11851 0	TITIY KITOWINUYN AITO D	ouri,			
Signature_	Title ▶	( )(/	<del>//-</del>	Date	·8-8-19	1			
					Form 8868 (Re	ev. 1-2014)			

323842 12-31-13