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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 2013

Department of the Treasury Internal Revenue Service

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▶ 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 Inspection

Α	For the 20	013 calen	dar year, or tax year beginning $7/01$, 2013, and ending	6/:	30	, 2014	
В	Check if app	licable	[C		D Employer	Identification Num	ber
	\neg	change	American Institute of Indian Studies		23-62	297039	
	\vdash	-	1130 East 59th Street		E Telephone		
	Name c		Chicago, IL 60637				_
	Initial re	eturn	l 100037		(773)	702-863	8
	Termina	ited			ŀ		
	Amende	ed return			G Gross rece	eipts \$ 5,7	787,716.
	Applica	tion pending	F Name and address of principal officer Philip Lutgendorf	(a) Is this		or subordinates?	Yes X No
		penamg	i i i i i i i i i i i i i i i i i i i	(b) Are all	subordinates in attach a list (se	cluded?	Yes No
_	T	-h -h-h	Univ of Iowa, 667 Phillips Hall Iowa City, IA 52242 X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	If 'No,'	attach a list (se	ee instructions)	ب ۱۰۰۰
<u> </u>	Tax-exem					_	
<u>J</u>	Website	≥: ► ww		• •	exemption numb		
K	Form of or	ganization	X Corporation	196	1 M Stat	te of legal domicile	<u>IL </u>
Pa	rt I S	Summar	y				
	1 Brie	fly descri	be the organization's mission or most significant activities Dedicated	to t	he advai	ncement o	f
_	kn	owleda	e about India and the promotion of intellectual				
Governance			universities by providing research fellowship				
ם			s, knowledge of Indian culture, and supporting				
ě			if the organization discontinued its operations or disposed of more				<u> </u>
မ္			oting members of the governing body (Part VI, line 1a)	, (iiaii 2))	3	10
∘ಶ			dependent voting members of the governing body (Part VI, Itne-b)		<u> </u>	4	9
es			of individuals employed in calendar year 2013 (Part V, Hine 2a)			5	1
₹			of volunteers (estimate if necessary)	1.1	,	6	108
Activities &			1(0)	~~~.	<i>i</i> —	7a	0.
•			ed business revenue from Part VIII, column (C), line 32 MAY 2 0 2015	. /၁	' <i>'</i>	7b	0.
-	DITCE	uniciated	a business taxable meanic main raini 950 r, inte 94 1 2 0 7015	1/96	rior Year		ent Year
	9 Cor	tribi itiana	and grants (Part VIII, line 1h)				
ē				<u> </u>	361,29		938,899.
Revenue		-	vice revenue (Part VIII, line 2g)	!	210,80		<u>256,486.</u>
ě			ncome (Part VIII, column (A), lines 3, 4, and 7d)		367,42		653,449.
-			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		247,36		380,944.
			e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	(5,186,89		229,778.
	13 Gra	nts and s	ımılar amounts paid (Part IX, column (A), lines 1-3)		479,77	9.	<u>605,265.</u>
	14 Ber	efits paid	to or for members (Part IX, column (A), line 4)				
	15 Sal	aries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)		501,33	4.	345,104.
ses	16a Pro	fessional	fundraising fees (Part IX, column (A), line 11e)			·· ·· -	
Expenses			-		·~····································		
꿃			sing expenses (Part IX, column (D), line 25) > 52,008.	ļ	<u> </u>	<u> </u>	1
	17 Oth	er expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	3	3,334,38	3. 3,	<u>354,090.</u>
	18 Tot	al expens	es Add lines 13-17 (must equal Part IX, column (A), line 25)	4	1,315,49	6. 4,	304,459.
	19 Rev	enue less	s expenses Subtract line 18 from line 12	1	,871,39	4.	925,319.
800					ng of Current \		of Year
seta Ilan	20 Tot	al assets	(Part X, line 16)		609,51		391,257.
ABB	21 Tot		es (Part X, line 26)		,558,34		611,715.
Net Assets Fund Balan	00 11.1						
	22 1100		fund balances. Subtract line 21 from line 20		3,051,17	2.] 8,	779,542.
Pa	rt II	<u>Signatur</u>	re Block				
Unde	r penalties o	f perjury, I de	eclare that I have examined this return, including accompanying schedules and statements, and to the arer (other than officer) is based on all information of which preparer has any knowledge	e best of m	ny knowledge an	nd behef, it is true,	correct, and
comp	— — —	r —	arer (other than officer) is based on all information of which preparer has any knowledge				
		.	Rayhuhin		05/13/2	2015	
Sig	ın		re of officer	Da	ate		
He	re	l k	CALPHW. NICHOLAS Chair of the Board of	Trus	4205		
		Type or	r print name and title		_		
_		Print/Type p	preparer's name Preparer's signature Date		Check	ıf PTIN	
			$\mathcal{L}(0,1)$			l l	400
Pa			11. Raczynski Wood	<u>., </u>	self-employed	P00218	400
	eparer	Firm's name			1		
US	e Only	Firm's addre	ess 17W635 Butterfield Rd., Ste 140		Firm's EIN	36-42668	94
			Oakbrook Terrace, IL 60181		Phone no	(630) 916-	-8920
May	y the IRS	discuss th	nis return with the preparer shown above? (see instructions)			X Yes	No
BA	A For Pa	perwork F	Reduction Act Notice, see the separate instructions. TEEA	.0113L 11	/08/13		m 990 (2013)

	n 990 (2013) American Institute of Indian Studies	23-6	5297039	Page 2
	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.			-
	See Schedule 0			
				-
				
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	-	
	Form 990 or 990-EZ?		Yes	X No
	If 'Yes,' describe these new services on Schedule O			ы
3	Did the organization cease conducting, or make significant changes in how it conducts, any progr	am services?	Yes	X No
	If 'Yes,' describe these changes on Schedule O			_
4	Describe the organization's program service accomplishments for each of its three largest program	n services, as i	neasured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am	ount of grants a	nd allocations	to
	others, the total expenses, and revenue, if any, for each program service reported			
			<u> </u>	
4 a	a (Code) (Expenses \$3,637,799. including grants of \$605,269			
	Study of Indian culture and civilization, awarding fellowship	<u>s to supp</u>	<u>ort resea</u>	arch
	and study			-
				
				
	~			
		 -		
		 -		
				 -
				
4 b	b (Code) (Expenses \$ including grants of \$) (Revenue	\$)
				
		 -		
			- 	
				. – – – – –
				
				
				
		 -	 -	
4 c	c (Code:) (Expenses \$ including grants of \$) (Revenue	\$)
				 -
			 -	
				
4 d	d Other program services. (Describe in Schedule O.)			-
	(Expenses \$ including grants of \$) (Reven	ue \$)
4 e	e Total program service expenses ► 3,637,799.			
BAA		_	Fori	m 990 (2013)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		х
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		<u>x</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		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			
a	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	х	
t	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		X
C	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII .	12a	х	
	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	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	v	Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
ł	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		х
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	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
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		Х
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
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ı	b if 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part X IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 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 Х Schedule J 23 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a 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 X **b** is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete X 25b Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III Х 27 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): 2.3.4 a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Х **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Schedule N, Part II Х 32 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 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V. line 1 34 X X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a **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 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 X 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note. All Form 990 filers are required to complete Schedule O

BAA

Form **990** (2013)

23-6297039 American Institute of Indian Studies Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 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 2a Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b 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? 3 a 3 b b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country India See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and X 7 a services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Х 7 c d If 'Yes.' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f q If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 a a Did the organization make any taxable distributions under section 4966? **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14 a

14b

Part	VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bel	0W, a	and f	or					
	a 'No' response to līne 8a, 8b, or 10b below, describe the circumstances, processes, or chan	ges i	n						
	Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			X					
Sect	ion A. Governing Body and Management								
			Yes	No					
	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members								
	of the governing body, or if the governing body delegated broad		,	1					
	authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1 b			-]					
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		Ĭ.						
	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		X					
	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4 5		X					
5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6 Did the organization have members or stockholders? See Schedule 0									
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? See Schedule 0.									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, see Sch O stockholders, or other persons other than the governing body?	7 b	Х	ļ <u></u>					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	· i							
	The governing body?	8 a	Х						
	Each committee with authority to act on behalf of the governing body?	8 b	X						
	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 See Schedule O	9	Х						
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Re	venu		I .					
10 -	Did the experimental have legal charters branches or affiliates?	10 a	Yes	No X					
	Did the organization have local chapters, branches, or affiliates? If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	IVa							
	operations are consistent with the organization's exempt purposes?	10 b		\					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	<u></u>	X					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х						
		124		 					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O	12 c	Х						
	Did the organization have a written whistleblower policy?	13		X					
	Did the organization have a written document retention and destruction policy?	14		X					
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,						
	The organization's CEO, Executive Director, or top management official	15 a	Х						
	Other officers of key employees of the organization See Schedule 0	15 b	X	 					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16 a		X					
	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b							
	ion C. Disclosure	100	<u> </u>	Ь					
	List the states with which a copy of this Form 990 is required to be filed IL		-						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) as inspection. Indicate how you make these available. Check all that apply.	aılabl	e for	public					
	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 makes its governing documents, conflict of interest policy, and financial statements avail the public during the tax year. See Schedule O	able to							
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization								
► BAA	Elise Auerbach 1130 E. 59th Street, Room 321 Chicago IL 60637 (773) 702-863		990	 (2013)					
	1 200 10 100 10								

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

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

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

Check this box if neither the organization in	nor any rela	ited or	ganız	zatio	n co	mpens	sate	d any current officer, di	rector, or trustee	
(A) Name and Title	(B) Average hours per week (list	offic	er an	d a di	check erso recto	more to n is both or/trustee	han n an e)	(D) Reportable compensation from	(E) Reportable compensation from related organizations (W 2/1099-MISC)	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	(W 2/1099-MISC)	from the organization and related organizations
(1) Purnima Mehta India Director	$-\frac{40}{0}$	х		Х				59,230.	0.	0.
(2) Elise Auerbach	40									
US Director	 -	Х						66,743.	0.	0.
(3) See Statement 1	0	Х						0.	0.	0.
(4) Philip Lutgendorf	2	Α-	\vdash	\dashv	\dashv			0.	0.	<u></u>
President	0			Х				0.	0.	0.
(5) Ralph W. Nicholas Chairman	$-\frac{1}{0}$			х				0.	0.	0.
(6) William R. Pinch	2		\vdash	^	\dashv			0.	U.	<u> </u>
Treasurer		1		x				٥.	0.	0.
(7) John Cort	- 1 0			х				0.	0.	0.
Secretary (8) Amrita Basu	1			_				0.		<u> </u>
Vice President		•		х				0.	0.	0.
(9)										
(10)	 									
(11)										
(12)										
(13)				-						
(14)	 									
	<u> </u>	1	Ш							

Page 8

Part VIII Section A. Omicers, Directors, Trus	(B)	l			3 <u>y c</u> 3)	C3, (ant	Triigilest con	pensateu Limp	(continued)
(A)	Average	(do	not c	Pos	sition	than	оле	(D)	(E)	(F)
Name and title	hours per	box	, unle	ess pe	erson	ıs botl or/trus	h an	Reportable compensation from	Reportable compensation from	Estimated amount of other
	week (list any hours	9 70	lst	Offi	<u>\$</u>	emp	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	compensation from the
	for related	Individual trustee or director	E O	Officer	Key employee	Highest co employee	ner			organization and related organizations
	organiza - tions below	8 2	nal tr		l đị	omp				
	dotted line)	siee	nstitutional trustee		"	Highest compensated employee				
(15)	↓		_			ä				<u> </u>
(15)	 									
(16)										
(17)	<u> </u>									
(18)	<u> </u>									
(10)	1	:								
(19)										
(20)	<u> </u>	_								
(21)	ļ	_								
(21)	 					:				
(22)										
(23)	<u> </u>				-					
(24)	 									
	ļ									
(25)	 	-								
1 b Sub-total					1		▲ .	125,973.	0.	0.
c Total from continuation sheets to Part VII, Section	n A						^	0.	0.	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited t	o those I	isted	abo	ve) v	who			125,973. more than \$100.00	0.0 of reportable comp	0. Densation
from the organization • 0								. ,		
3 Did the organization list any former officer, director	>=	ata a	leav		رمام،		or b	ighact compandat	ad ampleyee	Yes No
on line 1a ⁹ If 'Yes,' complete Schedule J for such	ındıvıdu	al	кеу	em	ipioy	ree, c	וויוכ	ignest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater	eportabl than \$1	e coi 50,00	npe	nsa If '\	tıon ′es′	and comp	othe	er compensation f e Schedule J for	rom	
such individualDid any person listed on line 1a receive or accrue	compen	satio	n fro	om a	any	unrel	late	d organization or	ındıvıdual	4 X
 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes, Section B. Independent Contractors 	' comple	te Sc	hea	lule	J fo	r suc	h pe	erson		5 X
Complete this table for your five highest compensation from the organization. Report compens	ated inde	epend	dent	cor	ntrac	tors	that	t received more th	an \$100,000 of	
(A) Name and business addre	_	1100	41011	<u>uu.</u>	y ca.	Orion	g .	(B)		(C)
realine and publicess address								Description of) SELVICES	Compensation
O Talel ambas (standard at a	4 1 4		_ 0		1 !	1			AL	
2 Total number of independent contractors (including bu \$100,000 of compensation from the organization		ited t	o the	use I	usted	a abo	ve)	wno received more	uian	

	•	Check if Schedule O	contains a	a resp	onse or note to any	y line in th	is Part V	Ш					
						Total re) venue	f	(B) elated or exempt unction evenue	(C) Unrela busın rever	ated ess	(D) Reven excluded fr under sec 512-5	om tax ctions
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b	Federated campaigns Membership dues Fundraising events		1a 1b 1c	84,000.		· · · · · · · · · · · · · · · · · · ·						
Z Z		Related organizations	}	1 d]	1				J
9₫		Government grants (contribution	nns)	1 e	1,215,403.								
용희		• •	ĺ		1,215,405.								i
SBUT		All other contributions, gifts, g similar amounts not included		1 f	2,639,496.								
통활	_		in lines 1a-	1f \$_	25,013.								
<u> </u>	h	Total. Add lines 1a-1f				3,938	<u>,899.</u>	<u> </u>		<u></u>			
3	Α.			}	Business Code			ļ				ļ	
				r	561000		<u>, 961.</u>	2	45,961.				
<u>بر</u>	D				561000		,025.	 	7,025.				
쥝	C		<u>Fees</u>	- - -	561000	3	<u>,500.</u>	<u> </u>	<u>3,500.</u>			<u> </u>	
몽	d		- -	- - -				<u></u> .					
₹	e		- 					<u> </u>					
흥			e revenue	9				<u> </u>					
=	<u>-</u>					256	<u>,486.</u>	<u> </u>					
	3	Investment income (incl	uding divi	dends	s, interest and	572	0/1					E72	0.41
	4	•	I other program service revenue otal. Add lines 2a-2f vestment income (including dividends her similar amounts) come from investment of tax-exempt income from investment of tax-exempt income services. In a service revenue otal. Add lines 2a-2f vestment income (including dividends her similar amounts) come from investment of tax-exempt in a service revenue of tax-exempt in a service of tax-exempt in a se		hand proceeds	312	<u>,841.</u>					512,	841.
	5		t or tax cx	СПР	bona proceeds:			<u> </u>					
	•	Troyunics [(i) Re	al	(ii) Personal		,			λ			
	6 a	Gross rents							1				
		ļ.	300,	744		م	% .	,					1
		· .	380	9/1/	 		, <u>j</u> ř. 1 -	1	· ·	377		4.70	
				744	•	300	,944.				%	380,	044
i		` [rities	(II) Other		, , , 44.	<u> </u>				300,	344.
	/ a	assets other than inventory .	638	546		, <u>)</u> `	,	- · · ·	1	:4X	₩ .	~4°4,2°	24
- 1	_	Local post or other hasis	050,	<u> </u>				5,8	\$	ş `	₽,	,	
ļ	D	and sales expenses	557	938				ļ ļ					1
ĺ	С	Gain or (loss)						- â	700	*		, ,	<u>}</u> ,]
ĺ	d	Net gain or (loss)			<u> </u>	80	,608.					80	608.
ш		Gross income from fund	draising ev	vents			,					00,	000.
副		(not including \$	ا مساسم ا	<u> </u>				2	\	3.95°)×	*	1.2
		of contributions reported	i on tine	ic).						**	·		
OTHER REVEN		See Part IV, line 18			a			ĺ	Ĭ				
ㅎ		Less direct expenses	4	ا 	P				-				
ļ		Net income or (loss) fro		_	events					. –			
}		Gross income from gam See Part IV, line 19	mig douvi		a								
ļ		Less direct expenses Net income or (loss) fro	m damica	l activi	utios -								
}			-		illes			 					
	10 a	Gross sales of inventory and allowances	, less reti	urns	a								
}	b	Less, cost of goods sold	i		b	_,							
L	С	Net income or (loss) fro		f inve									
Ĺ		Miscellaneous Revenu	ie		Business Code								
ł	11 a		~										
	b							<u> </u>					
[С		_					<u> </u>		<u> </u>			
	d	All other revenue		į	<u> </u>			<u> </u>					
l		Total. Add lines 11a-11d											
	12_	otal revenue. See instructions				5,229	,778.	_ 2	56,486.		0.	1,034,	393.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (C) (**D)** Fundraising (B) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 161,691 161,691 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 443,574 443,574 Benefits paid to or for members 4 Compensation of current officers, directors, trustees, and key employees 13,649 14,398. 143,978 115,931 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 O O 0. 190,687 Other salaries and wages 201,126 10,439 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) a Management **b** Legal 25,165 c Accounting 25,165 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 106,930. 13 Office expenses 106,930 Information technology Royalties. 15 21,052 21,052 16 Occupancy 8,915 Travel 14,295 5,380 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 44,002 27,576 16,426 19 20 Interest Payments to affiliates 21 163,256 Depreciation, depletion, and amortization 163,256 22 23 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) 2,858,702 2,858,702 Scholary research project exp b Misc 8,448 37,610. 46,323 <u> 265</u> 29,818 799 29,019 c <u>Supplies</u> 28,845 2,311 26,534 d Equipment expense 7,596 15,702 8,106 e All other expenses 52,008. 25 Total functional expenses. Add lines 1 through 24e 4,304,459 3,637,799 614,652. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation SOP 98-2 (ASC 958-720)

	•	Check if Schedule O contains a response or note to	any I	ine in this Part X			
					(A) Beginning of year		(B) End of year
\neg	1	Cash - non-interest-bearing			51,656.	1	127,550.
	2	Savings and temporary cash investments			3,024,000.	2	3,414,824.
- 1	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			-	4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	officer nploye	s, directors, ees. Complete		5	:
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	3)(B), (9) vol	and contributing untary employees'		6	
A	7	Notes and loans receivable, net	: rait :	ii oi ochedale L		7	
<u>s</u>	8	Inventories for sale or use				8	
ASSETS	9	Prepaid expenses and deferred charges		9			
•	-		1 1				
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10 a	4,660,013.			, , , , , , , , , , , , , , , , , , ,
	h	Less accumulated depreciation	10 b	3,159,451.	1,589,099.	10 c	1,500,562.
	11	Investments – publicly traded securities.		3/103/1017	4,922,830.	11	5,325,783.
	12	Investments – other securities See Part IV, line 11		İ		12	7
	13	Investments - program-related See Part IV, line 11		13			
	14	Intangible assets	-	14			
ĺ	15	Other assets. See Part IV, line 11	21,928.	15	22,538.		
	16	Total assets. Add lines 1 through 15 (must equal line	34)		9,609,513.	16	10,391,257.
	17	Accounts payable and accrued expenses				17	
1	18	Grants payable		18			
	19	Deferred revenue		19			
ᆡ	20	Tax-exempt bond liabilities		_	- · · · · - · · · · · · · · · · · · · ·	20	_
Ä	21	Escrow or custodial account liability Complete Part I				21	
L-AB-L-F-ES	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, dır d dısqu	ectors, trustees, ualified persons.	2 81 88 44 77	22	
I	23	Secured mortgages and notes payable to unrelated th	urd pa	rties		23	
S	24	Unsecured notes and loans payable to unrelated third		1		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com			1,558,341.	25	1,611,715.
	26	Total liabilities. Add lines 17 through 25			1,558,341.	26	1,611,715.
ZET		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	re ►	X and complete	/ // xx × × ×		,
くいのヨーの	27	Unrestricted net assets			2,035,673.	27	2,234,777.
Ĕ	28	Temporarily restricted net assets			6,015,499.	28	6,544,765.
	29	Permanently restricted net assets		ere ►		29	
R F.		Organizations that do not follow SFAS 117 (ASC 958), cl and complete lines 30 through 34.	*. * *		* * *		
FUZD	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipment	nent fu	ınd		31	
Ļ	32	Retained earnings, endowment, accumulated income	, or oth	ner funds		32	
BALAZCES	33	Total net assets or fund balances			8,051,172.	33	8,779,542.
_	34	Total liabilities and net assets/fund balances			9,609,513.	34	10,391,257.
5							Form 990 (2013

Forn	990 (2013) American Institute of Indian Studies	23-629703	9_	Pa	ige 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,2	29,7	778.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,3	04,4	159.
3	Revenue less expenses Subtract line 2 from line 1	3	9	25,3	319.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,0	51,1	72.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			•
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	-1	96,9	49.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		79,5	
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both	riewed on a	*		; ♦
	Separate basis Consolidated basis Both consolidated and separate basis				
Ł	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se basis, consolidated basis, or both	eparate		*	, ,
	X Separate basis Consolidated basis Both consolidated and separate basis			> /	<i>\$</i>
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audıt,	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule ${\sf O}$			°	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle	3 a	Х	

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

BAA

Form 990 (2013)

3 b

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

			<u>of Indian Stu</u>						_	97039			
Part	1	Reason for Publ	lic Charity Status	(All organizations	must c	omple	<u>te this</u>	part.)	See ir	<u>ıstructı</u>	ons.		
he o	rgar	nization is not a priva	te foundation because	e it is. (For lines 1 throu	ıgh 11, d	check or	ily one b	ox)					
1	П	A church, convention	of churches or assoc	ciation of churches desc	ribed in	section	170(b)(1)(A)(i) .					
2	П	A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E	:)								
3	П	A hospital or a coope	erative hospital servic	e organization describe	d in sec	tion 170	(b)(1)(A)(iii).					
4	Н			in conjunction with a he)(b)(1)(A)(iii) En	iter the hos	pital's	
•	Ш	name, city, and state	-	,	•								
5			ted for the benefit of a	college or university own	ed or ope	erated by	a gover	nmental	unit des	cribed in	section		
6	П			overnmental unit describ	oed in s	ection 1	70(b)(1)	(A)(v).					
7	X	An organization that n		stantial part of its support					the gen	eral publ	ic described	i	
8				70(b)(1)(A)(vi). (Complet	te Part I	i)							
9		from activities related investment income a	to its exempt functions	ore than 33-1/3% of its s - subject to certain excestaxable income (less smolete Part III.)	eptions, a	and (2) n	o more t	han 33-1	1/3% of ı	ts suppoi	rt from aros:	5	ter
10	П			xclusively to test for pu	blic safe	ty See	section	509(a)	(4).				
11		An organization organ	ized and operated excluted organizations des	usively for the benefit of, scribed in section 509(a ion and complete lines	to perfor	m the fu ection 5	nctions o	of, or car	rv out th	e purpos 5 09(a)(3)	es of one or . Check the	box t	hat
		a ∏Type I b	Type II c	Type III - Function	nally inte	grated	c	1 🗍 1	Type III -	– Non-fι	unctionally	ıntegr	ated
е		By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)											
f			eived a written determi	nation from the IRS that i	s a Type	I, Type	II or Typ	e III sup	porting o	organızatı	on,		
g		Since August 17, 200	06, has the organizati	on accepted any gift oi	r contrib	ution fro	m any c	of the fo	llowing	persons	7		
		(i) A person who o	directly or indirectly co erning body of the sup	ontrols, either alone or	together	with pe	rsons de	escribed	l ın (ıı) a	ınd (III)	11 g (i)	Yes	<u>No</u>
			per of a person describ								11 g (ii)		
		\'	•	described in (i) or (ii) al	hovo?								
		• •		e supported organizatio							11 g (iii)		
h							43.5.4.		4.5.1		(vii) Amoun	of mon	etanı
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	s the lation in lation in lation in lated in lated in later ment?	(v) Did yo the organi column (i supp	zation in i	organız colur	s the ation in in (i) ed in the S ?		port	etary
	_				Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(5)					<u> </u>		<u> </u>						
(C)													
<u>` </u>												-	
(D)													
(E)							_	ļ	<u> </u>				
Total	1		~			>			· · ·				

Schedule A (Form 990 or 990-EZ) 2013

Part II 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)

Calendar year (or fiscal year beginning in) -	Sec	tion A. Public Support		-									
## ## ## ## ## ## ## ## ## ## ## ## ##	Cale begi	nning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total					
organization's benefit and either paid to expended eit	1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	4,068,882.	4,511,701.	5,189,574.	5,361,295.	3,938,899.	23,070,351.					
facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. The portion of total contributions by each person (other than a governmental organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2, 234, 274. Public support. Calendar year (or fiscal year beginning in) 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. Section B. Total Support. Calendar year (or fiscal year beginning in) 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. Section B. Total Support. Calendar year (or fiscal year beginning in) 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. Section B. Total Support. Calendar year (or fiscal year beginning in) 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. Section B. Total Support. Calendar year (or fiscal year beginning in) 4, 068, 882. 4, 511, 701. 5, 189, 574. 5, 361, 295. 3, 938, 899. 23, 070, 351. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 55, 364. 74, 956. 661, 415. 614, 789. 1, 034, 393. 2, 440, 917. 10 Other income Do not include gain or loss from the sale of capital assess (Explain in Part IV) 5 11 Total support. Add lines 7 through 10 capital sesses (Explain in Part IV) 6 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (ine 6, column (f) divided by line 11, column (f)) 14 81.67. 83.10. % Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (ine 6, column (f) divided by line 11, column (f)) 14 81.67. 83.10. % Section C. Computation of Public Support Percentage for 2012 Schedule A. Part II, line 14 15 33-1/3% support test – 2013. If the organization did not check the box on line 13, 16a, of 16b, and line 14 is 10% or more, and if the or	2	organization's benefit and either paid to or expended						0.					
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or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	t	33-1/3% support test – 2012. If the and stop here. The organization	the organization d qualifies as a pu	lid not check a bo blicly supported o	x on line 13 or 16 rganization	Sa, and line 15 is 3	33-1/3% or more,	check this box					
or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	17 a	or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how											
		or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the											
	18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions					

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

<u>Sec</u>	tion A. Public Support							
	dar year (or fiscal yr beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions and membership fees							_
	received (Do not include							
	any 'unusual grants ')							
2	Gross receipts from admis-							
	sions, merchandise sold or services performed, or facilities						İ	
	furnished in any activity that is							
	related to the organization's							
9	tax-exempt purpose Gross receipts from activities							—
,	that are not an unrelated trade							
	or business under section 513						_	
4	Tax revenues levied for the							_
	organization's benefit and either paid to or expended on							
	its behalf							
5	The value of services or		<u>-</u>					_
	facilities furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5				-			_
	Amounts included on lines 1,							
	2, and 3 received from							
	disqualified persons							
D	Amounts included on lines 2 and 3 received from other than							
	disqualified persons that	į						
	exceed the greater of \$5,000 or							
	1% of the amount on line 13 for the year							
С	Add lines 7a and 7b					-		_
8	Public support (Subtract line	1 × 2 × 3 × 3 × 5 × 7	6 6 2 6 6 5	Esta Phine	#2# X X X X X		. <u>*</u>	
	7c from line 6.)		7 3	17-14-5 34.48				
Sec	tion B. Total Support							
Calend	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
-	Amounts from line 6							
10 a	Gross income from interest,		,	·				
	dividends, payments received on securities loans, rents,							
	royalties and income from						İ	
	similar sources							
b	Unrelated business taxable income (less section 511							
	taxes) from businesses							
	acquired after June 30, 1975							
	: Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b.							
	whether or not the business is			1				
	regularly carried on							
12	Other income Do not include							_
	gain or loss from the sale of capital assets (Explain in	İ						
	Part IV)							
	Total Support. (Add Ins 9,10c, 11 and 12)	- for No	Alamba Cirk	al Alexand & 11	4.41. 1	5000	(-) (2)	—
14	First five years. If the Form 990 organization, check this box and	stop here	ation's first, secor	ia, tnira, fourth, o	r ππη tax year as	a section 501(c)(3)	П
Sec	tion C. Computation of Pul	blic Support P	ercentage					_
15	Public support percentage for 20	13 (line 8, columi	n (f) divided by lir	ne 13, column (f))		[]	15	ह
16	Public support percentage from 2	2012 Schedule A,	Part III, line 15			1	16	४
Sec	tion D. Computation of Inv							_
17	Investment income percentage for	or 2013 (line 10c,	column (f) divide	ed by line 13, colu	mn (f))	1		१
18	Investment income percentage fi	rom 2012 Schedu	le A, Part III, line	17		1	18	યુ
19 a	33-1/3% support tests — 2013. If	the organization	did not check the	box on line 14, a	ind line 15 is more	e than 33-1/3%	, and line 17	_
	is not more than 33-1/3%, check			•		-		\sqcup
t	33-1/3% support tests – 2012. If line 18 is not more than 33-1/3%	r the organization b, check this box a	aid not check a band stop here. Th	iox on line 14 or li ne organization qu	ne 19a, and line alifies as a public	ib is more that by supported o	n 33-1/3%, and roanization ►	
20	Private foundation. If the organi							H
	•							\Box

Schedule A	(Form 990 or 9	990-EZ) 2013	Americ	an <u>I</u> nst	itute of	Indian	Studies	23-6297039	Page 4
RartilV.	Suppleme or 17b; an (See instri	ental Informa nd Part III, In uctions).	tion. Provie 12. Also	ride the e complete	xplanation e this part	s required for any a	d by Part II, dditional inf	line 10; Part II, line 17a ormation.	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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.

OMB No 1545 0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Publications Employer identification number

Ame	erican Institute of Indian Stu	idi es	23-6297039
		or Advised Funds or Other Similar Fu	
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line	6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dorare the organization's property, subject to the	nor advisors in writing that the assets held in di	onor advised funds Yes No
6	Did the organization inform all grantees, dono	· ·	ds can be used only r purpose conferring
-			les liv
Par	Conservation Easements. Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line	7.
1	<u> </u>		
	Preservation of land for public use (e.g., r	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribution in the foi	rm of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
	Total number of conservation easements		2 a
	Total acreage restricted by conservation ease	ments	2 b
	Number of conservation easements on a certi		2c
		`,	
•	Number of conservation easements included a structure listed in the National Register	ir (c) acquired after 6/17/06, and not on a firsto	2 d
3	Number of conservation easements modified, trait tax year ►	nsferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to conse	ervation easement is located >	<u></u>
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspection, hants it holds?	andling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspenses	ecting, and enforcing conservation easements duri	ing the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that o	nse statement, and balance sheet, and describes the organization's accounting for
Par	t III Organizations Maintaining Colle	ections of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. 8.
16	If the organization elected, as permitted unde art, historical treasures, or other similar assets hi in Part XIII, the text of the footnote to its finar	eld for public exhibition, education, or research in	enue statement and balance sheet works of furtherance of public service, provide,
ı	If the organization elected, as permitted unde historical treasures, or other similar assets held f following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furth	e statement and balance sheet works of art, nerance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, amounts required to be reported under SFAS	historical treasures, or other similar assets for fina 116 (ASC 958) relating to these items.	ncial gain, provide the following
	a Revenues included in Form 990, Part VIII, line	e 1	> \$
1	Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2013 Ameri	can	Institute	of India	n St	udies	23-62	97039		Page 2
Part IIIs Organizations Maintai	ning (Collections	of Art, Histo	orical	Treasures, o	r Other Similar As	sets (c	ontinu	<u>ed)</u>
3 Using the organization's acquisition items (check all that apply).	, access	sion, and other				re a significant use of its	collectio	n	
a Public exhibition			—	or exc	hange programs				
b Scholarly research	ationa		e U Other						
c Preservation for future general Provide a description of the organiz Part XIII		collections and	explain how they	y furthe	er the organization'	's exempt purpose in			
5 During the year, did the organizate to be sold to raise funds rather the	tion sol	icit or receive be maintained	donations of ar	t, histo rganiz	orical treasures, o ation's collection?	or other similar assets	Yes		No
Part IV Escrow and Custodia	l Arrai	ngements.	Complete if t	the o	rganization an	swered 'Yes' to Fo	rm 990), Part	īV,
line 9, or reported an	amour	nt on Form	990, Part X,	line	21.				
1 a Is the organization an agent, trus on Form 990, Part X?						ner assets not included	Yes		No
b If 'Yes,' explain the arrangement	ın Part	XIII and com	plete the follow	ng tab	le				
5						1-	Amoun	<u>t </u>	 -
c Beginning balance						1 c			
d Additions during the year						1 d			
e Distributions during the year						11			
f Ending balance2 a Did the organization include an a	mount	on Form 990	Part Y line 217)			Yes		No
b If 'Yes.' explain the arrangement					as been provided	In Part XIII	☐ 1¢3	·	⊣"
bit res, explain the arrangement	arr arc	All OriceR II	ere ii are explai		as been provided	arr die Am		_	_
Part V Endowment Funds. C	omple	ete if the or	ganization ar	swer	ed 'Yes' to Fo	rm 990. Part IV. li	ne 10.		
	1	Current year	(b) Prior yea	1	(c) Two years bac			Four year:	s back
1 a Beginning of year balance		•							
b Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships									
 Other expenditures for facilities and programs 									
f Administrative expenses									
g End of year balance									
Provide the estimated percentage		current year	end balance (lin	e 1g,	column (a)) held	as			
a Board designated or quasi-endowm	ent -		%						
b Permanent endowment		[%]	0						
c Temporarily restricted endowmen	_								
The percentages in lines 2a, 2b,	and 2c	snould equal	100%						
3a Are there endowment funds not in to organization by	he poss	session of the c	organization that	are hel	d and administered	d for the		Yes	No
(i) unrelated organizations							3a(i)		
(ii) related organizations							3a(ii)		
b If 'Yes' to 3a(ıı), are the related of	_						3b		
4 Describe in Part XIII the intended			ation's endowme	ent fur	ds.				
Part VI			N/ 11 E	000		11 0 5 00			10
Complete if the organi	zatior	n answered	'Yes' to Forn	n 990), Part IV, line	Tia. See Form 95	90, Par	X, III	ie 10.
Description of property		(a) Cos (ın	t or other basis evestment)		Cost or other casis (other)	(c) Accumulated depreciation		Book va	alue ———
1 a Land							1		
b Buildings					3,334,460.	2,340,021.	<u> </u>	994	<u>,439.</u>
c Leasehold improvements									
d Equipment .					1,325,553.	819,430.	-	506	<u>,123.</u>
e Other Total. Add lines 1a through 1e (Column	n (d) =	nust equal For	rm 990 Part Y	colum	n (R) line 10(c) \	•	. 1	E00	,562.
- Primir Aug III C3 Ta HII CUUIT TE (CCIUIT	(U/ II	nusi cuuai i Ui	\dots \cup \cup \cup \cup \cup \cup \cup \cup \cup \cup		· , (), mic ()()				

Schedule **D** (Form 990) 2013

BAA

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12 (a) Description of seating category (reluding name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (d) Method of valuation: Cost or end-of-year market value (d) Costely-held equity inferests (d) Observatives (e) Method of valuation: Cost or end-of-year market value (f) Costely-held equity inferests (g) Description of most goal form 981, Part X column (g) hee 12) (e) Costely-held equity inferests (g) Description of investments — Program Related. (g) Description of investment type (g) Book value (g) Method of valuation: Cost or end-of-year market value (g) Description of investment type (g) Book value (g) Method of valuation: Cost or end-of-year market value (g) Description of investment type (g) Book value (g) Method of valuation: Cost or end-of-year market value (g) Description of investment type (g) Book value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market va	Part VII Investments — Other Securities.	N/11 E 222	N/A	00 D-d-V 1 10
(1) Financial derivatives (2) Closely)-held equity interests (3) Other (4) (4) (5) (6) (6) (7) (7) (8) (8) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10				
(2) Closely-held equity interests (3) Other (4) (6) (6) (7) (6) (7) (7) (8) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		(p) Rook value	(c) Method of valuation: Cost or end-o	r-year market value
(3) Other (A) (6) (7) (8) (8) (9) (9) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (18) (18) (18) (18) (18) (18) (18	• •			
(4) (5) (6) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (10) Total. (Column (b) must equal from 990, Part X, column (B) line 12) (9) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal from 990, Part X, column (B) line 13) (9) Description of investment type (10) (11) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal from 990, Part X, column (B) line 13) (9) (10) Total. (Column (b) must equal from 990, Part X, column (B) line 13) (10) Total. (Column (b) must equal from 990, Part X, column (B) line 15) (10) (10) (10) (10) (10) (10) (10) (10	, ,			
(B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C				
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(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)		· · · · · · · · · · · · · · · · · · ·		
(b) Total. (Column (b) must equal Form 990, Part X, column (B) line 12) Total. (Column (b) must equal Form 990, Part X, column (B) line 12) (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (d) (e) (d) (e) (f) (f) (g) (g) (g) (g) (g) (g				
Total. (Column (b) must equal Form 990, Part X, column (B) inte 12) Total. (Column (b) must equal Form 990, Part X, column (B) inte 12)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part VIII Investments — Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13 (a) Description of investment type				
Part VIII Investments - Program Related. Complete if the organization answered Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13 (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (f) (c) (c) (d) (d) (e) (e) (e) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f		-		
Complete if the organization answered 'Yes' to Form '990, Part IV, line 11c. See Form '990, Part IX, line 13 (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (d) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (d) Method of valuation Cost or end-of-year market value (d) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (d) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year value (e) Method of valuation Cost or end-of-year value (e) Method of valuation Cost or end-of-year value (e) Method of valuation Cost or end-of-year value (e) Method of valuation Cost or en	Part VIII Investments - Program Related.	-	N/A	
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(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 390, Part X, column (B) line 13.) Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15 (a) Description (b) Book value (1) (c) (d) (d) (e) (f) (f) (g) (ii) Total. (Column (b) must equal Form 990, Part X, column (B), line 15) Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description (b) Book value (c) (c) (a) Description (d) Description (d) Description of liability (e) Description (f) Federal income taxes (c) Corpus Fund (d) Corpus Fund (d) Corpus Fund (d) Corpus Fund (e) Description of liability (f) Federal income taxes (f) Federal income taxe	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end	-of-year market value
(3) (4) (5) (6) (7) (8) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) P Part X				
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Schedule D (Form 990) 2013 American Institute of Indian Stud	ies	23-62970	39 Page 4
Part XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per	r Return.	
Complete if the organization answered 'Yes' to Form 990, if			
1 Total revenue, gains, and other support per audited financial statements		11	5,229,778.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d.		2 e	
3 Subtract line 2e from line 1		3	5,229,778.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1	-	3,223,110.
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b	40	4c	
		5	F 220 770
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5,229,778.
Part XII Reconciliation of Expenses per Audited Financial Stateme		er Keturn.	
Complete if the organization answered 'Yes' to Form 990, I	Part IV, line 12a.		
1 Total expenses and losses per audited financial statements		1	4,304,459.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII)	2 d	*	
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	4,304,459.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		\$ 4	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>) </u>	5	4,304,459.
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4 line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also co	mplete this part to provide	any additional	information
BAA		Schedule	D (Form 990) 2013
DAA		Scriedule	U 01111 220/ 2013

Schedule F (Form 990)

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 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(13)

(14)

(15)

(16)

(17)

3 a Sub-total

b Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

American Institute of Indian Studies

Employer identification number

23-6297039

Part I General on Form	Information on 990, Part IV, II	Activitie ne 14b.	es Outside the	e United Sta	tes. Complet	e if the organization	n answered 'Yes'
						rants and other assistance	
2 For grantmakers United States		the organiz	ation's procedures	s for monitoring t	the use of its grai	nts and other assistance	outside the
3 Activities per Re	gion (The following	ıg Part I, lıı	ne 3 table can be	duplicated if a	idditional space	ıs needed.)	
(a) Region	office	ımber of is in the gion	(c) Number of employees, agents, and independent contractors in region	region (by fundraising services, ir	conducted in type) (e g , g, program ivestments, recipients he region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
				_		Lang;	
(1) South Asia		14	125	Program S	ervices	research	3,708,573.
(2)							
(3)							
(4)			<u> </u>				
(5)							
(6)				,			
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(11)							· · · · · · · · · · · · · · · · · · ·
(12)							

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

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3,708,573. Schedule **F** (Form 990) 2013

3,708,573.

125

125

23-6297039

Schedule F (Form 990) 2013 American Institute of Indian Studies

Part II 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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(5)	**							
(2)								
(3)								
(4)								
(9)								
(9)	\$							
6						:		
(8)								
(6)	2,							
(10)	**							
(11)	❖							
(12)								
(13)	**							
(14)								
. (15)								
(16)								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which	tions listed above that a	re recognized as chai	rities by the foreig	in country, recognize	ed as tax-exempt by	the IRS, or for whi	L S	

Schedule F (Form 990) 2013

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

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Page 3

Schedule F (Form 990) 2013 American Institute of Indian Studies

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

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2013 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 443,574. Check, EFT (d) Amount of cash grant 48 (c) Number of recipients (b) Region South Asia Fellowships for research in (a) Type of grant or assistance (1) India (18) BAA 3 ල € 3 9 ϵ 8 6 60 <u>E</u> (12)(13) (14) (12) (91) (1)

Sche	dule F (Form 990) 2013 American Institute of Indian Studies	23-6297039	Page 4
Păr	KIV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Ce Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	rtaın Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Ce Foreign Corporations. (see Instructions for Form 5471)	rtaın Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qual electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	fied Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	¹ ∐Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

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Part V	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 (see instructions).
Part	l, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US
Stip	end and research and travel allowance are paid to AIIS Fellows from the date of
arri	val in India until the completion of the fellowship period. This is subject to
the	scholar's physical stay in India; no payment is made for stay out of India. There
is_r	o accounting requirement except acknowledgement of payments made. However all
fell	owship awardees are required to submit quarterly reports and a final report on
thei	r research project that indicates the activities, achievements, and outcome of
the	project in full detail.

Schedule **F** (Form 990) 2013 American Institute of Indian Studies

23-6297039

Page 5

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations. Govern

OMB No 1545-0047 2013

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ted States	. IV, line 21 or 22.	
ruments, and Individuals in the United States	if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.	► Attach to Form 990.

(h) Purpose of grant or assistance Open to Public **Employer identification number** XXes Partill Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 23-6297039 Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of non-cash assistance See Part IV (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Enter total number of other organizations listed in the line 1 table Partila General Information on Grants and Assistance Complete American Institute of Indian Studies (e) 1 (a) Name and address of organization or government | | Department of the Treasury Internal Revenue Service 1 Name of the organization 1 1 (L) 3 €, <u>୍</u>ଚ 3 9 6 8

Schedule I (Form 990) (2013)

TEEA3901L 07/12/13

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

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BAA

Schedule I (Form 990) (2013)

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

OMB No 1545-0047

2013

Open To Public Inspection

Name of the organization

Employer identification number

	erican Institute of Indian Studio	es		23-	629703	9		
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	od of o	d) determir bution a	ing mounts
1	Art — Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles		<u> </u>					
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	1	25,013.	Market	. va	lue	
10	Securities - Closely held stock			•				
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution – Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate – Residential							
16	Real estate — Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens		<u> </u>					
24	Archeological artifacts	ĹI			Ĺ <u> </u>			
25	Other ► ()	ļ <u> </u>		·		_		
26	Other ► ()							
27	Other ► ()			·				
28	Other► (
29	Number of Forms 8283 received by the organization of organization completed Form 8283, Part IV, Done			r which the	29			r
					ı		Yes	No
308	During the year, did the organization receive by contribution of the initial burnesses for the entire helding period?				:	20.0		·
	purposes for the entire holding period? of If 'Yes,' describe the arrangement in Part II		•			30 a		X
	_	ov that rooms	as the review of any n	on-standard contributio	ne?	21		
	Does the organization have a gift acceptance police				112.	31		X
	n Does the organization hire or use third parties or in noncash contributions?	elated organ	izations to solicit, proc	ess, or sell		32 a		Х
	o If 'Yes,' describe in Part II	(a) for a him	o of proporty for which a	aluma (a) is shooted				
33	If the organization did not report an amount in column	ic) for a type	or broberry for writch c	orumin (a) is checked,			ŀ	ı 1

describe in Part II.

Schedule I	M (Form 990) 2013	American	Institu	te of I	ndian S	tudies		23-629703	9 Page 2
Part II	Supplemental the organization received, or a contraction of the supplemental through the supplem	Information. Find the second s	Provide the in Part I,	e informa column (l	tion requo), the nu	ured by Part umber of cor	I, lines 30b, tributions, th	32b, and 33, e number of	and whether items
	received, or a c								
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TEEA4602L 06/27/13

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Schedule M (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

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.

2013

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

23-6297039 American Institute of Indian Studies Form 990, Part III, Line 1 - Organization Mission Dedicated to the advancement of knowledge about India and the promotion of intellectual engagement with India in American universities by providing research fellowship support, training in Indian languages, knowledge of Indian culture, and supporting publications about India. Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder 80 American colleges and universities support_research_in_India as members of the American Institute of Indian Studies. Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body Trustees of Member Institutions annually elect the Officers and Members of the Executive Committee (governing body) Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders Institutional members participate in the governance of the American Institute of Indian Studies, the election of its officers, and the setting of its policies and priorities. Form 990, Part VI, Line 9 - Officer, Director, Trustee, Key Employee Mailing Address See Statement 1 for list of Officers, Executive Committee Members, Committee Chairs, and Trustees with their respective addresses. Form 990, Part VI, Line 11b - Form 990 Review Process Return is sent to President, Treasurer and US Director for their review and signing. Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts Each director, principal officer and member of a committee with Trustee delegated powers shall annually sign a statement which affirms such person has received a copy of the conflict of interest policy, has read and understands the policy, and has agreed to comply with the policy. If the Board of Trustees or Executive Committee has reasonable cause to believe a member has failed to disclose actual or possible

2013

Schedule O - Supplemental Information

Page 1

American Institute of Indian Studies

23-6297039

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Currency translation adjustment

\$ -196,949. Total \$ -196,949.

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