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# Form **990**

EXTENDED TO MAY 15, 2017

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047

	Intern	al Revenu	e Service	► Information about	Form 990 and its Instruct	tions is at www.l	rs.gov/form990.		Inspection
	A F	or the	2015 calend	iar year, or tax year beginning	JUL 1, 2015	and ending	JUN 30, 20	16	
	B c	heck if pplicable:		f organization			D Employer Ide		on number
	Ε	Address	TAIME	RNATIONAL STUDIES	Z ZCCOCTAMTON	TNO			
	<b>;</b> =	chaude   Marue   Tousude		usiness as	ADDUCTATION,	TIAC.	97	7_048	5763
	늗	_ichange _initial _return		r and street (or P.O. box if mall Is not	dalivered to etreet address)	Room/suite			3703
	<u> </u>	]Final		OF CT, 337 MANS	•	1013			486-5850
	ــــ	lreturn/ termin- ated		own, state or province, country, a			G Gross receipts \$		3,572,294.
	Γ	Amende Treturn		RS, CT 06269-101	- •	46	H(a) Is this a gro		
		⊒return ]Applica _Ition		ind address of principal officer: JI		ET.T.A			Yes X No
	٠	beugput Triou		AS C ABOVE		11111111			led? Yes No
03	1.7	ax-axer		X 501(c)(3) 501(c)(	)◀ (insert no.)	7(a)(1) or 52	-		. (see instructions)
0)				ISANET.ORG		7-7-7	H(c) Group exer		•
را				X Corporation Trust	Association Other	L Year			ate of legal domicile; CT
(>>=			Summary						
2017		1 B	riefly describ	oe the organization's mission or m	ost significant activities: C	ONNECTING	SCHOLARS	3,	
	ance			CIONERS AND STUDE					
<b>୍ଷ</b>	23	2 0	heck this bo	x large if the organization dis	continued its operations or	disposed of mor	e than 25% of its r	ıet aşset	s.
	Gove	3 N	lumber of vo	ting members of the governing bo	dy (Part VI, line 1a)	<b></b>	<b>a</b> 2017	3	56
30%	ঞ প	4 N	lumber of inc	dependent voting members of the	governing body (Part VI, lin	ie 1b),'''	-	4	56
=		5 T	otal number	of individuals employed in calend of volunteers (estimate if necessa	ar year 2015 (Part V, line 2a	a)	A FAITHTY DEP	5	2
0	<b>Ctivities</b>	6 T	otal number	of volunteers (estimate if necessa	ry)	RECEIVE	DEMILL DE	6	50
	₹	7а Т	otal unrelate	d business revenue from Part VIII	column (C), line 12	•		7a	0.
\$	_	bЛ	let unrelated	business taxable income from Fo	rm 990-T, line 34			7b	0.
SCANNED						<b>)</b>	Prior Year		Current Year
	Q			and grants (Part VIII, line 1h)				0.	510,600.
(J)	ğ,			ice revenue (Part VIII, line 2g)			2,494,76		2,651,982.
	Revenue			come (Part VIII, column (A), lines 3			36,06		43,424.
				e (Part VIII, column (A), lines 5, 6d,			41,00		37,983.
				· add lines 8 through 11 (must eq			2,571,82		3,243,989.
				milar amounts pald (Part IX, colum			<del></del>	0.	
9				to or for members (Part IX, column r compensation, employee benefit			1,068,87	<del></del>	1,244,065.
300	Ses			undraising fees (Part IX, column (A			1,000,01	0.	0.
9	Expenses			ing expenses (Part IX, column (D),		·····	<del></del>	·-	<u>0.</u>
ر <sup>ا</sup> \	ă			es (Part IX, column (A), lines 11a-1			1,737,47	70	1,626,283.
7		18 T	otal expense	es. Add lines 13-17 (must equal Pa	rt IX. column (A) fine 25)	)	2,806,34		2,870,348.
		19 R	evenue less	expenses. Subtract line 18 from li	ne 12		-234,52		373,641.
į ·	Ses				MAY 0 5 20		eginning of Current		End of Year
. 7	Assets Bazance		otal assets (F	Part X, line 16)	100	" ka F	4,424,45		4,759,613.
A ,			-	(Part X, line 26)	ORDER :		176,19		121,694.
	Per Per	22 N	et assets or	fund balances. Subtract line 21 fr	om line 20		4,248,26		4,637,919.
<del>ز -</del>	Pa		Signature						
ar)	Unde	er penalt	les of perjury,	I declare that I have examined this retu	rn, including accompanying so	chedules and stater	nents, and to the bes	of my kn	owledge and belief, it is
ري	true,	correct,	and complete	. Declaration of preparer (other than of	ficer) is pased on all informatio	on of which prepare	r has any knowledge	<u>.</u>	
<u></u> ,	Clas		Signatur	Muses fouta	meller		Date 5	[1]17	
	Sign		*	IFER FONTANELLA,	DIRECTOR OF O	PERATIONS		NCE	
W W	1101			print name and title	<u> </u>	-	J 11112 L 1111	4104	
<b>W</b>		- 1	Print/Type pre	parer's name	Preparer's signature	2	Date / / Che	ct	PTIN
_ 	_Paid			G. ANDREWS			4 //// TIM		P00634334
	Prep		irm's name		DLEY, PC		Firm's Ell		6-0903326
	Use	_		280 TRUMBULL ST		<del>,</del>			
				HARTFORD, CT 06			Phone no	.860.	522.3111
	May	the IRS	3 discuss this	s return with the preparer shown a			***************************************	11.11.1.1.1.1	X Yes No
		01 12-16-		For Paperwork Reduction Act No		tructions.			Form <b>990</b> (2015)

Form	990 (2015) INTERNATIONAL STUDIES ASSOCIATION, INC.	87-0485763	Page 2
Pa	rt III Statement of Program Service Accomplishments		<u> </u>
<u>-:</u> -	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 Q		
•			
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program 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 services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, If any, for each program service reported.  (Cods: ) (Expenses \$ 683,998 • Including grants of \$ ) (Revenue)		600.)
4a	(Code:) (Expenses \$683,998. Including grants of \$) (Reven MEMBERSHIP: MEMBERSHIP GIVES THE BENEFIT OF ACCESS TO SO PRACTITIONERS FROM AROUND THE GLOBE.		000.)
			<del></del>
			<del></del>
4b	(Code: ) (Expenses \$ 1,074,765. Including grants of \$ ) (Reven CONVENTIONS: THE GOAL OF THE 12-14 CONFERENCES PER YEAR SCHOLARS AND PRACTITIONERS FROM AROUND THE GLOBE TOGETH AND DISSEMINATE INDIVIDUAL RESEARCH.	IS TO BRING	
4c	(Code: ) (Expenses \$ 591,468 · Including grants of \$ ) (Revenue)		
	PUBLICATIONS: PROMOTE OUR MISSION FOR THE EXCHANGE OF IN PUBLISHES 7 JOURNALS AND 1 ENCYCLOPEDIA ANNUALLY. JOURNAL	NFORMATION. ALS ALLOW	ISA
	MEMBERS A COMMUNITY OF SCHOLARS FOR PUBLICATION OF RESE	ARCH.	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		
40	Total program service expenses ► 2,350,231.		
63200	2	Form 9	90 (2015)

Par	TIV   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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u>X</u>
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			
	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 _	·	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		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?	l		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	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.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	}		
a		11a	х	
	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	ı ıa		
Ь	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		-A-
C	· · · · · · · · · · · · · · · · · · ·	11c		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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	110	<del></del>	
a	Part X, line 16? If "Yes," complete Schedule D, Part IX	444		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		<u> </u>
f				x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ا ـمـ ا	x	
	Schedule D, Parts XI and XII	12a		
Þ	Was the organization included in consolidated, independent audited financial statements for the tax year?	404		~
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			\ <sub>**</sub>
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX,			<b> </b>
	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	<u></u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ļ		
	complete Schedule G, Part IIL	19		<u> </u>

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1,50	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
2i -	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
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			İ
	Schedule J	23		х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			<del></del> -
£.TU	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
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			<del>                                     </del>
U	any tax-exempt bonds?	24c	Į	
	Did the organization act as an "on behalf of" Issuer for bonds outstanding at any time during the year?	24d		$\vdash$
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270	<del> </del>	<u> </u>
<b>2</b> 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	<u>zva</u>		1
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	ì	Ì	1
		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	230	<del> </del>	
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			1
		26		x
07	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		-
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	}		ì
	0.4.04 5 1.04 1.1.1.00 4.11	27		x
28	was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		-
20	Instructions for applicable filing thresholds, conditions, and exceptions):			
_		28a		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	<b></b>	A
G	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	x
20		29	<del> </del>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28	├	-
30	contributions? If "Yes," complete Schedule M	30	1	x
04	Did the organization liquidate, terminate, or dissolve and cease operations?	30		A
31			ļ	v
20	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	<del> </del>	<u>X</u>
32		32		x
99	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		A
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		_A
34	· · · · · · · · · · · · · · · · · · ·	م ا	]	
۸۲	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.56		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<del> </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
o	If "Yes," complete Schedule R, Part V, line 2	36	<del> </del>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
. 38_	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197		· v	]
	Note. All Form 990 filers are required to complete Schedule O	38	X	/og + =
		L-OLL	マサン	(2015)

532005

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

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

Form 990 (2015)

Form 990 (2015) INTERNATIONAL STUDIES ASSOCIATION, INC. 87-0485763 Page 6

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.

:	to and day, out, or root but on, accounts and one data control of the state of the			
	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
•	1 1	,	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			İ
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
þ	Enter the number of voting members included in line 1a, above, who are independent		ı	1
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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		X
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				
	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	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<del></del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
<del></del> -	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.)	<del></del> -		·
	DI I II a constanti di sub superiore in constanti di superiore di supe		Yes	No
10a		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
11a	· · · · · · · · · · · · · · · · · · ·	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		v	1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	37
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			37
40	in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_			v	l
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a	X	<del> </del>
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		<del></del>
10-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
IVa		400		x
<b>.</b>	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1 1	,	1
	exempt status with respect to such arrangements?	405		ĺ
Sec	tion C. Disclosure	16b		<del></del>
17	List the states with which a copy of this Form 990 is required to be filed <b>CT</b>			
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	vellah		
10	for public inspection. Indicate how you made these available. Check all that apply.	.valiav	.0	
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	riel	
_19		mail	ादा	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
ZV	JENNIFER FONTANELLA - (860) 486-5850			
	UNIV, OF CT, 337 MANSFIELD ROAD, UNIT 1013, STORRS, CT 06269-1	013		
<del></del>	ONIV. OF CI, 337 MANDFIEDD NOAD, UNII 1013, SIORRS, CI 00203-1		990	(2015)

Form 990 (2015)	INTERNATIO	ONAL STUDI	ES ASSOCIAT	rion, inc.	87-0485763	Page 7
Part VII Companes	tion of Officers Di	rectore Truste	es Key Employe	age Highest Com	nancated	

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.

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

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

(A) Name and Title	(B) Average hours per week	(do	not c	(C) Position check more than one as person is both an and a director/trustoo)				(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу епрюува	High est compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) T.V. PAUL	5.00	,,								
PRESIDENT	5.00	X		X			-	0.	0.	0.
(2) BRETT ASHLEY LEEDS	3.00	x		x	}		}	0.	o.	0.
PRESIDENT BLECT	5.00	^	├-	_		<del> </del> —		·		<u></u>
(3) PAUL F DIEHL PAST PRESIDENT	3.00	x	ł	x	ł	1	ļ	0.	0.	0.
(4) KELLY M KADERA	5.00	**	├-	**	<b> </b>	-		<u>.</u>	•	<u>.</u>
VICE PRESIDENT		X		x				0.	0.	0.
(5) KUMIKO HABA	5.00			-		-		<del></del>		
VICE PRESIDENT		X		X				0.	0.	0.
(6) LAYNA MOSLYE	5.00									
VICE PRESIDENT		X	نے ا	X				0.	0.	0.
(7) T CLIFFTON MORGAN	5.00									
TREASURER		X		X				0.	0.	0.
(8) ANN E. TOWNS	5.00									
GOVERNING COUNCIL MEMBER AT LARGE		X	<u> </u>			<u> </u>		0.	0.	0.
(9) BELGIN SAN AKCA	5.00		ļ							
GOVERNING COUNCIL MEMBER AT LARGE	ļ	X	<u> </u>			<u> </u>		0.	0.	0.
(10) DAVID HORNSBY	5.00								_	_
GOVERNING COUNCIL MEMBER AT LARGE		X	ļ					0.	0.	0.
(11) MELY C, ANTHONY	5.00									_
GOVERNING COUNCIL MEMBER AT LARGE	F 00	X	<u> </u>			<u> </u>		0.	0.	0.
(12) OMAR MCDOOM	5.00	x						_		_
GOVERNING COUNCIL MEMBER AT LARGE	1.00	Λ	<del> </del>					0.	0.	0.
(13) ALYNNA LYON	1.00	x	\					0.	0.	0
MEMBER AT LARGE	1.00	^	-			-		<u>U•</u>	0.	0.
(14) AMANDA MURDIE MEMBER AT LARGE	1.00	$\mathbf{x}$						0.	0.	0.
(15) AMY B. ECKERT	1.00		<u> </u>							<u>0.</u>
MEMBER AT LARGE		X.						0.	-0.	0.
(16) ANDRE BROOME	1.00	-							<u></u>	
MEMBER AT LARGE		х						0.	0.	0.
(17) ANNETTE FREYBERG-INAN	1.00									<del>-</del>
MEMBER AT LARGE		X						0.	0.	0.
532007 12-18-15						140				Form <b>990</b> (2015)

<u> </u>					sponse	or note to any li	ine in this Part VIII			🖂
			Check if Schedule O con				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इस	1	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues		1b	510,600				
A.G.		C	Fundraising events		1c			1		
まる			Related organizations		1d				-	
SE E			Government grants (contribut		10			]		
Sp			All other contributions, gifts, gran					1		
是是			similar amounts not included abo		11					
Ēδ		a	Noncash contributions included in lines		<del></del>		1			
SE		_	Total, Add lines 1a-1f				510,600.			
		-				Business Code			······································	
Φ.	2	a	CONVENTIONS					1,335,103.		
Ş			PUBLICATIONS	·		900099	1,316,879.	1.316.879		
Program Service Revenue		c								
E S		d								
ğœ		e								
g.		ť	All other program service reve	enue						
			Total. Add lines 2a-2f				2,651,982.	<u> </u>		<del></del>
	3	_	Investment income (including						<del></del>	
			other similar amounts).				76,165.			76,165.
Ì	4		Income from investment of ta				707200	<del></del>		7072030
	5		Royalties	•	•			<del></del>	<del></del>	
			, loyando ,,,,,,		Real	(ii) Personal				
	6	_	Gross rents		100.	(ii) t Orderical	1			
	_		Less: rental expenses			<del> </del>	1		·	
			Rental income or (loss)			<u> </u>	-	1	:	
			Net rental income or (loss)			·	1	1		
			Gross amount from sales of		urities	(ii) Other	<del> </del>			
	•	a	assets other than inventory	295,			1			
		<b>.</b>	Less, cost or other basis	277	504.		†			İ
			and sales expenses	294	305.	34 000				
		_	Gain or (loss)	1	259	-34 000	3			
i			Net gain or (loss)				-32,741.			-32,741.
_			Gross Income from fundraisin				32,741.		· · · · · · · · · · · · · · · · · · ·	34,141.
enne	٥	u	including \$	_	•	1				
ē.			contributions reported on line				Ì	)		
æ			Part IV, line 18	*						
Other Rev		h	Less: direct expenses				7	Į į		
δ			Net income or (loss) from fund				-			
			Gross income from gaming ac	_						<del></del>
		<b></b>	Part IV, line 19			}				
		h	Less: direct expenses				1			
			Net income or (loss) from garr			<b></b>				
			Gross sales of inventory, less	-		1	<del></del>			
		•	and allowances		a					
		h	Less: cost of goods sold			E .	1			
			Net income or (loss) from sale			<u> </u>	1	Ì		
:		<u></u>	Miscellaneous Revenu		ittory .	Buşiness Code				
	11		OTHER INCOME			900099	37,983.	37,983.		
		a b	OTHER INCOME			30000	37,703.	3,,,,,,,		
		C C	<del></del>							<del> </del>
			All other revenue				<u> </u>			<del></del>
			Total. Add lines 11a-11d				37,983.			
	12	J	Total revenue. See instructions.					2.689 965	0.	43,424.
53200		-16		-12-11111111	********	1. <u>1</u> 1. 11. 11. 11. 11. 11. 11. 11. 11. 11.				Form <b>990</b> (2015)

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 (B) Program service expenses (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses 7b. 8b. 9b. and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, fine 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 76,000. trustees, and key employees ...... 53,200. 22,800 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 861,941 603.359. 258,582 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 262,417 183,692. 78,725 Other employee benefits ..... 43,707 30,595. 13,112. 10 Payroll taxes ..... Fees for services (non-employees): 11 Management ..... Legal ..... Accounting Lobbying ..... Professional fundraising services. See Part IV, line 17 Investment management fees \_\_\_\_\_ Other. (If line 11g amount exceeds 10% of line 25, 102,711. 51,356. 51,355 column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion ..... 12 5,935 1,781. 4,154. Office expenses..... 13 Information technology ..... 14 15 Royaltles 16 Occupancy ..... 86,515, 51,909. 34,606. 17 . ..... ..... 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 703,088. Conferences, conventions, and meetings 703,088. 19 20 Payments to affiliates ..... 21 2,142 2,142 22 Depreciation, depletion, and amortization 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.) 364,231 364,231 GIFTS AND AWARDS 297,378. 297,378. **PUBLICATIONS** OTHER EXPENSES 64,283. 9,642. 54,641 All other expenses 2,870,348. 2,350,231. 520,117. Total functional expenses. Add lines 1 through 24e 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

rt X	Balance Sheet			<del></del>		
	Check if Schedule O contains a response or not	e to any lin	e in this Part X		<del></del>	
				(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing			921,782.	1	1,753,950
2	Savings and temporary cash investments			376,048.	2	402,664
3	Pledges and grants receivable, net			3		
4	Accounts receivable, net			67,857.	4	23,37
5	Loans and other receivables from current and for					
1	trustees, key employees, and highest compensations	yees. Complete		1		
[	Part II of Schedule L		5			
6	Loans and other receivables from other disquali					
-	section 4958(f)(1)), persons described in section		. (			
	employers and sponsoring organizations of sect		· ·			
ł	employees' beneficiary organizations (see instr).		•		6	
7	Notes and loans receivable, net				7	
В	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges				9	
1	Land, buildings, and equipment: cost or other	1	·····		-	
104	basis. Complete Part VI of Schedule D	100	14 997			
Ì .	Less: accumulated depreciation	10a	2,142.	34,001.	400	12,85
ſ				3,024,764.	11	2,566,76
11	Investments - publicly traded securities			J, 024, 104.		2,300,10
12	Investments - other securities. See Part IV, line				12	
13	investments - program-related. See Part IV, line			13		
14	Intangible assets			14		
15	Other assets. See Part IV, line 11		4,424,452.	15	A 750 61	
16	Total assets, Add lines 1 through 15 (must equ			4,424,452.	16	4,759,61
17	Accounts payable and accrued expenses		<del></del>	17	8,46	
18	Grants payable	l''	142 005	18	112 22	
19	Deferred revenue			143,025.	19	113,23
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete I			<del></del>	21	
22	Loans and other payables to current and former					
	key employees, highest compensated employee					
	Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrela				23	
24	Unsecured notes and loans payable to unrelated				24	
25	Other liabilities (including federal income tax, pa	-			1	
	parties, and other liabilities not included on lines	17-24). Co	mplete Part X of	44 44 -		
]	Schedule D			33,165.		
26	Total liabilities. Add lines 17 through 25			176,190.	26	121,69
	Organizations that follow SFAS 117 (ASC 958		ere ▶ LX and			
İ	complete lines 27 through 29, and lines 33 an					
27	Unrestricted net assets			4,233,262.		4,628,41
28	Temporarily restricted net assets			15,000.	28	9,50
29					29	
	Organizations that do not follow SFAS 117 (A	SC 958), cl	heck here		1	
	and complete lines 30 through 34.		1			
30	Capital stock or trust principal, or current funds				30	
31	Pald-in or capital surplus, or land, building, or eq				31	
32	Retained earnings, endowment, accumulated in				32	
33	Total net assets or fund balances			4,248,262.	33	4,637,91
34	Total liabilities and net assets/fund balances			4,424,452.	34	4,759,61

	990 (2015) INTERNATIONAL STUDIES ASSOCIATION, INC.	87-048	5763	Pag	<sub>е</sub> 12
Pai	rt XI Reconciliation of Net Assets				
	Check If Schedule O contains a response or note to any line in this Part XI				
-					
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>3,243</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,870		
3	Revenue less expenses. Subtract line 2 from line 1	3		6,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,248		
5	Net unrealized gains (losses) on investments	5	16	$\frac{5}{0}$	<u> 16.</u>
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)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	İ			
	column (B))	10	4,637	7,9	<u>19.</u>
Pa	rt XII Financial Statements and Reporting				
	Check If Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	} }	ì	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1	1	
b	Were the organization's financial statements audited by an independent accountant?	•••••	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	1 (		
	consolidated basis, or both:		1 1	ļ	
	X Separate basis Consolidated basis Both consolidated and separate basis		1 1	- (	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1 [	ļ	
	review, or compilation of its financial statements and selection of an independent accountant?	,	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	1 1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit		i	
	Act and OMB Circular A-133?	•••••	3a		_X_
b	if "Yes," dld the organization undergo the required audit or audits? If the organization did not undergo the requ		1 T	Ī	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	9 <b>90</b> (	2015)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. 1646-0047

Open to Public Inspection

10111	0 OI D	ne organización						Limpicyon	Monunioadon nambe	••
				STUDIES ASSO					7-0485763	_
Pai	rt I	Reason for Public	Charity Status	All organizations must c	omplete th	ils part.) S	ee Instruction	8.		
The c	organi	ization is not a private found	dation because it is:	(For ilnes 1 through 11,	check only	one box.)				
1		A church, convention of ch	nurches, or association	on of churches describe	d in sectio	on 170(b)(	1)(A)(I).			
2	ᆜ	A school described in sect	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Fon	n 990 or 9	90-EZ).)				
3		A hospital or a cooperative								
4		A medical research organization	zation operated in co	onjunction with a hospita	l describe	d in sectio	n 170(b)(1)(A	)(iii), Enter	the hospital's name,	
		city, and state:								
5		An organization operated f	for the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit describ	oed in	
		section 170(b)(1)(A)(iv). (	Complete Part II.)							
6		A federal, state, or local go	vernment or govern	mental unit described in	section 1	70(b)(1)(A)	(v).			
7		An organization that norma	ally receives a substa	antial part of its support	from a gov	emmental	unit or from t	he general	public described in	
		section 170(b)(1)(A)(vi). (C			•			•	•	
8		A community trust describ		(1)(A)(vi). (Complete Par	t II.)					
9	X	An organization that norma				contributi	ons, member	ship fees, a	and gross receipts from	n
		activities related to its exer						-	-	
		Income and unrelated busi								
		See section 509(a)(2). (Co		•		•	•	•		
10		An organization organized	and operated exclus	sively to test for public sa	afety. See	section 50	09(a)(4).			
11		An organization organized						arry out the	purposes of one or	
		more publicly supported or						•	• •	
		lines 11a through 11d that	describes the type of	of supporting organization	n and con	nplete lines	s 11e, 11f, an	d 11g.		
а		Type I. A supporting org						_	giving	
		the supported organizati	ion(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or truste	es of the s	supporting	
		organization. You must								
b		Type II. A supporting org	ganization supervised	d or controlled in connec	tion with i	ts support	ed organizatio	on(s), by ha	ving	
		control or management of	of the supporting org	anization vested in the s	ame pers	ons that co	ontrol or mana	ge the sup	ported	
		organization(s). You mus	st complete Part IV,	Sections A and C.						
C		Type III functionally inte	e <b>grated.</b> A supportin	g organization operated	in connec	tion with,	and functiona	lly integrate	ed with,	
		its supported organization	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.			
d		Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	rted organi	zation(s)	
		that is not functionally in	tegrated. The organiz	zation generally must sa	lisfy a dist	ribution re	quirement an	d an attent	lveness	
		requirement (see instruct	tions). You must cor	nplete Part IV, Sections	A and D	and Part	V.			
0		Check this box if the orga	anization received a	written determination fro	m the IRS	that It is a	Type I, Type	II, Type III		
		functionally integrated, o								
f	Ente	r the number of supported	organizations	•••••						
g	Prov	ide the following information	n about the supporte							_
	(1)	) Name of supported	(II) EIN	(iii) Type of organization	(iv) is the c	rganization	(v) Amount of	•	(vi) Amount of	
		organization	Į į	(described on lines 1-9 above (see instructions))	governing	n your document?	support		other support (see	
					Yes	No	instruct	ions)	Instructions)	
										_
				<del>-</del>						
										_
		<del></del>								
										_
otal	<u></u>					L i				

Schedule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES ASSOCIATION, INC. 87-0485763 Page 2 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 falled to qualify under Part III. If the organization falls to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2015 (a) 2011 (b) 2012 (c) 2013 (f) Total Calendar year (or fiscal year beginning in) (d) 2014 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") ..... 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 6 Public support, Subtract line 5 from fine 4 Section B. Total Support (e) 2015 Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (f) Total 8 Gross income from interest, dividends, payments received on securitles loans, rents, royalties and income from similar sources Net income from unrelated business 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 VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) % % 16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2015

18 Private foundation, if the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ......

## Schedule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES ASSOCIATION, INC. 87-0485763 Page 3 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.) Section A. Public Support Catendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 238,653. 401,049. 420,472. 416,557. 510,600. 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 1,793,677 2,855,503 2,099,518 2,078,203 2,651,982, 11,478,883. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organbation's benefit and either paid to or expended on its behalf ..... 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 ...... 2,032,330 3, 256, 552, 2,519,990 2,494,760 3,162,582 13,466,214, 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 0. 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 ..... 0. 8 Public support. (Subtract line 7c from line 8) 13,466,214. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 9 Amounts from line 6 ..... 2.032.330 3,256,552 2,519,990 2,494,760 3,162,582 13,466,214, 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 24,549 29,500. and income from similar sources 41,952. 76,165. 172,166. b Unrelated business taxable Income (less section 511 taxes) from businesses acquired after June 30, 1975 24,549. 29,500. 41,952. 76,165. 172,166. 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 VI.) ....... 3.286.052. Total support. (Add lines 9, 10c, 11, and 12.) 2,056,879, 2.561,942, 2,494,760 3,238,747. 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 stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 98.74 % Public support percentage from 2014 Schedule A, Part III, line 15 93.86 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) 1.26 17 % 18 Investment income percentage from 2014 Schedule A, Part III, line 17 18 19a 33\_1/3%\_support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ...... b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ..... 20 Private foundation, if the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2015 532023 09-23-15

## Schedule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES ASSOCIATION, INC. 87-0485763 Page 4 Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

			4
Section	A. All Sup	porting Organizations	

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
<u> </u>		
2		
3a_		
3b		
1		<del></del>
3c	<u> </u>	
4a_		
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	rdule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES ASSOCIATION, INC. 87-04	8576	3 P	1 <b>9</b> e 5
rai	rt IV   Supporting Organizations (continued)		Voc	No
11	Has the organization accepted a gift or contribution from any of the following persons?	[ <del></del>	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations		· · · · · · · · · · · · · · · · · · ·	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	l	1	
	controlled the organization's activities. If the organization had more than one supported organization,		}	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	Į		l
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_1_	ļ	
2	Did the organization operate for the benefit of any supported organization other than the supported		İ .	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	}		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	<u> </u>	<u> </u>
Sec	tion C. Type II Supporting Organizations		1.	
	the state of the s		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ļ		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1	1	}
	or management of the supporting organization was vested in the same persons that controlled or managed			
Soc	the supported organization(s). tion D. All Type III Supporting Organizations	1_1_	٠	<u> </u>
500	non b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		168	INO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	l	1	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	ļ	}	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			<b> </b>
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	Ì	i	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	1	1
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	İ	1	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	1	ļ	
	supported organizations played in this regard.	3	<u> </u>	
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below.			
¢	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instance)	tructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		}	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify	l		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		-	
	that these activities constituted substantially all of its activities.	2a	├	<del>                                     </del>
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	ł		ļ
		]	1	Ì
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	ΩL	1	]
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b	1	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	ļ
a	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a	1	1
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- va	1-	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	[

	dule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES A			37-0485763 Page 6
Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting			<del></del>
.1	Check here if the organization satisfied the Integral Part Test as a qualifyin	-		uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	T
Seot	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1_	Net short-term capital gain	1		<u> </u>
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3	<del></del>	
4	Add lines 1 through 3	4		
_5_	Depreciation and depletion	5	<del></del>	
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1 1		
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
_8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2_	Acquisition indebtedness applicable to non-exempt-use assets	2		
3_	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		L
_ 5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7	·	
_8_	Minimum Asset Amount (add line 7 to line 6)	8	<del> </del>	<u> </u>
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax Imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-integra	ted Type III supporting org	anization (see
	Instructions).	-		

Schedule A (Form 990 or 990-EZ) 2015 INTERNATIONAL STUDIES ASSOCIATION, INC. 87-0485763 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2015 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (111) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2015 Amount for 2015 Distributable amount for 2015 from Section C, line 6 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: а b C d From 2013 e From 2014 Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2015 distributable amount Carryover from 2010 not applied (see instructions) ] Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2015 from Section D. a Applied to underdistributions of prior years b Applied to 2015 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions). Excess distributions carryover to 2016. Add lines 3j and 4c. Breakdown of Ilne 7: c Excess from 2013 d Excess from 2014 e Excess from 2015

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-E	Z) 2015 INTE	RNATIONAL	STUDIES	ASSOCIATION,	INC. 87-	·0485763 Page 8
Part VI	Supplemental	Information.	Provide the expla	anations required	by Part II, line 10; Part II, o, and 11c; Part IV, Sectio 2b, 3a and 3b; Part V, lin so complete this part for	line 17a or 17b; F	art III, line 12;
	Part IV, Section A,	lines 1, 2, 3b, 3c,	, 4b, 4c, 5a, 6, 9a	, 9b, 9c, 11a, 11t	, and 11c; Part IV, Section	n B, lines 1 and 2	Part IV, Section C,
•	line 1; Part IV, Sec	tion D, lines 2 and	3; Part IV, Secti	on E, lines 1c, 2a	, 2b, 3a and 3b; Part V, Iir	e 1; Part V, Section	n B, Ilne 1e; Part V,
	Section D, lines 5, (See Instructions.)	6, and 8; and Par	t V, Section E, lin	es 2, 5, and 6. Al	so complete this part for	any additional info	rmation.
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### **SCHEDULE D**

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

	INTERNATIONAL STUDIES ASSOCIATION, INC.	87-0485763
Pa	~	CCOUNTS. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
		(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	<del></del>
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	
_	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	•
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	
Da	impermissible private benefit?  T II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV	
		, iii <del>0</del> 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education)  Preservation of a historically	. Important land our
	Preservation of land for public use (e.g., recreation or education)  Protection of natural habitat  Preservation of a historically  Preservation of a certified historically	
	Preservation of open space	stone structure
0	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	annuation against on the last
2	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 structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	26
u	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	
•	year >	included and the text
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservati	
	<b>&gt;</b>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	sements during the year
	<b>▶</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	3)(1)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense states	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's	ganization's accounting for
	conservation easements.	
Pa	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement at	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	rvice, provide the following amounts
	relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2_	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
	Revenue Included on Form 990, Part VIII, line 1	
	Assets included in Form 990, Part X	
НΔ	For Paperwork Reduction Act Notice, see the Instructions for Form 990	Schodula D (Form 990) 2015

532051 11-02-15

		TIONAL STU								Page 2
ş	Using the organization's acquisition, access	non, and other record	as, cned	ck any of the	o tollowing that	n are a si	gnincant	use of its	COHECTION	emen s
_	(check all that apply)	_	. $ egin{array}{c} \end{array}$		- <b>h</b>					
a	Public exhibition		' <del>  </del>		change progra					
-p	Scholarly research	€	•	Otner						
C	Preservation for future generations	. (( 4) 4 1 - 1								
4	Provide a description of the organization's c			-	-			ose in Par	t XIII.	
5	During the year, did the organization solicit of								٦.,	<b>г</b>
l Day	to be sold to raise funds rather than to be m								Yes	No_
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		មមេ រា ហេ	e organizatio	on answered -	Yes on	rom 990	), Part IV,	line 9, or	
	Is the organization an agent, trustee, custod									
18			•						7	г.,
_	on Form 990, Part X?					•••••	••••••		Yes	L No
D	ii "198," explain trie arrangement in Part Ain	and complete the id	niowirig	(apie:			[ <u>-</u>		A	
_	Durington halana								Amount	
C.	Beginning balance								<del></del> -	
d	Additions during the year							<del></del>		<del></del>
е	Distributions during the year							<del></del>	<del></del>	
f	Ending balance						. <u>  1</u> f_		1	
2a	Did the organization include an amount on F								_i Yes	⊢ No
	t V Endowment Funds. Complete									
LFai	CV Endowment unds. Complete									
	Desired of twee belones	(a) Current year	(0)	Prior year	(c) Two year	S Dack	(a) Tillee	ears Dack	(e) Four	years back
1a	Beginning of year balance		·		<del>                                     </del>				-	
b	Contributions				<del> </del>	<del></del>		<del></del>		
C .	Net investment earnings, gains, and losses		ļ		-			<del></del>	ļ	<del></del>
d	Grants or scholarships			<del></del>	<del> </del>				<b></b>	
9	Other expenditures for facilities		İ			İ				
	and programs									
f	Administrative expenses									
9	End of year balance		L	<del> </del>	<del></del>				L	
2	Provide the estimated percentage of the cur		e (line '	1g, column (	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	<del></del>								
C	Temporarily restricted endowment									
	The percentages on lines 2a, 2b, and 2c sho									
3 <b>a</b>	Are there endowment funds not in the posse	ession of the organiza	ation th	at are held a	and administe	red for th	e organiz	ation	r	<del></del>
	by:									Yes No
	(i) unrelated organizations				•••••	***********		• • • • • • • • • • • • • • • • • • • •	1	
b	If "Yes" on line 3a(ii), are the related organiza				·			••••	3b	
4	Describe in Part XIII the intended uses of the		wment	funds.						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere									
	Description of property	(a) Cost or o basis (investr		, , ,	t or other (other)		cumulate reciation		(d) Book	value
1a	Land									
b	Buildings							$\underline{\hspace{1cm}}$		
С	Leasehold improvements									
	Equipment			1	4,997.		2,1	42.	12	2,855.
	Other									
	. Add lines 1a through 1e, (Column (d) must e		X, colu	mn (B), line	10c.)				12	2,855.
								<u> </u>		

Part VII   Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b, See Form 990, Part X, line 12.  (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market v (d) Financial derivatives  (2) Closely-held equity Interests (3) Other (A) (B) (C) (C) (C) (C) (F) (G) (H) (H) (Interest) (F) (G) (H) (F) (G) (H) (F) (G) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (G) (F) (F) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	aiue
(a) Description of security or category (nextuding name of security)  (b) Book value  (c) Method of valuation: Cost or end-of-year market v  1) Financial derivatives  2) Closely-held equity interests  3) Other  (A)  (B)  (C)  (C)  (D)  (E)  (F)  (G)  (H)  (otal. (Col. (b) must equal form 990, Part X, col. (B) line 12.)   Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment  (b) Book value  (c) Method of valuation: Cost or end-of-year market v  (d)  (e) Method of valuation: Cost or end-of-year market v  (f)  (g)  (h) Book value  (g) Method of valuation: Cost or end-of-year market v  (h) Book value  (g) Method of valuation: Cost or end-of-year market v  (h) Book value  (g) Method of valuation: Cost or end-of-year market v  (h) Book value  (g) Method of valuation: Cost or end-of-year market v	aiue
1) Financial derivatives 2) Closely-held equity Interests 3) Other (A) (B) (C) (D) (E) (F) (G) (H) otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) (3) (4) (5)	
2) Closely-held equity Interests 3) Other (A) (B) (C) (D) (E) (F) (G) (H) otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5)	
(A)  (B)  (C)  (D)  (E)  (F)  (G)  (H)  (rotal. (Col. (b) must equal Form 990, Part X, col. (8) line 12.) >  Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment  (b) Book value  (c) Method of valuation: Cost or end-of-year market value (2)  (3)  (4)  (5)	
(A) (B) (C) (D) (E) (F) (G) (H) (otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5)	
(B) (C) (D) (E) (F) (G) (H) rotal. (Col. (b) must equal Form 990, Part X, çol. (8) line 12.)  Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5)	
(C) (D) (E) (F) (G) (H) (otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value) (1) (2) (3) (4) (5)	
(D) (E) (F) (G) (H) otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market v (1) (2) (3) (4) (5)	
(F) (G) (H)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶  Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (2)  (3) (4) (5)	
(G) (H)  total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments - Program Related.  Complete If the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value) (1) (2) (3) (4) (5)	
(H)  otal. (Col. (b) must equal Form 990, Part X, col. (8) line 12.)  Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market v  (1)  (2)  (3)  (4)  (5)	
total. (Col. (b) must equal Form 990, Part X, col. (8) line 12.) ▶  Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (3)  (4)  (5)	
Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market v  (1)  (2)  (3)  (4)  (5)	
Complete If the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5)	
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market v  (1) (2) (3) (4) (5)	
(1) (2) (3) (4) (5)	alue
(2) (3) (4) (5)	
(3) (4) (5)	
(4) (5)	
(5)	
(8)	
(6)	
(8)	
(9)	<del></del>
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.	
(a) Description (b) Book va	ue
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X │ Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	
(a) Description of liability (b) Book value	
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	
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 Schedule D (Form 9)	

09-21-16

	t XI Reconciliation of Revenue per Audited Financial State		Revenue per R	eturn	l <b>.</b>
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		- Т	2 202 505
1	1, 1			1	3,383,505.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	46 046		
~ <b>a</b>	Net unrealized gains (losses) on investments		16,016.		
b	Donated services and use of facilities		123,500.		
C	Recoveries of prior year grants				
đ	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d			2е	<u>139,516.</u>
3	Subtract line 2e from line 1	• • • • • • • • • • • • • • • • • • • •		3	3,243,989.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		· · · · · · · · · · · · · · · · · · ·		
b	Other (Describe in Part XIII.)	<u>4b</u>			_
C	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	3,243,989.
Pa	t XII Reconciliation of Expenses per Audited Financial State		n Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements		***************************************	1	<u>2,993,848</u> .
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, ,			
а	Donated services and use of facilities	2a	123,500.	l l	
b	Prior year adjustments	2b			
G	Other losses	2c			
d	Other (Describe in Part XIII.)				
0	Add lines 2a through 2d	**********		2e	123,500.
3	Subtract line 2e from line 1		••••••••	3	2,870,348.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	46			
C	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	2,870,348.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	•	•	l; Part	X, line 2; Part XI,
					·
				· · · · · · · · · · · · · · · · · · ·	
				· · · · · · · · · · · · · · · · · · ·	

#### 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.

2015
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Open to Public Inspection

Department of the Tressury Internal Revenue Service

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

Name of the organization

INTERNATIONAL STUDIES ASSOCIATION,

Employer Identification number 87-0485763

INC

FORM 990, PAGE 2, PART III THE INTERNATIONAL STUDIES ASSOCIATION IS ONE OF THE OLDEST INTERDISCIPLINARY ASSOCIATIONS DEDICATED TO UNDERSTANDING INTERNATIONAL, TRANSNATIONAL AND GLOBAL AFFAIRS. FOUNDED IN 1959, ITS MORE THAN 7,000 MEMBERS SPAN THE GLOBE COMPRISING ACADEMICS PRACTITIONERS, POLICY EXPERTS, PRIVATE SECTOR WORKERS AND INDEPENDENT RESEARCHERS, AMONG OTHERS. THE ASSOCIATION HAS LONG SERVED AS A CENTRAL HUB FOR THE EXCHANGE OF IDEAS AND FOR NETWORKING AND PROGRAMMATIC INITIATIVES AMONG THOSE INVOLVED IN THE STUDY, TEACHING AND PRACTICE OF INTERNATIONAL STUDIES. THROUGH ITS HIGHLY ATTENDED ANNUAL CONVENTION AND REGIONAL/INTERNATIONAL CONFERENCES, AS WELL AS ITS RESPECTED JOURNALS AND INTERNATIONAL STUDIES ENCYCLOPEDIA, THE ASSOCIATION PROMOTES RIGOROUS DISCUSSION, RESEARCH AND WRITING ON A BROAD RANGE OF TOPICS WITHIN INTERNATIONAL STUDIES, BROADLY CONSTRUED. ISA ALSO OFFERS VARIOUS FUNDING, BRIDGING AND MENTORING OPPORTUNITIES THAT FACILITATE THE DEVELOPMENT OF NEW IDEAS, RELATIONSHIPS AND SKILLSETS. THESE OPPORTUNITIES PROVIDE A SPACE FOR UNDERREPRESENTED GROUPS, EARLY CAREER SCHOLARS AND OTHER PROFESSIONALS TO GROW IN THE FIELD AS AN ASSOCIATION DEDICATED TO POSING AND ANSWERING QUESTIONS REGARDING SOME OF THE MOST PRESSING ISSUES OF OUR TIME, ISA IS COMPOSED OF A VARIETY OF SECTIONS, CAUCUSES AND REGIONS THAT SEEK TO FACILITATE THEIR MEMBERS' ANALYSIS OF, AND ENGAGEMENT WITH, THE WORLD OF INTERNATIONAL, TRANSNATIONAL AND GLOBAL AFFAIRS WRIT LARGE. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2015) 532211 09-02-15