

Form **990**

Return of Organization Exempt From Income Tax

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

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ARCHAEOLOGICAL INSTITUTE OF AMERICA Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 656 BEACON STREET City or town, state or country, and ZIP + 4 BOSTON, MA 02215-2006	D Employer identification number 13-5669180
		E Telephone number 617-353-9361	G Gross receipts \$ 8,039,267.
		F Name and address of principal officer: TERESA KELLER SAME AS C ABOVE	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
		J Website: ▶ WWW.ARCHAEOLOGICAL.ORG	
		K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1906 M State of legal domicile: MA

Part I Summary					
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE INSTITUTE IS DEDICATED TO THE GREATER UNDERSTANDING OF THE RECORD OF THE HUMAN PAST, TO ...			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35	
	5	Total number of employees (Part V, line 2a)	5	25	
	6	Total number of volunteers (estimate if necessary)	6	300	
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	622,758.	
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	<64,784.>		
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,106,770.	1,837,748.	
	9	Program service revenue (Part VIII, line 2g)	4,889,697.	4,613,507.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	785,086.	97,756.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	190,738.	92,709.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,972,291.	6,641,720.	
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	101,770.	207,020.
		14	Benefits paid to or for members (Part IX, column (A), line 4)		
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,884,743.	2,167,469.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)		
		16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 828,582.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,294,851.	4,481,954.		
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,281,364.	6,856,443.		
19	Revenue less expenses. Subtract line 18 from line 12	690,927.	<214,723.>		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	11,227,547.	9,585,473.	
	21	Total liabilities (Part X, line 26)	3,422,242.	3,708,776.	
	22	Net assets or fund balances. Subtract line 21 from line 20	7,805,305.	5,876,697.	

Part II Signature Block			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	▶	Signature of officer	Date
	▶	KEVIN QUINLAN, CHIEF OPERATING OFFICER Type or print name and title	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN ▶	Preparer's identifying number (see instructions)
		LUTZ AND CARR, CPAS LLP 300 EAST 42ND STREET NEW YORK, NY 10017	Phone no. ▶ 212-697-2299

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: THE INSTITUTE IS DEDICATED TO THE GREATER UNDERSTANDING OF THE RECORD OF THE HUMAN PAST, TO THE PROTECTION AND PRESERVATION OF THE WORLD'S ARCHAEOLOGICAL RESOURCES AND THE INFORMATION THEY CONTAIN AND TO THE ENCOURAGEMENT AND SUPPORT OF ARCHAEOLOGICAL RESEARCH AND PUBLICATION.

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.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 4,351,323. including grants of \$) (Revenue \$ 3,996,647.) ARCHAEOLOGY MAGAZINE - THIS POPULAR ILLUSTRATED PERIODICAL BRINGS ARCHAEOLOGICAL NEWS AND INFORMATION TO APPROXIMATELY 750,000 READERS SIX TIMES EACH YEAR. THE MAGAZINE REPORTS ON CURRENT DISCOVERIES AROUND THE WORLD, EDUCATES AND INFORMS ITS READERS ABOUT PAST CULTURES AND EVENTS, AND RAISES AWARENESS OF THE IMPORTANCE OF PRESERVING THE RECORD OF THE HUMAN PAST.

4b (Code:) (Expenses \$ 756,132. including grants of \$ 207,020.) (Revenue \$ 193,096.) MEMBERSHIP PROGRAMS - THE AIA ORGANIZES AND PRESENTS ARCHAEOLOGY-THEMED OUTREACH PROGRAMS THAT EDUCATE THE PUBLIC ABOUT ARCHAEOLOGY, CURRENT RESEARCH, PAST CIVILIZATIONS, CULTURAL HERITAGE, AND THE IMPORTANCE OF PRESERVING THE ARCHAEOLOGICAL RECORD. PROGRAMS INCLUDE NEARLY 300 LECTURES ANNUALLY IN COMMUNITIES ACROSS NORTH AMERICA, AN ANNUAL MEETING WHERE PROFESSIONALS CAN PRESENT THEIR RESEARCH AND DISCOVERIES, HANDS-ON ARCHAEOLOGY AND CULTURE FAIRS FOR FAMILIES AND CHILDREN, WORKSHOPS, ONLINE RESOURCES FOR EDUCATORS AND STUDENTS, AND GENERAL INFORMATION FOR THOSE INTERESTED IN PURSUING ARCHAEOLOGY AS A CAREER OR IN GETTING MORE INVOLVED WITH THE FIELD. THE GOAL OF AIA'S PUBLIC OUTREACH EVENTS IS TO CREATE A VIVID AND INFORMED INTEREST IN HISTORY AND PAST CULTURES AS THIS IS CRITICAL TO BUILDING A BETTER (CONT'D)

4c (Code:) (Expenses \$ 310,788. including grants of \$) (Revenue \$ 332,504.) AMERICAN JOURNAL OF ARCHAEOLOGY ("AJA") - THIS QUARTERLY ACADEMIC JOURNAL BRINGS THE LATEST RESEARCH AND DISCOVERIES TO APPROXIMATELY 3,000 LIBRARIES, INSTITUTIONS OF HIGHER LEARNING AND INDIVIDUAL SUBSCRIBERS. PROFESSIONALS RELY ON THE AJA TO STAY INFORMED OF THE LATEST RESEARCH AND DISCOVERIES IN THE FIELD, TO PROVIDE A CONTEXT FOR THEIR OWN WORK, AND TO EDUCATE THE NEXT GENERATION OF ARCHAEOLOGISTS. AJA'S ELECTRONIC VERSION MAKES THE JOURNAL ACCESSIBLE TO A LARGER GLOBAL AUDIENCE AND ALLOWS PROFESSIONALS TO EASILY CROSS-REFERENCE OTHER RELEVANT RESEARCH. THE AJA ALSO MAKES INFORMATION AVAILABLE TO THE GENERAL PUBLIC VIA ITS WEBSITE, WHICH INCLUDES BOOK AND MUSEUM REVIEWS OF INTEREST TO A WIDER AUDIENCE.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 191,295. including grants of \$) (Revenue \$ 117,756.)

4e Total program service expenses \$ 5,609,538. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12 X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16 X	
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 47		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	1c		
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 25		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
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?		
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?	X	
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or 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		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	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:		
15a	The organization's CEO, Executive Director, or top management official?	X	
15b	Other officers or key employees of the organization?		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted 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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **▶ NY, MA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶
KEVIN QUINLAN - 617-358-4403
656 BEACON STREET, BOSTON, MA 02215-2006

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
C. BRIAN ROSE PRESIDENT	5.00	X		X				0.	0.	0.
ELIZABETH BARTMAN FIRST VICE PRESIDENT	5.00	X		X				0.	0.	0.
SEBASTIAN HEATH VP PROF. RESPONSIBILTIES	5.00	X		X				0.	0.	0.
ALEXANDRA CLEWORTH VP SOCIETIES	1.00	X		X				0.	0.	0.
C. MATHEW SAUNDERS VP EDUCATION	1.00	X		X				0.	0.	0.
JENNIFER NEILS VP PUBLICATIONS	5.00	X		X				0.	0.	0.
BRIAN HEIDTKE TREASURER	1.00	X		X				0.	0.	0.
TERESA M. KELLER EXECUTIVE DIRECTOR	40.00	X		X				142,987.	0.	21,309.
SUSAN ALCOCK ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
MICHAEL AMBLER GENERAL TRUSTEE	1.00	X						0.	0.	0.
CARLA ANTONACCIO ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
CATHLEEN ASCH GENERAL TRUSTEE	1.00	X						0.	0.	0.
ROBERT ATWATER GENERAL TRUSTEE	1.00	X						0.	0.	0.
BARBARA BARLETTA ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
DAVID BOOCHEVER GENERAL TRUSTEE	1.00	X						0.	0.	0.
LAURA CHILDS SOCIETY TRUSTEE	1.00	X						0.	0.	0.
LAWRENCE COBEN GENERAL TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MITCHELL EITEL GENERAL COUNSEL	1.00	X						0.	0.	0.
WILLIAM FITZHUGH ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
HARRISON FORD GENERAL TRUSTEE	1.00	X						0.	0.	0.
PETER HERDRICH GENERAL TRUSTEE	1.00	X						0.	0.	0.
LILLIAN JOYCE SOCIETY TRUSTEE	1.00	X						0.	0.	0.
WILLIAM LINDSAY GENERAL TRUSTEE	1.00	X						0.	0.	0.
DONALD MORRISON SOCIETY TRUSTEE	1.00	X						0.	0.	0.
ROBERT MUROWCHICK ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
HELEN NAGY ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
ELEANOR POWERS GENERAL TRUSTEE	1.00	X						0.	0.	0.
1b Total								426,545.	0.	41,479.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 3

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
RR DONNELLY, ONE SHENANDOAH VALLEY DRIVE, STRASBURG, VA 22657	MAGAZINE PRINTING	749,271.
KABLE FULLFILLMENT SERVICES KABLE SQUARE, MT. MORRIS, IL 61054	SUBSCRIPTION FULLFILLMENT SERVICE	555,602.
FIDELIS, 223 GATES ROAD, UNIT A, LITTLE FERRY, NJ 07643	DIRECT MAIL PRINTING	344,883.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 3

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns						
	b	Membership dues	1b	335,528.				
	c	Fundraising events	1c	243,610.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1258610.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		1,837,748.				
	Program Service Revenue	2 a	SUBSCRIPTIONS & OTHER	Business Code	511120	3,369,270.	3,369,270.	
b		ADVERTISING REVENUE		541800	622,758.		622,758.	
c		NEWSSTAND REVENUE		511120	233,566.	233,566.		
d		ANNUAL MEETING REGISTR		900099	181,937.	181,937.		
e		ARCHAEOLOGICAL TOURS		561520	109,031.	109,031.		
f		All other program service revenue		900099	96,945.	96,945.		
g		Total. Add lines 2a-2f			4,613,507.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		175,157.			175,157.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	(ii) Personal				
		b	Less: rental expenses					
		c	Rental income or (loss)					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less: cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)			<77,401.>		<77,401.>
	8 a	Gross income from fundraising events (not including \$ 243,610. of contributions reported on line 1c). See Part IV, line 18	a		78,740.			
		b	Less: direct expenses	b	78,740.			
		c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
b		Less: direct expenses	b					
c		Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a						
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code					
11 a	LIST RENTAL		900099	92,709.		92,709.		
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			92,709.				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			6,641,720.	3,990,749.	622,758.	190,465.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	49,740.	49,740.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	110,195.	110,195.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	47,085.	47,085.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	309,119.	69,291.	169,842.	69,986.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,537,287.	1,191,876.	69,256.	276,155.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	69,407.	53,438.	4,477.	11,492.
9 Other employee benefits	99,369.	81,044.	1,213.	17,112.
10 Payroll taxes	152,287.	103,851.	21,632.	26,804.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	57,750.	44,241.	5,629.	7,880.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	26,837.		26,837.	
g Other	565,222.	514,924.	27,260.	23,038.
12 Advertising and promotion	1,360,644.	1,359,672.	100.	872.
13 Office expenses	80,457.	57,923.	8,686.	13,848.
14 Information technology	64,466.	37,019.	7,826.	19,621.
15 Royalties				
16 Occupancy	139,484.	126,675.	5,337.	7,472.
17 Travel	247,027.	158,323.	42,127.	46,577.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	196,874.	38,205.	7,603.	151,066.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	40,325.	24,694.	6,512.	9,119.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a MAGAZINE PRINTING/PROD	1,329,594.	1,254,357.	275.	74,962.
b OTHER EXPENSES	373,274.	286,985.	13,711.	72,578.
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	6,856,443.	5,609,538.	418,323.	828,582.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	104,005.	1	354,879.
	2 Savings and temporary cash investments		2	474,268.
	3 Pledges and grants receivable, net	118,188.	3	355,184.
	4 Accounts receivable, net	678,944.	4	428,876.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,442,075.	9	1,240,382.
	10a Land, buildings, and equipment: cost basis ...	10a 289,784.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 228,305.	90,936.	10c 61,479.
	11 Investments - publicly traded securities	8,793,399.	11	6,670,405.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		11,227,547.	16	9,585,473.
Liabilities	17 Accounts payable and accrued expenses	381,004.	17	428,948.
	18 Grants payable		18	
	19 Deferred revenue	3,041,238.	19	3,279,828.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		3,422,242.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	927,775.	27	<472,232.>
	28 Temporarily restricted net assets	3,405,690.	28	2,793,082.
	29 Permanently restricted net assets	3,471,840.	29	3,555,847.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances		7,805,305.	33	5,876,697.
34 Total liabilities and net assets/fund balances		11,227,547.	34	9,585,473.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **ARCHAEOLOGICAL INSTITUTE OF AMERICA** Employer identification number **13-5669180**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e 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 If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
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 - 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 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 IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		%
16a 33 1/3% support test - 2008. 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		<input type="checkbox"/>	
b 33 1/3% support test - 2007. 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		<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. 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		<input type="checkbox"/>	
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		<input type="checkbox"/>	

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1106752.	1104332.	1014112.	1465457.	1837748.	6528401.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4008530.	3665760.	3714850.	3864225.	3990749.	19244114.
3 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 facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5	5115282.	4770092.	4728962.	5329682.	5828497.	25772515.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	187,412.	142,172.	296,989.	344,068.	451,835.	1422476.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	304,000.	312,250.	10,150.	12,600.	229,436.	868,436.
c Add lines 7a and 7b	491,412.	454,422.	307,139.	356,668.	681,271.	2290912.
8 Public support (Subtract line 7c from line 6.)						23481603.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	5115282.	4770092.	4728962.	5329682.	5828497.	25772515.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	180,488.	197,493.	185,214.	246,670.	175,157.	985,022.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	180,488.	197,493.	185,214.	246,670.	175,157.	985,022.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	187,318.	221,646.	198,424.	190,738.	92,709.	890,835.
13 Total support (Add lines 9, 10c, 11, and 12.)						27648372.

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 2008 (line 8, column (f) divided by line 13, column (f))	15	84.93 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	82.49 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	3.56 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	3.68 %

19a 33 1/3% support tests - 2008. 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 - 2007. 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 C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2008

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ **To be completed by organizations described below.**
▶ **Attach to Form 990 or Form 990-EZ.**

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization ARCHAEOLOGICAL INSTITUTE OF AMERICA	Employer identification number 13-5669180
--	---

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. Enter -0- if line g is more than line a														
i	Subtract line 1f from line 1c. Enter -0- if line f is more than line c														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount				
b	Lobbying ceiling amount (150% of line 2a, column(e))				
c	Total lobbying expenditures				
d	Grassroots non-taxable amount				
e	Grassroots ceiling amount (150% of line 2d, column (e))				
f	Grassroots lobbying expenditures				

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		0.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	X		0.
i Other activities? If "Yes," describe in Part IV		X	
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

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

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

ARCHAEOLOGICAL INSTITUTE OF AMERICA

Employer identification number

13-5669180

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 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 pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a 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	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

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, violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

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

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 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 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	8,400,723.				
b Contributions	181,389.				
c Investment earnings or losses	<1649994.>				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	374,819.				
g End of year balance	6,557,299.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment ▶ 15.00 %
 - b** Permanent endowment ▶ 54.00 %
 - c** Term endowment ▶ 31.00 %
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		289,784.	228,305.	61,479.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				61,479.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Other.

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation.

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value.

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Amount. Row includes Federal income taxes.

In Part XIV, 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.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,641,720.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,856,443.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<214,723.>
4	Net unrealized gains (losses) on investments	4	<1,713,885.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	<1,713,885.>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<1,928,608.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	5,033,398.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	<1,713,885.>
b	Donated services and use of facilities	2b	132,400.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	<1,581,485.>
3	Subtract line 2e from line 1	3	6,614,883.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	26,837.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	26,837.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	6,641,720.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,962,006.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	132,400.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	132,400.
3	Subtract line 2e from line 1	3	6,829,606.
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	26,837.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	26,837.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	6,856,443.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: THE INSTITUTE'S ENDOWMENT FUNDS ARE INTENDED TO

SUPPORT THE INSTITUTE'S PROGRAMS AND ADMINISTRATIVE OPERATING COSTS, AS

FULLY DESCRIBED IN THE DOCUMENTS ASSOCIATED WITH EACH ENDOWMENT GIFT.

EXAMPLES ARE LECTURES, FELLOWSHIPS AND PUBLICATIONS. IN BROAD TERMS THE

INTENDED USE OF THE ENDOWMENT FUNDS ARE TO FURTHER THE MISSION OF THE

ARCHAEOLOGICAL INSTITUTE OF AMERICA.

**Schedule F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization	Employer identification number
ARCHAEOLOGICAL INSTITUTE OF AMERICA	13-5669180

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. 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? **Yes** **No**

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE	0	0	GRANTS TO RECIPIENTS IN REGION		42,085.
EAST ASIA AND THE PACIFIC	0	0	GRANT TO RECIPIENT IN REGION		5,000.
Totals					47,085.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) 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)

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP AWARD	EUROPE	1	7,470.	WIRE TRANSFER/CHECK	0.		
LECTURE STIPENDS	EUROPE	2	34,615.	WIRE TRANSFER/CHECK	0.		

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: THE INSTITUTE REQUIRES AN APPLICATION FOR SITE PRESERVATION GRANTS WHICH ARE AWARDED IN PHASES. A REPORT ON HOW THE FUNDS WERE UTILIZED FOR THE PREVIOUS PHASE MUST BE SUBMITTED TO THE SITE PRESERVATION COMMITTEE AND APPROVED FOR FURTHER DISBURSEMENT OF ANY REMAINING PHASES. THE SITE PRESERVATION COMMITTEE IS MADE UP OF ARCHAEOLOGISTS, PRESERVATIONIST AND ECONOMIC DEVELOPMENT PROFESSIONALS. THE COMMITTEE MEETS ON A REGULAR BASIS TO REVIEW APPLICATIONS AND DISCUSS THE STATUS OF CURRENT PROJECTS. PERIODIC REPORTS ARE POSTED ON THE AIA WEBSITE FOR PUBLIC REVIEW.

KRESS LECTURES

EACH YEAR THE AIA OFFERS TWO STIPENDED LECTURESHIPS, FUNDED BY THE KRESS FOUNDATION IN NEW YORK. THE KRESS LECTURES ARE CHOSEN BY THE AIA'S LECTURE PROGRAM COMMITTEE, WHO MEET EVERY JANUARY TO DISCUSS THE VARIOUS NOMINATIONS (MADE BY COMMITTEE MEMBERS, STAFF MEMBERS, AND AIA MEMBERS). THE COMMITTEE MEMBERS THEN CAST BALLOTS, WHICH ARE TABULATED TO DECIDE THE NEXT SEASON'S KRESS LECTURES. LECTURES ARE HOSTED AT LOCAL AIA SOCIETIES. SOCIETY OFFICERS PREPARE REPORTS ON LECTURE QUALITY, ATTENCENCE AND AUDIENCE FEEDBACK. THESE REPORTS ARE SENT TO THE INSTITUTE FOR REVIEW BY THE LECTURE PROGRAM STAFF AND COMMITTEE.

FELLOWSHIPS AND GRANTS

THE AIA OFFERS A NUMBER OF FELLOWSHIPS AND GRANTS WHICH ARE OPEN TO US RESIDENTS AS WELL AS FOREIGN SCHOLARS. THESE ARE THE ARCHAEOLOGY OF PORTUGAL FELLOWSHIP, THE DAI/AIA STUDY IN THE U.S. FELLOWSHIP, THE PUBLICATION PREPARATION GRANT, AND THE PUBLICATION SUBVENTION GRANT. ALL BUT THE PUBLICATION SUBVENTION GRANT ARE AWARDED BY THE AIA'S FELLOWSHIP COMMITTEE, WHICH MEETS EVERY JANUARY TO CONSIDER THE APPLICATIONS AND

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

DECIDE ON RECIPIENTS. THE PUBLICATION SUBVENTION GRANT IS AWARDED BY THE PUBLICATION SUBVENTION COMMITTEE. MONITORING IS DONE BY WRITTEN REPORTS THAT ARE REQUIRED TO BE TURNED IN BY ALL FELLOWSHIP AND SCHOLARSHIP AWARDEES AT THE CONCLUSION OF THEIR PROJECTS. THESE REPORTS DETAIL THE SUCCESS OF THE PROJECT AND THE USE THE PROJECT FUNDS. THE REPORTS ARE REVIEWED BY THE APPROPRAITE COMMITTEES AND ARE THEN PUBLISHED ON THE INSTITUTE'S WEBSITE.

Multiple horizontal lines for supplemental information.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))	
		BENEFIT GALA (event type)	(event type)	NONE (total number)		
Revenue	1	Gross receipts	322,350.		322,350.	
	2	Less: Charitable contributions	243,610.		243,610.	
	3	Gross revenue (line 1 minus line 2)	78,740.		78,740.	
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs	58,740.		58,740.	
	7	Other direct expenses	20,000.		20,000.	
	8	Direct expense summary. Add lines 4 through 7 in column (d)				(78,740.)
	9	Net income summary. Combine lines 3 and 8 in column (d)				0.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				()
8	Net gaming income summary. Combine lines 1 and 7 in column (d)				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states? _____	9a	
b If "No," Explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____	10a	
b If "Yes," Explain: _____		
11 Does the organization operate gaming activities with nonmembers? _____	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _____	12	

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____ .

c If "Yes," enter name and address:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

	Yes	No
13a		
13b		
14		
15a		
15b		
15c		
16		
17a		

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization
ARCHAEOLOGICAL INSTITUTE OF AMERICA

**Employer identification number
13-5669180**

Part I General Information on Grants and Assistance

- 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? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COTSEN INSTITUTE OF ARCHAEOLOGY, UCLA - 210 FOWLER - LOS ANGELES, CA 90024	95-6006143	501(C)(3)	49,740.	0.			SITE PRESERVATION - EASTER ISLAND

2 Enter total number of section 501(c)(3) and government organizations **1.**

3 Enter total number of other organizations **0.**

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

Schedule I (Form 990) 2008

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FELLOWSHIP AWARDS AND SCHOLARSHIPS	20	110,195.	0.		

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE INSTITUTE REQUIRES AN APPLICATION FOR SITE PRESERVATION GRANTS WHICH ARE AWARDED IN PHASES. A REPORT ON HOW THE FUNDS WERE UTILIZED FOR THE PREVIOUS PHASE MUST BE SUBMITTED TO THE SITE PRESERVATION COMMITTEE AND APPROVED FOR FURTHER DISBURSEMENT OF ANY REMAINING PHASES. THE SITE PRESERVATION COMMITTEE IS MADE UP OF ARCHAEOLOGISTS, PRESERVATIONIST AND ECONOMIC DEVELOPMENT PROFESSIONALS. THE COMMITTEE MEETS ON A REGULAR BASIS TO REVIEW APPLICATIONS AND DISCUSS THE STATUS OF CURRENT PROJECTS. PERIODIC REPORTS ARE POSTED ON THE AIA WEBSITE FOR PUBLIC REVIEW.

Part IV Supplemental Information

KRESS LECTURES

EACH YEAR THE AIA OFFERS TWO STIPENDED LECTURESHIPS, FUNDED BY THE KRESS FOUNDATION IN NEW YORK. THE KRESS LECTURES ARE CHOSEN BY THE AIA'S LECTURE PROGRAM COMMITTEE, WHO MEET EVERY JANUARY TO DISCUSS THE VARIOUS NOMINATIONS (MADE BY COMMITTEE MEMBERS, STAFF MEMBERS, AND AIA MEMBERS). THE COMMITTEE MEMBERS THEN CAST BALLOTS, WHICH ARE TABULATED TO DECIDE THE NEXT SEASON'S KRESS LECTURES. LECTURES ARE HOSTED AT LOCAL AIA SOCIETIES. SOCIETY OFFICERS PREPARE REPORTS ON LECTURE QUALITY, ATTENCENCE AND AUDIENCE FEEDBACK. THESE REPORTS ARE SENT TO THE INSTITUTE FOR REVIEW BY THE LECTURE PROGRAM STAFF AND COMMITTEE.

FELLOWSHIPS AND GRANTS

THE AIA OFFERS A NUMBER OF FELLOWSHIPS AND GRANTS WHICH ARE OPEN TO US RESIDENTS AS WELL AS FOREIGN SCHOLARS. THESE ARE THE ARCHAEOLOGY OF PORTUGAL FELLOWSHIP, THE DAI/AIA STUDY IN THE U.S. FELLOWSHIP, THE PUBLICATION PREPARATION GRANT, AND THE PUBLICATION SUBVENTION GRANT. ALL BUT THE PUBLICATION SUBVENTION GRANT ARE AWARDED BY THE AIA'S FELLOWSHIP COMMITTEE, WHICH MEETS EVERY JANUARY TO CONSIDER THE APPLICATIONS AND DECIDE ON RECIPIENTS. THE PUBLICATION SUBVENTION GRANT IS AWARDED BY THE PUBLICATION SUBVENTION COMMITTEE. MONITORING IS DONE BY WRITTEN REPORTS THAT ARE REQUIRED TO BE TURNED IN BY ALL FELLOWSHIP AND SCHOLARSHIP AWARDEES AT THE CONCLUSION OF THEIR PROJECTS. THESE REPORTS DETAIL THE SUCCESS OF THE PROJECT AND THE USE THE PROJECT FUNDS. THE REPORTS ARE REVIEWED BY THE APPROPRAITE COMMITTEES AND ARE THEN PUBLISHED ON THE INSTITUTE'S WEBSITE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

Name of the organization ARCHAEOLOGICAL INSTITUTE OF AMERICA	Employer identification number 13-5669180
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment?	4a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a	X
b Any related organization?	5b	X
If "Yes," to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" to line 6a or 6b, describe in Part III.		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X

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

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
TERESA M. KELLER	(i)	142,987.	0.	0.	7,133.	14,176.	164,296.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the Organization

ARCHAEOLOGICAL INSTITUTE OF AMERICA

Employer Identification number

13-5669180

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LYNN QUIGLEY GENERAL TRUSTEE	1.00	X						0.	0.	0.
ANN SANTEN SOCIETY TRUSTEE	1.00	X						0.	0.	0.
WILLIAM SATURNO ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
GLEN SCHWARTZ ACADEMIC TRUSTEE	1.00	X						0.	0.	0.
AVA SEAVE GENERAL TRUSTEE	1.00	X						0.	0.	0.
DAVID SEIGLE GENERAL TRUSTEE	1.00	X						0.	0.	0.
CHARLES STANISH GENERAL TRUSTEE	1.00	X						0.	0.	0.
CHARLES W. STEINMETZ GENERAL TRUSTEE	1.00	X						0.	0.	0.
DOUG TILDEN GENERAL TRUSTEE	1.00	X						0.	0.	0.
JOHN YARMICK GENERAL TRUSTEE	1.00	X						0.	0.	0.
THOMAS PAPPAS CHIEF FINANCIAL OFFICER	40.00			X				52,593.	0.	5,379.
PETER YOUNG MANAGING EDITOR - ARKY	40.00				X			110,628.	0.	9,628.
MEEGAN DALEY ADVERT. SLS. MGR.	40.00				X			120,337.	0.	5,163.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

ARCHAEOLOGICAL INSTITUTE OF AMERICA

Employer identification number

13-5669180

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PROTECTION AND PRESERVATION OF THE WORLD'S ARCHAEOLOGICAL RESOURCES AND THE INFORMATION THEY CONTAIN, AND TO THE ENCOURAGEMENT AND SUPPORT OF ARCHAEOLOGICAL RESEARCH AND PUBLICATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

FUTURE. THE INSTITUTE ALSO OFFERS SEVERAL GRANTS AND FELLOWSHIPS FOR ARCHAEOLOGY-RELATED STUDY, RESEARCH, OUTREACH PROGRAMS THROUGH OVER 100 AIA LOCAL CHAPTERS, AND PUBLICATION OF ARCHAEOLOGICAL RESEARCH AND FINDINGS. THE AIA HAS A COMPREHENSIVE SITE PRESERVATION PROGRAM THAT WORKS TO SAFEGUARD THE WORLD'S ARCHAEOLOGICAL HERITAGE FOR FUTURE GENERATIONS THROUGH DIRECT PRESERVATION, RAISING AWARENESS OF THREATS TO SITES, EDUCATION, ADVOCACY, AND BY FACILITATING THE SPREAD OF BEST PRACTICES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATION AND AUXILIARY PROGRAMS

EXPENSES \$ 191295. INCLUDING GRANTS OF \$ 0. REVENUE \$ 117756.

FORM 990, PART VI, SECTION A, LINE 6: THE ARCHAEOLOGICAL INSTITUTE OF

AMERICA IS A MEMBERSHIP ORGANIZATION. PURSUANT TO ITS BY-LAWS, THE MEMBERS OF THE INSTITUTE SHALL BE THOSE PERSONS WHO JOIN THE INSTITUTE IN ANY OF ITS MEMBERSHIP CATEGORIES AND THOSE PERSONS WHO ARE NAMED HONORARY MEMBERS. ALL OF THESE CATEGORIES COMBINED CONSTITUTE THE MEMBERSHIP OF THE INSTITUTE.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

ARCHAEOLOGICAL INSTITUTE OF AMERICA

Employer identification number

13-5669180

FORM 990, PART VI, SECTION A, LINE 7A: THE AIA HAS TWO GOVERNING BODIES, THE COUNCIL AND THE GOVERNING BOARD. THE COUNCIL IS MADE UP OF DELEGATES APPOINTED BY THE SOCIETIES OF THE ORGANIZATION, GOVERNING BOARD MEMBERS AND REPRESENTATIVES OF ANY AMERICAN SCHOOLS FOUNDED BY THE ORGANIZATION. THE COUNCIL MEETS ONCE PER YEAR. IT ELECTS TRUSTEES TO THE GOVERNING BOARD AND VOTES ON ANY PROPOSED CHANGES TO THE BYLAWS OF THE ORGANIZATION. BETWEEN COUNCIL MEETINGS THE POWER TO GOVERN THE INSTITUTE, AND INFACIT ALL OF THE POWERS AND RESPONSIBILITIES OF THE COUNCIL, ARE DELEGATED TO THE GOVERNING BOARD, WHICH MEETS THREE TIMES DURING THE YEAR.

FORM 990, PART VI, SECTION A, LINE 10: A REVIEW OF FORM 990 IS CONDUCTED BY THE CHIEF FINANCIAL OFFICER, THE EXECUTIVE DIRECTOR, AND THE AUDIT COMMITTEE. THE COMPLETED FORM 990 IS DISTRIBUTED TO THE GOVERNING BOARD PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE STAFF OF THE INSTITUTE AS WELL AS ITS TRUSTEES AND OFFICERS MONITOR TRANSACTIONS OF THE INSTITIUTE AND ANY PERCEIVED CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE AUDIT COMMITTEE FOR INVESTIGATION AND RECOMMENDATIONS ARE PRESENTED TO THE GOVERNING BOARD FOR RESOLUTION.

FORM 990, PART VI, SECTION B, LINE 15: THE PERSONNEL COMMITTEE, COMPRISED OF INDEPENDENT MEMBERS OF THE BOARD OF TRUSTEES, MEETS AT THE ANNUAL MEETING IN JANUARY EACH YEAR AND REVIEWS THE PERFORMANCE AND COMPENSATION OF THE INSTITUTE'S EXECUTIVE DIRECTOR. AT THIS MEETING THE COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED FOR THE UPCOMING YEAR.

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

Schedule O (Form 990) 2008

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

ARCHAEOLOGICAL INSTITUTE OF AMERICA

Employer identification number

13-5669180

COMPENSATION INFORMATION FROM OTHER ORGANIZATIONS' FORMS 990, AND OTHER COMPARATIVE DATA, IS USED IN DETERMINING COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19: ANY REQUESTS FOR SUCH DOCUMENTS ARE MANAGED BY THE EXECUTIVE DIRECTOR AND THE CHIEF FINANCIAL OFFICER, AND THESE DOCUMENTS ARE PROVIDED UPON REQUEST.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	OTHER EXPENSES											
	PROPERTY & EQUIPMENT -											
1	BOSTON OFFICE	VARI	ESSL	7.00	16	169,047.			169,047.	102,960.		27,600.
	PROPERTY & EQUIPMENT -											
2	NEW YORK OFFICE	VARI	ESSL	7.00	16	120,737.			120,737.	85,020.		12,725.
	* 990 PAGE 10 TOTAL											
	OTHER EXPENSES					289,784.		0.	289,784.	187,980.	0.	40,325.
	* GRAND TOTAL 990 PAGE											
	10 DEPR					289,784.		0.	289,784.	187,980.	0.	40,325.