efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

513,287

-59,109

73,054

75,703

-2,649

Beginning of Current Year

626,271 -66,384

39,352

108,385

-69,033

End of Year

DLN: 93493242012088 OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

foundations)

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2017 calendar year, or tax year beginning 03-01-2017 , and ending 02-28-2018 D Employer identification number B Check if applicable Institute for American Values ☐ Address change 13-3400377 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite 420 Lexington Ave ☐ Application pending (212) 246-3942 City or town, state or province, country, and ZIP or foreign postal code New York, NY $\,$ 10170 $\,$ G Gross receipts \$ 559,887 F Name and address of principal officer H(a) Is this a group return for ☐Yes **☑**No subordinates? H(b) Are all subordinates ☐ Yes ☑No included? **✓** 501(c)(3) ☐ 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW AMERICANVALUES ORG www better-angels org L Year of formation 1987 M State of legal domicile DE Summary 1 Briefly describe the organization's mission or most significant activities The Institute for American Values is a nonprofit, nonpartisan organization whose mission is to study and strengthen key American values The Institute brings together leading scholars from across the human sciences and across the political spectrum for interdisciplinary Activities & Governance deliberation, collaborative research and joint public statements Check this box $\blacktriangleright \sqcup$ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 4 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 7h **Current Year** 450,310 540,939 8 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 3,662 18,943 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 206 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 454,178 559.887 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . **14** Benefits paid to or for members (Part IX, column (A), line 4) 0 313.513 327.219 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶64,038 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 199,774 299,052

Part III Sign	ature	Block
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20 Total assets (Part X, line 16) .

21 Total liabilities (Part X, line 26) .

Under penalties of perjury, I declare that I have examined this return, incluknowledge and belief, it is true, correct, and complete Declaration of prepa any knowledge

22 Net assets or fund balances Subtract line 21 from line 20

Revenue less expenses Subtract line 18 from line 12 .



Net Assets or Fund Balances

Signature of officer David Blankenhorn President Type or print name and title

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

Paid **Preparer** Use Only Print/Type preparer's name Ellyn A Sosin CPA Preparer's signature Ellyn A Sosin CPA Firm's name > Sosin & Kriegel LLP Firm's address ► 3000 Marcus Avenue Suite 2E4 Lake Success, NY 11042

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

For Paperwork Reduction Act Notice, see the separate instructions.

Check if Schedule O contains a response or note to any line in this Part III	an values The
1 Briefly describe the organization's mission The Institute for American Values is a nonprofit, nonpartisan organization whose mission is to study and strengthen key America Institute brings together leading scholars from across the human sciences and across the political spectrum for interdisciplinary	an values The
The Institute for American Values is a nonprofit, nonpartisan organization whose mission is to study and strengthen key America Institute brings together leading scholars from across the human sciences and across the political spectrum for interdisciplinary	
Institute brings together leading scholars from across the human sciences and across the political spectrum for interdisciplinary	
Conadorative research and John Public statements	
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 🗹 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 🗹 No
Describe the organization's program service accomplishments for each of its three largest program services, as measured Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the expenses, and revenue, if any, for each program service reported	l by expenses total
4a (Code) (Expenses \$ 377,910 including grants of \$) (Revenue \$)
See Additional Data	
4b (Code) (Expenses \$ 110,327 including grants of \$) (Revenue \$	18,943)
See Additional Data	
4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
4d Other program services (Describe in Schedule O) (Figure 20 to 1) (Payonia to 1) (Payonia to 2)	
(Expenses \$ including grants of \$) (Revenue \$ 4e Total program service expenses ▶ 488.237	

or X as applicable

Part IV Checklist of Required Schedules

Page 3

No

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No

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Νo

Nο

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Form **990** (2017)

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🥦

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏

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Page 4

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 📆

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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24b

24c

24d

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25b

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28b

28c

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35a

35b

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Yes

Form 990 (2017)

Yes

20b

Yes 23

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	orm 9	990 (2017)			Page 5
The State the number reported in Box 3 of Form 1996 Sinter-0- if not applicable 1a 10 10 10 10 10 10 10	Par	Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number recorded in Box 2 of Form 1006 Enter 0- find applicable 1a 10 0 0 0 0 0 0 0 0		Check if Schedule O contains a response or note to any line in this Part V			
be Enter this number of Forms W-2G included in line 1a Enter-0- if not applicable Deliver programation comply with backs on withfolding rules for reportable payments to vendors and reportable gament (grammation of the complete payments) or the complete payments for the complete payments for the complete payments of th				Yes	No
to be the enganization comply with badios withholding rules for resortable payments to venicors and reportable gamming (gambing) with reviews to be mineral (gambing) with reviews the number of employees recogned on form W3, Transmittal of Wage and Tax Statements, filed for the called my sear ending with or within the year covered by this return. 2 b if at least one is reported on line 2a, did the organization in e. all required federal employment tax returns? Notes, if the sum of lines I a and 2 is greater than 250, you may be required to efficie (see instructions). 3 b if if west in the sum of lines I a and 2 is greater than 250, you may be required to efficie (see instructions). 3 b if if west, has it field a Form 90-T for this year? (** Note I he 2a, growte an explanation on Schedule O.** 4 A ran y the dump the calledard year, did the organization have an interest, in or as grature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in ergen country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other thin accounts and accounts of thing country (such as a bank account, securities account, or other					
(gambing) winnings to prize winners? 2.a Eitest here in the make of employees reported on Form W-3, Transmittal of Wage and Tas Statements, filed for the calendar year ending with or within the year covered by this return. 3.a Eitest the man bear of employees reported on Form W-3, Transmittal of Wage and Tas Statements, filed for the calendar year ending with or within the year covered by this return. 4.a It is statements, filed for the calendar year ending with or within the year covered by the second of the second property of the property of					
Tax Statements, filed for the calendar year endings with or within the year covered by 2a		(gambling) winnings to prize winners?	1c	Yes	
b		Tax Statements, filed for the calendar year ending with or within the year covered by			
Note: If the sum of lines 14 and 2a is greater than 250, you may be required to effect (see instructions) 3a			2h	Yes	
b If "Yes," has it field a Form 990-T for this year?!!" No" to fine 3b, provide an explanation in Schedule 0. 4a At any time during the calendar year, add the organization have an interest in, or a signature for other authority over, a financial account in a foreign country (such as a blank account, secretic seconds, or other financial accounts (FBAR) b If "Yes," enter the name of the foreign country. ▶ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b In Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b In Did any taxable party notify the organization file form 8886-T? 6b Dea the organization alone annual gross receipt that are normally greater than \$100,000, and did the organization solicit any contributions are normally greater than \$100,000, and did the organization solicit any contribution at the ware not tax deductible. 7b If "Yes," led the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). a Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If "Yes," led the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). a Did the organization include the page? 7c Into 170	D				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority oner, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If Yes, enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction? 5b Inlo D Inl any taxable party notify the organization file Form 8886-17 5c If Yes, I to line 5a or 5b, did the organization file Form 8886-17 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization should be a schill as the contributions or gifts were not tax deductible? 6b Inl Yes, I did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization that may receive deductible contributions under section 170(c). a Did the organization may receive apyment in excess of 375 made partly as a contribution and partly for goods and services of Did the organization neceive a payment in excess of 375 made partly as a contribution and partly for goods and services of Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 7 Organizations and partly in the excess of 375 made partly as a contribution and partly for goods and services Power by the payment of the payment o	3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
financial account; in a foreign country (such as a bank account, securbes account, or other financial account;)? 4a No b If "Yes," enter the name of the foreign country 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b No c If "Yes," to line Sa or Sb, did the organization in that it was or is a party to a prohibited tax shelter transaction? 5c No c If "Yes," to line Sa or Sb, did the organization in that the was or is a party to a prohibited tax shelter transaction? 5c No c If "Yes," to line Sa or Sb, did the organization in that the was or is a party to a prohibited tax shelter transaction? 5c No c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization medical payment in excess of 975 made party as a contribution and partly for goods and services or browned to the payor? 7d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7a Did the organization sell, exchange, or otherwise dispose of tangele personal property for which it was required to file "Yes," indicate the number of Forms 8282 filed during the year. 7d No f Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7e No f Pin Responsing organizations and account property for which it was required? 7d No g If the organization exceived a contribution of qualified intellectual property, did the organization file a Form 1090-0. 7d No g If the organizations and account property is property is property in the during the year. 7d No No Social Solicity organizations and activation of a distributions under section 4966? 8 popularity organizations and capital contributions included on P	b	If "Yes," has it filed a Form 990-T for this year If "No" to line 3b, provide an explanation in Schedule O	3b		No
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b No 1 if "Yes," to line 5 or 5b, did the organization file Form 8886-T? 5c Gall Does the organization that may a fore seep the that are normally greater than \$100,000, and did the organization on solicit any contributions that were not tax deductible as charitable contributions? 1 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). 8 Did the organization notify the donor of the value of the goods or services provided? 9 Did the organization notify the donor of the value of the goods or services provided? 10 If "Yes," indicate the number of Forms 3222 filed during the year. 11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 13 Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 14 Did the organization received a contribution of cars, boast, airplanes, or other whicks, did the organization file a Form 1995. Personal of the sponsoring organization make any taxable distributions under section 4966? 19 Did the sponsoring organizations maintaining donor advised funds. 10 Did sonor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 10 Did the sponsoring organizations. Enter 10 Did the sponsoring organization make a distribution in a denor, donor advised funds. 10 Did sonor advised fund maintained by the sponsoring organization file prom 990 is leve of Form 1041? 11 Did 12 Did the sponsoring organizati			4a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 5c 5c 5c 5c 5c 5c 5c					
5c Sc Sc Sc Sc Sc Sc Sc			50		
solict any contributions that were not tax deductible as chantable contributions? If "Ves," indicate any contributions that were not tax deductible on tax deductible? Job If "Ves," indicate the number of Forms 8282 filed during the year of the organization and partly for goods and services a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Job If "Ves," indicate the number of Forms 8282 filed during the year of the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Job Id the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Job Id the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? Job Id the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? Job If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? Job Id donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Job Id the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter Job Id the sponsoring organization make a distribution to a donor, donor advised funds. Job Id the sponsoring organization make a distribution to a donor, donor advised fund file form 1041? Job If Yes," enter the amount of tex-exempt interest received or accrued during the year Section 501(c)(12) organizations. Enter Section 501(c)(12) organizations. Enter Job If Yes," enter the amount of tex-exempt interest received or accrued during the year Section 501(c)(12) qualified nonprofit health insurance issuers. Job If Yes," enter the amount of tex-exempt interest received or accrued during the year adjusted to the pagnization is licensed	С	If Yes, to line 5a or 5b, did the organization file Form 8885-17	5c		
not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 If "ves," id the organization notify the donor of the value of the goods or services provided? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 10 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10 Did the organization received and indirectly or indirectly, on a personal benefit contract? 11 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 13 If the organization make an animal property of the organization file a Form 1098-C? 14 If the organization maintaining donor advised funds. 15 Did the sponsoring organizations maintaining donor advised funds. 16 Did the sponsoring organizations maintaining donor advised funds. 17 Did the sponsoring organization make any taxable distributions under section 4966? 18 Pob Did the sponsoring organization make any taxable distributions under section 4966? 19 Did the sponsoring organization make any taxable distributions under section 4966? 19 Did the sponsoring organization make any taxable distributions of a donor, donor advisor, or related person? 19 Did the sponsoring organization make any taxable distributions of a donor advisor, or related person? 10 Did			6 a		No
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," idd the organization notify the donor of the value of the goods or services provided? 7b Total the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 1 o d If "Yes," indicate the number of Forms \$282 filed during the year	b		6 b		
browded to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7b No 1f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7c No No 1f the organization received a contribution of acid, boats, airplanes, or other vehicles, did the organization file a Form 10,98-C? The organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10,98-C? 7b No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 No 9a Did the sponsoring organization make any taxable distributions under section 4966? 9a No 9b No O Section 501(c)(17) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a	7	Organizations that may receive deductible contributions under section 170(c).			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes, "indicate the number of Forms 8282 filed during the year	а		7a		No
Form 8282?	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
Pict the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No possible the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No possible for different 8899 as required? 7g No possible for granization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g No possible for the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h No possible Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 No possible sponsoring organization make any taxable distributions under section 4966? 9a No possible sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b No possible for sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b No possible for sponsoring organization make a distribution to a donor, donor advisor, or related person? 9c No possible for sponsoring organizations included on Part VIII, line 12 10a 10b 10c Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10c Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 11c 12c 12c 12c 12c 12d No possible form 1041? 12a No possible form 990 in lieu of Form 1041? 12b 12a No possible form 1041? 12b No possible form 1041? 12a No possible form 1041? 12b No possible form 1041? 12a No possible form 1041? 12b No possible form 1041? 12a No possible form 1041? 12a No possible form 1041? 12b No possible form 1041? 12a No possible	С		7c		No
Tell No Tell Te	d	If "Yes," indicate the number of Forms 8282 filed during the year			
Tell No Tell Te	_	Did the erganization receive any funds, directly or indirectly, to nay promiting on a personal honefit contract?			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g No 1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h No 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 No 9a Did the sponsoring organization make any taxable distributions under section 4966? 9a No 0 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities a Gross income from members or shareholders a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a Section 501(c)(12) organizations. Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a No 16 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 3 Section 501(c)(29) qualified nonprofit health insurance issuers. 1 Is the organization licensed to issue qualified health plans in more than one state?Note. See the instructions for additional information the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 1 Is the organization is licensed to issue qualified health plans 2 Enter the amount of reserves on hand 1 Is the organization is licensed to issue qualified health plans 2 Is the organization is licensed to issue quali	е	bld the organization receive any lunds, directly of indirectly, to pay premiums on a personal benefit contract?	7e		No
required? 79 No If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 10	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1998-C? 7h No No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 No Pa Did the sponsoring organization make any taxable distributions under section 4966? 9a No Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b No Section 501(c)(7) organizations. Enter 1 Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Section 501(c)(12) organizations. Enter 3 Gross income from members or shareholders 4 Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a No If "Yes," enter the amount of tax-exempt interest received or accrued during the year additional information the organization must report on Schedule O	g		_		
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Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h		7h		No
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
Pa Did the sponsoring organization make any taxable distributions under section 4966?		Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		the year?	8		No
O Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12	9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 1 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	.0	Section 501(c)(7) organizations. Enter			
a Gross income from members or shareholders					
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)					
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 3 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b				
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3 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0 b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		12b			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
c Enter the amount of reserves on hand		Enter the amount of reserves the organization is required to maintain by the states in	13a		No
4a Did the organization receive any payments for indoor tanning services during the tax year? 14a No		The organization is included to issue qualified including includin			
					۸.,
D If ites, has it filed a Form 720 to report these payments 11 "No," provide an explanation in Schedule O 14b					No
Form 990 (201	b	ir res, nas it filed a Form 720 to report these payments71f "No," provide an explanation in Schedule O		·	0 (2017

	990 (2017)			Page t
Par	TVI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			~
Se	ection A. Governing Body and Management	<u> </u>	• •	
	and the second s		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8 a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	≘.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			-
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶ NY , OH			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records Institute for American Values 420 Lexington Ave-Ste 1706 New York, NY 10170 (212) 246-3942			_ ,

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order, individual trustees or directors, institutional trustees, officers, key employees, highest

(A) Name and Title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t ch inle ficei	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) David Blankenhorn	60 00			,,				156.003	0	20.222
Pres/Exec Dır	0 00	X		×				156,802	0	39,333
(2) William A Galston Director	1 00	Х						0	0	0
(3) Raına Sacks Blankenhorn	7 00			х				0	0	0
Vice President	0 00									
(4) Mark Boyd Director	0 00	Х						0	0	0
(5) Francis Fukuyama	1 00							0	0	
Director	0 00	X						0	0	0
(6) Jonathan Haidt	1 00	х						0	0	0
Director	0 00 1 00									
(7) Jonathan Rauch Director	0 00	Х						0	0	0
(8) JoAnn Luehring Esq	7 00	x		x				0	0	0
Treasurer	0 00							Ü	0	0
(9) Thomas K Sylvester	7 00	x		x				0	0	0
Chairman	0 00			^				o o	0	٥
(10) David Myers	1 00									
Director	0 00	X						0	0	0
(11) Dean Schooler Director	1 00	Х						0	0	0
(12) Hunter Baker	0 00 1 00						\vdash			
Director		Х						0	0	0
(13) Josephine Tramontano	0 00 20 00									
Secretary	0 00			х				33,519	0	0
							\sqcup			
							Ш			

(A)

Name and Title

compensation from the organization ▶ 0

Part VII

(F)Estimated amount of other

(E)

Reportable

compensation

Page 8

	week (list any hours director/trustee) organization (W-for related organization (W-2/1099-MISC)													sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	key employee	Highest compensated employee	Former	2/1099	-M13C)	2/1099-M13C	-)	organizati relati organiza	ed
												-		
								\vdash				+		
												+		
												+		
С	Sub-Total Total from continuation sheets to P Total (add lines 1b and 1c)		nΑ.				*		19	90,321				39,333
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos		ed a	bov	e) who	rec	eived more	e than \$1	00,000			
3	Did the organization list any former	,		ee, k	ey e	mpl	oyee,	or hi	ghest com	pensated	employee on		Yes	No
4	Ine 1a? If "Yes," complete Schedule. For any individual listed on line 1a, is organization and related organization individual	the sum of rep	ortable :								the	3		No
5	Did any person listed on line 1a recei services rendered to the organization								-		vidual for	5	Yes	No
S	ection B. Independent Contract	ors											1	
1	Complete this table for your five high from the organization Report compe											mpens	sation	
	Name :	(A) and business addre	ess							Desc	(B) ription of services		(C Comper	
												\dashv		

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

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

(C)

Position (do not check more

than one box, unless person

(D) Reportable

compensation

(B)

Average

hours per

Treat in Schedule O contains a response or note to any lone in the Part VIII. Total revenue Property of the Part VIII. Total revenue Total Action	Part		III Statement of	Revenue									rage 9
Total revenue Reservation Control Reservation Revenue				e O contains a	a respo	nse or no	te to any	y line in	this Part VII				<u> </u>
Telegrand campaigns La										Rela exe fun	ted or empt ction	Unrelated business	Revenue excluded from tax under sections
Business Code Business Code Ba, IRR Ba,	10	1	a Federated campaigr	ns	1a					160	enue		312-314
Bus ness Code Security Prefers 18,148 18,	ints		b Membership dues .		1b								
Business Code Business Code Ba, IRR Ba,	Gra not		c Fundraising events		1c								
Bus ness Code Security Prefers 18,148 18,	₹		d Related organization	ns	1d								
Business Code Business Code Ba, IRR Ba,	<u>#</u>		e Government grants (co	ontributions)	1e								
Bus ness Code Security Prefers 18,148 18,	ns,												
Bus ness Code Security Prefers 18,148 18,	atio er (ot included	1f		540,939						
Business Code Business Code Ba, IRR Ba,	들			ns included									
Bus ness Code Security Prefers 18,148 18,	ont nd			<u> </u>	_		_						
Total Add lines 2a-2f. 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 18,943 1	ص ھ	بل	n Total.Add lines 1a-1		• •			- C- 1-	540,939				
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### All other program service revenue 16,943	ار ۲	_		SHUPS							10,1	50	755
### All other program service revenue 16,943	υ. E												
### All other program service revenue 16,943	er vi		•										
3 Investment income (including dividends, interest, and other similar amounts)	S S				_								
3 Investment income (including dividends, interest, and other similar amounts)	grai	1	All other program ser	rvice revenue		L							
### A Income from investment of tax-exempt bond proceeds	Ĕ	g	Total.Add lines 2a-2f			>		18,943	3				
4 Income From investment of fax exempt bond proceeds 5 Royalties () Real (ii) Personal 6a Gross rents Liess rental expenses						nterest, a				5			5
S Royalites		ı	•			and procee		_					
6a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assess where then inventory b Less costs or other basis and allow selections of the income or (loss) 8 Gross income from fundralising events (not including \$ of contributions reported on line it) See Part IV, line 19 9a Gross amoune from gaming activities See Part IV, line 19 10a Gross ales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a 12 Total revenue See Instructions 5 Sep. 25 Sep. 18,188 760					-			-	-	0			
December 1 December 2 December 3 Decem			[(ı) Rea		(II) Pe	rsonal						
C Rental income or (loss) d Net rental income or (loss)		6	Gross rents										
d Net rental income or (loss)			b Less rental expenses					-					
d Net rental income or (loss)			Danital manager										
Ta Gross amount from Seles of assets ofter than inventory b Less cost or other base and seles expenses c Gam or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) see Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 19 a Uses direct expenses c Net income or (loss) from fundraising events c Net income or (loss) from gaining activities a Uses direct expenses c Net income or (loss) from gaining activities a Uses direct expenses b C Net income or (loss) from gaining activities c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a b c Total Add lines 11a-11d p 0 12 Total revenue. See Instructions 18,188 760		'											
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from sales of assets other then inventory b Lass cost or other basis and sales expenses C Gain or (loss) d Net gain or (loss) Sa Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18				(ı) Securit	ies	(II) C	Other						
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c Net income or (loss) from gaming activities . 10aGross sales of inventory, less returns and allowances . b Less cost of goods sold . c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a b					а	l							
10aGross sales of inventory, less returns and allowances a b Less cost of goods sold b		l	•										
returns and allowances a b b less cost of goods sold . b c Net income or (loss) from sales of inventory .					activiti	ies	<u> </u>	_	-	0			
b Less cost of goods sold b C Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a b c d All other revenue		-0	returns and allowanc	es									
C Net income or (loss) from sales of inventory								_					
Miscellaneous Revenue Business Code 11a b c d All other revenue					ı					0			
b c d All other revenue e Total. Add lines 11a–11d					invent								
d All other revenue □ e Total. Add lines 11a-11d □ 12 Total revenue. See Instructions □ 559,887 18,188 760		1	la										
d All other revenue □ e Total. Add lines 11a-11d □ 12 Total revenue. See Instructions □ 559,887 18,188 760													
d All other revenue			ь										
d All other revenue													
e Total. Add lines 11a–11d ▶ 0 0 12 Total revenue. See Instructions ▶ 559,887 18,188 760		'											
e Total. Add lines 11a–11d ▶ 0 0 12 Total revenue. See Instructions ▶ 559,887 18,188 760			A All III					1					
12 Total revenue. See Instructions							<u> </u>	+					
559,887 18,188 760									ı	0			
			- rotar revenue. 566	THE UCHOUS	• •	• •	• •		559,88	7	18,188		760 Form 990 (2017)

Form 990 (2017)					Page 10
	of Functional Expenses c)(4) organizations must complete all co	lumns All other orga	anizations must comp	elete column (A)	
	ule O contains a response or note to any	_	·	• •	П
Do not include amounts 7b, 8b, 9b, and 10b of Pa	reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assis domestic governments	stance to domestic organizations and s See Part IV, line 21	0	скрепосо	general expenses	
2 Grants and other assis IV, line 22	stance to domestic individuals. See Part	0			
	stance to foreign organizations, foreign eign individuals See Part IV, line 15	0			
4 Benefits paid to or for	members	0			_
5 Compensation of curre key employees	ent officers, directors, trustees, and	161,671	113,170	16,167	32,334
	uded above, to disqualified persons (as 4958(f)(1)) and persons described in	0			
7 Other salaries and wag	ges	101,916	83,332	15,292	3,292
	and contributions (include section 401 //er contributions)	0			
9 Other employee benef	its	41,612	27,533	6,212	7,867
10 Payroll taxes		22,020	15,258	4,055	2,707
11 Fees for services (non-	⊢				
a Management	· <i>' '</i>	0			
b Legal	-	1,011		1,011	
c Accounting	<u> </u>	10,000		10,000	
-		0		10,000	
, -	⊢	0			
	g services See Part IV, line 17	0			
-	ent fees				
(A) amount, list line 1	ount exceeds 10% of line 25, column 1g expenses on Schedule 0)	0			
12 Advertising and promo	⊢	0			
13 Office expenses	⊢	16,817	5,510	6,123	5,184
14 Information technolog	y <u> </u>	0			
15 Royalties		0			
16 Occupancy		27,700	19,200	6,100	2,400
17 Travel		5,370	4,141		1,229
18 Payments of travel or federal, state, or local	entertainment expenses for any public officials	0			
19 Conferences, conventi	ons, and meetings	77,226	73,502		3,724
20 Interest		0			
21 Payments to affiliates		0			
22 Depreciation, depletion	n, and amortization	7,321	3,661	2,928	732
23 Insurance		4,253		4,253	
miscellaneous expense	ze expenses not covered above (List es in line 24e If line 24e amount 5, column (A) amount, list line 24e O)				
a Outside consultants	·	81,147	78,434		2,713
					_
b Publicity		36,747	36,747		
c Website design/main	tenance	12,772	12,772		
d Computer consultant	rs	6,064	4,851	606	607
e All other expenses		12,624	10,126	1,249	1,249
25 Total functional exp	enses. Add lines 1 through 24e	626,271	488,237	73,996	64,038
reported in column (B)	e this line only if the organization) joint costs from a combined and fundraising solicitation				

Form **990** (2017)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

16

17

18

19

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21

23

24

25

26

27

28

29

30

32

33

34

iabilities 22

Fund Balances

ŏ

Assets 31

Net

Page **11**

0

0

0

0

0

0

355

8,879

0

0

0

0

6.969

39.352

36.855

21,530

50.000

108.385

-98.074

29.041

-69,033

39.352

Form **990** (2017)

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

Beginning of year Cash-non-interest-bearing . 8,233 1 21,360 40,783 1,789 2 2 Savings and temporary cash investments . . 7.250 3

(A)

6

7

8

9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

1,266

11,849

3.673

73.054

25.703

50.000

75.703

-33.699

31.050

-2,649

73.054

3 Pledges and grants receivable, net . . 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5

58,570

49,691

II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Notes and loans receivable, net . . Inventories for sale or use .

Assets

Prepaid expenses and deferred charges .

10a basis Complete Part VI of Schedule D 10b Less accumulated depreciation

10a Land, buildings, and equipment cost or other 11 Investments—publicly traded securities .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Grants payable . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Investments—other securities See Part IV, line 11 .

12

13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here > \(\square\$ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3а

3b

Yes

Yes

No

Nο

Form 990 (2017)

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

c If "Yes," to line 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?

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

Schedule O

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 17005038

Software Version: 2017v2.2

EIN: 13-3400377

Form 990 (2017)

Form 990, Part III, Line 4a:

Name: Institute for American Values

FAMILY & CIVIC VALUES - The mission of the Institute for American Values is to study and strengthen U.S. civil society, with a particular focus currently on analyzing and reducing societal and political polarization in the United States. Its flagship initiative, Better Angels, aims to study and propose ways in which Americans who disagree on social and political issues can come together in civil discourse to clarify disagreements, reduce stereotyped thinking, and identify possible areas of common ground

Form 990, Part III, Line 4b:

around

PUBLIC EDUCATION - Institute for American Values staff frequently engage in public speaking and writing on issues connected to societal polarization and organize community workshops and other activities at the level of U.S. civil society that bring together citizens with opposing views to seek better mutual understanding and common

efil	e GR	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493242012088		
SC	H ED	ULE A		Public (Charity Statu rganization is a sect 4947(a)(1) nonexe	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017		
•		f the Treasury	▶ Infe	ormation abou	ıt Schedule A (Form	990 or 990-EZ		ictions is at	Open to Public Inspection		
Nam	e of th	nie Service he organiza			<u>www.irs.g</u>	<u>ov/form990</u> .		Employer identific	<u> </u>		
Institt	ite for A	American Value						13-3400377			
	rt I				us (All organization it is (For lines 1 thro			See instructions.			
1	n garnz				sociation of churches			(A)(i)			
2		•		·							
					1)(A)(ii). (Attach Sch	•	• •				
3		·	•	·	vice organization desc			•			
4			esearch orga and state _	nızatıon operat	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	nter the hospital's		
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170		
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).			
7	✓			mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in		
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)				
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a		
10		An organization that normally receives (1) more than 331/3% 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 331/3% 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 Part III)									
11		An organiza	ition organize	ed and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).			
12		more public	ly supported:	organizations of	l exclusively for the be described in section 5 the type of supporting	09(a)(1) or se (ction 509(a)(2). See section 509(a			
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by			
b		Type II. A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar						
С		Type III f	unctionally i		and C. supporting organizatio ons) You must com				ted with, its		
d		Type III n	on-function integrated	ally integrate The organizatio	d. A supporting organ n generally must satis t IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgar	` '		
е		Check this	, box if the org	ianization receiv	, ved a written determir	nation from the I		pe I, Type II, Type II	functionally		
f	Enter			ion-functionally Lorganizations	integrated supporting	organization					
g				-	ipported organization(s)		_			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No				
Tota	I										

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total (or fiscal year beginning in) Gifts, grants, contributions, and 972,139 675,367 397,346 450,310 540.939 3,036,101 membership fees received (Do not include any "unusual grant") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 675,367 972,139 397,346 450.310 540.939 3.036.101 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 1,525,244 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from 1,510,857 line 4 Section B. Total Support Calendar year (a)2013 (b)2014 (c)2015 (d)2016 (e)2017 (f)Total (or fiscal year beginning in) ▶ 3,036,101 7 Amounts from line 4 972,139 675,367 397,346 450.310 540,939 Gross income from interest, dividends, payments received on 78 1,706 1,388 120 3,297 securities loans, rents, royalties and income from similar sources Net income from unrelated business 0 activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 11 3,039,398 12 Gross receipts from related activities, etc (see instructions) 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, Section C. Computation of Public Support Percentage 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 49 710 % 15 Public support percentage for 2016 Schedule A, Part II, line 14 15 56 700 % 16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ▶ 🔽 and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ organization

20

(Complete only if you c	necked the box	on the 10 of Pa	arcior ii the or	gariization railet	a to qualify undi	er Part II. II
the organization fails to	qualify under t	the tests listed l	pelow, please co	mplete Part II.)	
Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						

Support Schedule for Organizations Described in Section 509(a)(2)

	(or fiscal year beginning in) ▶	(a) 2013	(B) 2017	(6) 2013	(4) 2010	(0) 2017	(1) 10.01
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
	under section 513						
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 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ection B. Total Support						
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(4) 2013	(6) 2014	(0) 2013	(4) 2010	(6) 2017	(1) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from	l	l	1	1	1	1

Se	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or						

loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) 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, 14 check this box and stop here Section C. Computation of Public Support Percentage

Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 15 Public support percentage from 2016 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 17 Investment income percentage from 2016 Schedule A, Part III, line 17 18 18 19a 331/3% support tests-2017. 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 - 2016. 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

Part I. complete Sections A and C. If you checked 12c of Part I. complete Sections A. D. and E. If you checked 12d of Part I. complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		

	they describe in the supported organization and accignated by diase or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied		

		~	l 1	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b	

	· ·						
c Did the organization ensure that all support to such org If "Yes," explain in Part VI what controls the organization	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If Tes, explain in Part v1 what controls the organization put in place to ensure such use	3с					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below	4a					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations						
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections						
	O1(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support						
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported						

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes."

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

8

10a

	art IV Supporting Organizations (continued)		<u>'</u>	age 3		
ı C	Supporting Organizations (continued)		Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c				
S	Section B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization	2				
S	Section C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
Section D. All Type III Supporting Organizations						
	ection b. An Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?					
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3				
_	Section E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ons)				
	a The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)			
			/			
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	ΣU				
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b				

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	izations	Page
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.	ust on I	Nov 20, 1970 (explain in	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	tegrat		ganization (see

7 Total annual distributions. Add lines 1 through 6					
Distributions to attentive supported organizations to widetails in Part VI) See instructions					
9 Distributable amount for 2017 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017				
1 Distributable amount for 2017 from Section C, line					

8 Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI)			

details in Part VI) See instructions	nen trie organization is respon	Sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			

Schedule A (Form 990 or 990-EZ) (2017)

b From 2013. **c** From 2014. **d** From 2015. e From 2016. f Total of lines 3a through e

instructions)

See instructions

31 and 4c 8 Breakdown of line 7

\$

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. . . . c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

Additional Data

Software ID: 17005038
Software Version: 2017v2.2

EIN: 13-3400377

Name: Institute for American Values

Schedule A (Schedule A (Form 990 or 990-EZ) 2017 Page 8					
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)					

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

Supplemental Financial Statements ► Complete if the organization answered "Yes," on Form 990,

► Attach to Form 990.

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

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public

DLN: 93493242012088 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

2

2

3

5

Part III

Name of the organization **Employer identification number** Institute for American Values 13-3400377 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

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

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

provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

the organization's accounting for conservation easements

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

Assets included in Form 990, Part X

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

Cat No 52283D Schedule D (Form 990) 2017

Par	11111	Organizations Maintaining Co	llections of Art	t, Histori	ical Tı	reasur	es, or Other	Similar Asset	t s (continued)
3		g the organization's acquisition, accessions (check all that apply)	on, and other recor	ds, check	any of	the follo	wing that are a	significant use o	of its collection
а		Public exhibition		d		Loan or	r exchange prog	rams	
b		Scholarly research		e		Other			
c		Preservation for future generations							
4	Provi Part	de a description of the organization's co	llections and expla	ain how the	ey furth	ner the c	organization's ex	kempt purpose ir	١
5		ng the year, did the organization solicit of ts to be sold to raise funds rather than t						nlar 🔲	Yes 🗆 No
Pa	rt IV								
		Complete if the organization ans X, line 21.	wered "Yes" on	Form 990), Part	IV, line	e 9, or reporte	ed an amount o	on Form 990, Part
1a		e organization an agent, trustee, custod ded on Form 990, Part X?	ıan or other ıntern	nediary for	contril	butions (or other assets	not	Yes 🗆 No
b	If "Y	es," explain the arrangement in Part XII	I and complete the	e following	table			Amou	unt
c	Begir	nning balance					1c		
d	Addıt	tions during the year					1d		
е	Dıstr	ibutions during the year					1e		
f	Endır	ng balance					1f		
2a	Dıd t	he organization include an amount on F	orm 990, Part X, lı	ne 21, for	escrow	or cust	odial account lia	ability?	Yes 🗆 No
b	If "Ye	es," explain the arrangement in Part XII	I Check here if the	e explanat	ion has	been pi	rovided in Part)		
Pa	rt V	Endowment Funds. Complete I	f the organization	n answei	red "Ye	es" on l	Form 990, Par	t IV, line 10.	
			(a)Current year	(b)P	rior yea	r (c	Two years back	(d)Three years ba	ack (e)Four years back
1a	Beginn	ning of year balance							
b	Contri	butions							
C	Net in	vestment earnings, gains, and losses							
d	Grants	s or scholarships							
е		expenditures for facilities rograms							
f	Admın	istrative expenses							
g	End of	year balance							
2	Provi	de the estimated percentage of the curr	ent year end balaı	nce (line 1	g, colu	mn (a))	held as		
а	Board	d designated or quasi-endowment 🕨							
b	Perm	nanent endowment 🟲							
c	Temp	porarily restricted endowment >							
	The p	percentages on lines 2a, 2b, and 2c sho	uld equal 100%						
3а		here endowment funds not in the posse nization by	ssion of the organ	ızatıon tha	t are h	eld and a	admınıstered fo	r the	Yes No
	(i) u	nrelated organizations			•				3a(i)
L		related organizations			ا ماريام الا ماريام		•		3a(ii) 3b
ь 4		es" on 3a(II), are the related organization ribe in Part XIII the intended uses of the	•			· · ·			30
	rt VI			Idownienc	Idilas				
Ţ.		Complete if the organization ans		Form 990), Part	IV, line	e 11a. See For	m 990, Part X	, line 10.
	Descr	iption of property (a) Cost or of (investm	ther basis (b) (Cost or other			(c) Accumulated o		(d) Book value
1a	Land								
	Buildir								
		nold improvements							
		ment							
	Other					58,570		49,691	8,879
		lines 1a through 1e (Column (d) must a	<u> </u>	art X, colui			(c))	>	8,879

Schedule D (Form 990) 2017				Page 3
Part VII	Investments—Other Securities. Complete if the orga See Form 990, Part X, line 12.	inizat	ion ansv	vered "Yes" on Form 9	90, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value		od of valuation of-year market value
(1) Financia (2) Closely-I (3)Other	derivatives	•			
(A)					
(B)					
(C)					_
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 99	90, P	art IV, lı	ne 11c. See Form 990	, Part X, line 13.
	(a) Description of investment (b) Bo	ook value		od of valuation of-year market value
(1)					·
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets. Complete if the organization answered 'Yes' or (a) Description	n For	m 990, Pa	rt IV, line IId See Form	(b) Book value
(1) Accounts (2) Security					3,969 3,000
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere	ed 'Y	es' on Fo		6,969 .1e or 11f.
1.	See Form 990, Part X, line 25. (a) Description of liability		(b) B	ook value	
(1) Federal II	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)		+			
(9)		+			
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>			
	or uncertain tax positions In Part XIII, provide the text of the foo is liability for uncertain tax positions under FIN 48 (ASC 740) Ch				_
or garrization	5 hability for uncertain tax positions under FIN 46 (ASC 740). Cf	icck (icie ii trie	text of the foothole has f	con provided in Part AIII L

Page 4

626,271

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

а

3

4

b

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

559.887

2a

2h

2с 2d

2e

3

1 1 626,271 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

Investment expenses not included on Form 990, Part VIII, line 7b . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on Form 990. Part IX, line 25, but not on line 1:

Add lines 2a through 2d

Return Reference

4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 626,271 5

Part XIII **Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Explanation

Schedule D (Form 990) 2017 Part XIII Supplemental Information (continued)					
Ret	curn Reference	Explanation			
			Schedule D (Form 990) 2017		

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	9324	2012	2088
Sch	edule J	C	ompensat	tion Information	OM	IB No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest						
			Compens	sated Employees wered "Yes" on Form 990, Part I\	/ line 23	2017		
		-	► Attacl	h to Form 990.				
•	tment of the Treasury al Revenue Service	▶ Information a		J (Form 990) and its instructions s.gov/form990.	is at		to Pul ectio	
Nar	ne of the organiza			-	Employer identificat	_		
Inst	tute for American V	alues			13-3400377			
Pa	rt I Questi	ons Regarding Compensa	ntion		120 0 100017			
	_						Yes	No
1a				of the following to or for a person list iny relevant information regarding the				
	First-class	s or charter travel		Housing allowance or residence for	•			
		companions		Payments for business use of person				İ
	_	nification and gross-up paymen	ts 📙	Health or social club dues or initiat				i
	☐ Discretion	nary spending account		Personal services (e g , maid, chau	iffeur, chef)			
b		xes in line 1a are checked, did t all of the expenses described ab		follow a written policy regarding payi mplete Part III to explain	ment or reimbursement	1b		
2				or allowing expenses incurred by all		2		
	airectors, truste	es, officers, including the CEO/	Executive Directo	or, regarding the items checked in lin	ie Ia			
3				sed to establish the compensation of	the			
				not check any boxes for methods • CEO/Executive Director, but explain	ın Part III			i
	, 	-						İ
	· ·	ation committee	H	Written employment contract Compensation survey or study				
		ent compensation consultant of other organizations	☑	Approval by the board or compens	ation committee			
_		-	_					
4	related organiza		990, Part VII, Se	ection A, line 1a, with respect to the	filing organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No
b	Participate in, o	r receive payment from, a supp	lemental nonqua	alıfıed retırement plan?		4b		No
c Participate in, or receive payment from, an equity-based compensation arrangement?						4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the ap	oplicable amounts for each item in Pa	rt III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	s must complete lines 5-9.				
5		ed on Form 990, Part VII, Section on tingent on the revenues of		the organization pay or accrue any				
а	The organization	n [?]				5a		No
b	Any related orga					5b		No
	If "Yes," on line	5a or 5b, describe in Part III						İ
6		ed on Form 990, Part VII, Section ontingent on the net earnings o	, ,	the organization pay or accrue any				
а	The organization	n?				6 a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Ye		d the organization provide any nonfixe Part III	ed	7		No
8				ured pursuant to a contract that was s section 53 4958-4(a)(3)? If "Yes," o	describe			N
9	If "Yes" on line 8 53 4958-6(c)?	8, did the organization also folk	ow the rebuttable	e presumption procedure described in	n Regulations section	8		No
	` <i>`</i>	iction Act Notice, see the Inc		Cat. Na	50053T Schedule 1	9	. 000)	No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (D) Nontaxable (E) Total of columns (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 David Blankenhorn 156,802 (i) 39,333 196,135 Pres/Exec Dir (ii)

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Explanation

Schedule 1 (Form 990) 2017

 	efile GRAPHIC print - DO NOT PROCESS				As Filed Data -					DLN: 93493242012088				
(Form 990 or 990-EZ) ► Complete if the organiza			ization a	ions with Interested Persons on answered "Yes" on Form 990, Part IV, lines or 28c, or Form 990-EZ, Part V, line 38a or 40b.							OMB No 1545-0047			
	► Tufo		► Attac	h to Form 990 le L (Form 99	or Form 99	O-EZ.		i.	-+		20		/	
Department of the Treasunternal Revenue Service	ırv	illiation abou		www.irs.gov,		, and its insti	uctio	115 15	aı		Open Ins	to Pu pectio		
Name of the organ							Eı	mplo	yer ide	entific	ation r	umbe	er	
Tristitute for American	r values						13	3-340	0377					
	Benefit Trans									- 401-				
· ·	te if the organizat Name of disqualifi			Relationship be	•	·			escripi			(d) Corrected?		
1 (4)	ivanie or alsquaiii	ed person		,	rganization	ililea person ai			ansacti		_ `	Yes No		
							+							
3 Futau tha au-	ount of tax incurre				· E	d + h			h			-		
4958								. sec	LION P	\$				
3 Enter the amo	ount of tax, if any	, on line 2, abo	ove, reimb	ursed by the o	rganızatıon .		•	•	. ▶	\$				
	ns to and/or F				Part V June 3	9a or Form 00)O D-	r+ T\/	lino 76	. or if	the or		ion.	
	ted an amount on				rait v, iiie 3	oa, or Form 95	о, га	iciv,	iiile 20), UI II	the org	janizat	.1011	
(a) Name of) Loan to or from the (e)Original (f)Balance				(g) In (h)				i)Writt		
interested person	with organization	th organization Purpose of loan		nızatıon?	principal amount	due	default? Appro		vea by d or			eement?		
								committe		ıttee?	?			
			То	From			Yes	_	Yes	No	Yes	N	lo	
1) David Blankenhorn	Pres/ED	Salary	X		21,530	21,530		No	Yes		Yes			
Total				•	\$	21,530								
	ts or Assistan													
	lete if the orga						·			(-) D				
(a) Name of intere	inte	rested person organization	and the	(c) Amount o	or assistance	(d) Type (or assi	istano	e	(e) Pu	rpose (or assis	stance	
											-			
						I								

Explanation

Return Reference

Part V

Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule I. (Form 990 or 990-F7) 2017

efile GRAPH	DLN:	93493242012088				
SCHEDUL (Form 990 or EZ)	99()- Complete to provide information for responses to specific form 990 or 990-EZ or to provide any additions ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) a www.irs.gov/form990.	ion to Form 990 or 990-EZ for responses to specific questions on ovide any additional information. orm 990 or 990-EZ. m 990 or 990-EZ) and its instructions is at				
Name of the org. Institute for Americ		Employer identif	ication number			
Return Reference	Explanation					
Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	Raına Sacks Blankenhorn, David Blankenhorn - family relationship					

Return Explanation
Reference

990 Schedule O. Supplemental Information

Form 990,
Part VI, Line
11b Form
990 and all its attachments were provided to each member of the Audit Committee consisting of 3 Directors by email for their review Each member of the Audit Committee with questions or comments directs those to the Treasurer for processing All distribution and review is completed before the filing of the return

Return Explanation Reference Form 990. Annual disclosure and checklist Part VI, Line 12c Explanation

Explanation
of Monitoring
and
Enforcement
of Conflicts

990 Schedule O, Supplemental Information

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Compensation Committee engaged an independent compensation consultant who examined comparable data and approved the proposed salaries for the President/Executive Director and one Vice President. The most recent review by the independent compensation consultant was done in 2009/2010

990 Schedule O, Supplemental Information

Return Reference	Explanation				
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Form 990 is available on Guidestar org. The Institute will upon request provide its governing documents and financial statements				

Return Explanation Reference Part VI, Annually, a questionnaire is sent to all Board Members and is monitored for compliance by the Treasurer

990 Schedule O. Supplemental Information

Section B, Question 12c