

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2009

Open to Public Inspection

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

A For the 2009 calendar year, or tax year beginning 10-01-2009 and ending 09-30-2010

- B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: AMERICA-MIDEAST EDUCATIONAL & SERVICES INC. Doing Business As: AMIDEAST. Address: 1730 M STREET NW NO 1100, WASHINGTON, DC 20036

D Employer identification number: 53-0243270. E Telephone number: (202) 776-9699. G Gross receipts \$ 79,653,974

F Name and address of principal officer: THEODORE H KATTOUF, 1730 M STREET NW NO 1100, WASHINGTON, DC 20036

H(a) Is this a group return for affiliates? No. H(b) Are all affiliates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3)

J Website: WWW.AMIDEAST.ORG

K Form of organization: Corporation. L Year of formation: 1951. M State of legal domicile: NY

Part I Summary

Table with 4 main sections: Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, employee counts, revenue breakdown, and asset/liability totals.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here: Signature of officer (Theodore H Kattouf) and Date (2011-08-11)

Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed, Preparer's identifying number, Firm's name (RSM Mcgladrey Inc), address, and phone number.

May the IRS discuss this return with the preparer shown above? Yes

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
AMIDEAST seeks to strengthen mutual understanding and cooperation between Americans and the peoples of the Middle East and North Africa

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 68,960,635 including grants of \$ 929,635) (Revenue \$ 77,051,415)
Programs(1) Exchange ProgramsGovernments, donor agencies, educational institutions, and corporations turn to AMIDEAST for assistance in managing scholarship and exchange programs in the United States for Middle Eastern and North African students Successful programs require solid logistics and support sponsors must determine appropriate selection criteria and make the most of limited resources, candidates seek advice on educational choices and on handling application, financial, and travel arrangements, and participant progress needs to be closely monitored AMIDEAST ensures that all these requirements are met so that scholarship and exchange programs can achieve their objectives AMIDEAST's services to education and training program sponsors include program announcement and recruiting of candidates, managing the selection process, placement, predeparture orientation, ongoing advising and monitoring, financial administration, reporting to sponsors For groups of American students or professionals, AMIDEAST designs and implements academic study, cultural immersion, and professional development programs in the Middle East and North Africa These programs are tailored to the needs and interests of each sponsor and can range in duration from a few days to an entire academic year Among the program elements AMIDEAST can arrange are predeparture and arrival orientations, academic courses and lectures, memorable cultural experiences, Arabic language instruction, field trips, internships, and professional meetings, and housing, including homestays In 2007, AMIDEAST initiated a study abroad semester program in Morocco in cooperation with a local Moroccan university, in 2009 launched similar programs in Jordan, Egypt, and Kuwait as well as a summer Arabic program in Morocco, and in 2010 it launched a summer Arabic program in Jordan as well In 2010, AMIDEAST supported short- and long-term scholarship and exchange programs for over 1,800 participants (2) Institutional StrengtheningFor decades, AMIDEAST has contributed to strengthening institutions in the Middle East and North Africa through a range of specialized services and programs designed to meet the needs of governments, nongovernmental organizations, and companies We have administered programs that advanced the quality of judicial training, contributed to faculty development at educational institutions, raised awareness of the importance of transparency and accountability in local government, and increased the participation of civil society organizations in public discourse In 2010, AMIDEAST administered-as either a prime or subcontractor-10 institutional strengthening projects in Egypt, Iraq, Jordan, Lebanon, Saudi Arabia, and the West Bank and Gaza (3) TrainingIn response to growing demand for English language training throughout the Middle East and North Africa, AMIDEAST has made the expansion of its English language training programs a priority In addition to English language classes, AMIDEAST offers preparation for a number of standardized tests including the Test of English as a Foreign Language (TOEFL), Graduate Record Exam (GRE), SAT I and II, and the Graduate Management Admissions Test (GMAT) AMIDEAST also designs and conducts English for special purposes programs to meet the specialized requirements of public and private sector entities, including national ministries, international and nongovernmental organizations, and businesses In addition, AMIDEAST combines its experience in language training and institutional development to help government ministries, public agencies, and educational institutions develop and improve their own English language training programs In addition to English language training, AMIDEAST field offices offer training programs and courses that provide individuals and institutions in the region-including private corporations, government agencies, and nonprofit organizations-with the skills they need to meet professional challenges Among the subject areas in which AMIDEAST routinely offers training are strategic planning, effective communications, management, computer skills, customer service, marketing, proposal writing, and negotiation skills In 2010, AMIDEAST taught English language and professional skills to more than 60,000 students and professionals (4) Educational AdvisingAMIDEAST offers expert, reliable guidance on U S study and training options Our educational information centers help individuals and institutions select the right options for their specific needs As EducationUSA sites, AMIDEAST centers provide comprehensive, accurate, and impartial support Some of the resources available at AMIDEAST educational advising centers include extensive libraries focusing on the U S educational system and study opportunities, presentations on the U S admissions process, specific fields of study, orientation to U S life and study, and other topics, individual consultations with our professional advising staff, support for each step of the application process, and assistance for U S graduates returning home In 2010, AMIDEAST advising centers recorded more than 200,000 visits (5) TestingAs the leading test administrator in the Middle East/North Africa region, AMIDEAST handles registration for and supervision of examinations for hundreds of thousands of students AMIDEAST administers most commonly required U S standardized tests, including the TOEFL, SAT, GRE, GMAT, TOEFL ITP, and TOEIC Testing services are provided for individuals and a variety of institutions, from ministries and universities to small businesses With more than fifty years of experience, AMIDEAST can provide support in all areas of testing identification of appropriate, recognized exams for academic or professional purposes, registration services, test administration and proctoring, quick, accurate, and secure scoring, and test preparation resources, courseware, and classes In 2010, AMIDEAST administered 92,300 computer-based, paper-based, and Internet-based tests

4b (Code) (Expenses \$ 422,178 including grants of \$) (Revenue \$ 33,968)
OutreachHelping American audiences learn about Middle Eastern and North African cultures and societies is an important aspect of AMIDEAST's mission AMIDEAST is an especially valuable resource for American teachers and librarians in grades K-12 who seek quality educational materials about the region for use with their students, and for U S college and university admissions personnel who need information about the educational systems of the Middle East and North Africa AMIDEAST brings insights about the Middle East and North Africa to American classrooms by developing and distributing the highest quality educational materials to U S educators The Arab Heritage Fund was established to help support ongoing and expanded outreach to American teachers, librarians, and students Quality educational exchange requires informed admissions decisions Through its Institutional Membership Program, AMIDEAST provides expert information and analysis on Arab educational systems, institutions, and academic credentials to U S and other higher educational institutions who are members of this specialized program In 2010, approximately 113 colleges and universities, English language institutes, and credential evaluation services subscribed to the Institutional Membership Program

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 69,382,813

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I <input checked="" type="checkbox"/>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II <input checked="" type="checkbox"/>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/>		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV <input checked="" type="checkbox"/>		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/>	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. <input checked="" type="checkbox"/>	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• 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? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII <input checked="" type="checkbox"/>	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <input checked="" type="checkbox"/>	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I <input checked="" type="checkbox"/>	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II <input checked="" type="checkbox"/>	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III <input checked="" type="checkbox"/>		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 55		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 387		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	EG, LE, JO, TS, MO, SY, YM, KU, AE, SA, IZ, QA, MU, If "Yes," enter the name of the foreign country: <u> </u> CY See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
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?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
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?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization If "Yes" to line a or b, describe the process in Schedule O (See instructions)	Yes	
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?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed NY
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 make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization LINDA DENICOLA CFO 1730 M STREET NW SUITE 1100 WASHINGTON, DC 20036 (202) 776-9699

1b Total	2,488,472	0	279,813
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶** 20

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a						
	b	Membership dues 1b						
	c	Fundraising events 1c						
	d	Related organizations 1d						
	e	Government grants (contributions) 1e						
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	192,014					
	g	Noncash contributions included in lines 1a-1f \$ ⁴⁴⁵						
	h	Total. Add lines 1a-1f ▶	192,014					
Program Service Revenue	2a	contract & grant reven	900,099	52,863,351	52,863,351			
	b	fees for service	900,099	24,218,391	24,218,391			
	c	product sales	900,099	3,641	3,641			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f ▶	77,085,383					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶		237,592		237,592		
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties ▶						
	6a	Gross Rents	(i) Real					
			(ii) Personal					
			b	Less rental expenses				
			c	Rental income or (loss)				
	d	Net rental income or (loss) ▶						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	2,066,687				
			(ii) Other					
			b	Less cost or other basis and sales expenses	2,167,161			
			c	Gain or (loss)	-100,474			
d	Net gain or (loss) ▶		-100,474		-100,474			
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a							
b	Less direct expenses b							
c	Net income or (loss) from fundraising events . . ▶							
9a	Gross income from gaming activities See Part IV, line 19 a							
b	Less direct expenses b							
c	Net income or (loss) from gaming activities . . ▶							
10a	Gross sales of inventory, less returns and allowances a							
b	Less cost of goods sold b							
c	Net income or (loss) from sales of inventory . . ▶							
	Miscellaneous Revenue	Business Code						
11a	other revenue	900,099	72,298		72,298			
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d ▶		72,298					
12	Total revenue. See Instructions ▶		77,486,813	77,085,383	0	209,416		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	929,635	929,635		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,095,844	2,095,844		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	11,812,813	8,373,785	3,241,892	197,136
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	315,834	183,570	126,473	5,791
9	Other employee benefits	2,429,894	1,647,917	747,738	34,239
10	Payroll taxes	1,029,319	710,951	304,428	13,940
11	Fees for services (non-employees)				
a	Management				
b	Legal	157,375	143,207	14,168	
c	Accounting	111,419	101,388	10,031	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	74,513		74,513	
g	Other	6,511,776	5,925,532	586,244	
12	Advertising and promotion				
13	Office expenses	1,815,593	1,415,383	398,608	1,602
14	Information technology				
15	Royalties				
16	Occupancy	4,003,845	3,222,106	781,739	
17	Travel	1,212,795	952,382	257,915	2,498
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	378,553	352,664	25,653	236
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,018,097	821,760	196,337	
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Participant & Student e	36,683,095	36,646,429		36,666
b	Subcontracts	2,568,002	2,568,002		
c	other expenses	2,278,066	1,530,284	745,738	2,044
d	furniture and project e	1,196,306	1,150,421	45,885	
e	Printing, Postage, Deli	675,256	611,553	62,891	812
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	77,298,030	69,382,813	7,620,253	294,964
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	500	1	67
	2 Savings and temporary cash investments	5,424,604	2	10,112,257
	3 Pledges and grants receivable, net	177,273	3	177,273
	4 Accounts receivable, net	6,343,949	4	6,040,616
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,069,483	8	1,041,890
	9 Prepaid expenses and deferred charges	845,549	9	1,086,434
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	9,851,746		
	b Less accumulated depreciation	8,233,301	10c	1,618,445
	11 Investments—publicly traded securities	9,198,851	11	8,304,100
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	25,168,220	16	28,381,082	
Liabilities	17 Accounts payable and accrued expenses	5,814,618	17	5,654,440
	18 Grants payable		18	
	19 Deferred revenue	564,667	19	659,962
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	4,644,306	25	7,037,309
	26 Total liabilities. Add lines 17 through 25	11,023,591	26	13,351,711
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	12,224,744	27	13,222,195
	28 Temporarily restricted net assets	1,919,885	28	1,807,176
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	14,144,629	33	15,029,371	
34 Total liabilities and net assets/fund balances	25,168,220	34	28,381,082	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Employer identification number
53-0243270

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	223,506	563,327	425,521	451,058	192,014	1,855,426
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	223,506	563,327	425,521	451,058	192,014	1,855,426
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						362,125
6 Public Support. Subtract line 5 from line 4						1,493,301

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	223,506	388,997	425,521	451,058	192,014	1,855,426
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	280,630	388,997	386,658	297,729	237,592	1,591,606
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets		11,834	40,937	57,454	72,298	182,523
11 Total support (Add lines 7 through 10)						3,629,555
12 Gross receipts from related activities, etc (See instructions)					12	328,187,519

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	41.140 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	41.010 %
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions <input checked="" type="checkbox"/>		

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
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						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)						

14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2009. 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—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation

Schedule A, Part II, Line 10, Explanation of Other Income Other Income

Additional Data

Software ID:

Software Version:

EIN: 53-0243270

Name: AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr Richard A Abdoo board member	20	X						0	0	0
Dr O deh Aburdene board member	20	X						0	0	0
Mr Kutayba Yusuf Alghanim board member	20	X						0	0	0
Ms Judith Barnett board member	20	X						0	0	0
Dr Alfred J Boulos board member	20	X						0	0	0
Dr Paul F Boulos board member	20	X						0	0	0
Mr Curtis W Brand board member	20	X						0	0	0
Dr Sherrill Cleland board member	20	X						0	0	0
The Honorable Robert S Dillon Emer board member	20	X						0	0	0
Mr Hasan M El-Khatib board member	20	X						0	0	0
Mr Antoine N Frem board member	20	X						0	0	0
The Honorable Edward M Gabriel board member	20	X						0	0	0
Dr Mary W Gray board member	20	X						0	0	0
Mr James Q Griffin board member	20	X						0	0	0
Mrs Doris C Halaby board member	20	X						0	0	0
Dr Taher S Helmy board member	20	X						0	0	0
Dr Alan W Horton Emeritus board member	20	X						0	0	0
Dr Rima Khalaf Hunaidi board member	20	X						0	0	0
Mrs Ghada Irani board member	20	X						0	0	0
Dr Paul Jabber board member	20	X						0	0	0
Dr Samir Khalaf Emeritus board member	20	X						0	0	0
Dr Mary E King board member	20	X						0	0	0
Mr D Patrick Maley III board member	20	X						0	0	0
The Honorable Robert H Pelletreau board member	20	X						0	0	0
The Honorable William A Rugh board member	20	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr Frederick C Seibold Jr board member	20	X						0	0	0
HE Senator Leila Abdul Hamid Shara board member	20	X						0	0	0
Dr Mostafa Terrab board member	20	X						0	0	0
Mr Jack T Tymann board member	20	X						0	0	0
The Honorable Nicholas Veliotis board member	20	X						0	0	0
The Honorable Theodore H Kattouf President & CEO	40 00	X		X				263,770	0	22,629
William Benz Vice President	40 00			X				189,704	0	19,151
Vincent DeSomma Vice President	40 00			X				171,700	0	24,396
Leslie Nucho vice President	40 00			X				153,583	0	21,277
James Grabowski vice President	40 00			X				150,423	0	22,833
Gregory Touma vice President	40 00			X				137,222	0	20,706
Kathleen Archambault vice President	40 00			X				136,182	0	21,702
Linda DeNicola vice President	40 00			X				52,520	0	2,272
Gary Collins Chief of Party	40 00				X			276,351	0	10,563
David Godsted Country Director	40 00				X			186,570	0	10,563
Chris Shinn Chief of Party	40 00				X			167,703	0	18,216
John McKissick Chief of Party	40 00					X		140,417	0	7,190
Dennis Turner Director	40 00					X		124,097	0	19,975
Jerome Bookin-Weiner Director	40 00					X		114,895	0	13,690
Nora Soliman Director	40 00					X		111,701	0	17,756
Juleann Fallgatter Director	40 00					X		111,634	0	26,894

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Participant & Student e	36,683,095	36,646,429		36,666
Subcontracts	2,568,002	2,568,002		
other expenses	2,278,066	1,530,284	745,738	2,044
furniture and project e	1,196,306	1,150,421	45,885	
Printing, Postage, Deli	675,256	611,553	62,891	812

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Employer identification number 53-0243270

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

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

- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

Table with 2 columns: Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

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

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

Table with 2 columns: Description (1c-1f) and Amount

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows include 1a-1g.

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment 100.000 %, b Permanent endowment, c Term endowment

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description (3a(i), 3a(ii), 3b), Yes, No

4 Describe in Part XIV the intended uses of the organization's endowment funds

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

Table with 5 columns: Description of investment, (a) Cost or other basis (Investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include 1a-1e and Total.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	77,486,813
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	77,298,030
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	188,783
4	Net unrealized gains (losses) on investments	4	695,959
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	695,959
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	884,742

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

1	Total revenue, gains, and other support per audited financial statements	1	78,108,259
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	695,959
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	695,959
3	Subtract line 2e from line 1	3	77,412,300
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	74,513
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	74,513
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	77,486,813

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

1	Total expenses and losses per audited financial statements	1	77,223,517
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	77,223,517
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	74,513
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	74,513
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	77,298,030

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The board of directors has designated endowment funds for future reserves
Part X	Description of Uncertain Tax Positions Under FIN 48	On October 1, 2009, Amideast adopted the accounting standard on accounting for uncertainty in income taxes (FASB ASC Topic 740-10), which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements Under this guidance, Amideast may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement The guidance on accounting for uncertainty in income taxes also addresses de-recognition, classification, interest and penalties on income taxes, and accounting in interim periods Management evaluated Amideast's tax positions and concluded that Amideast had taken no uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance Generally, Amideast is no longer subject to income tax examinations by the U S federal, state or local tax authorities for years before 2007

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Employer identification number 53-0243270

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance...
2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

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

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region, (e) If activity listed in (d) is a program service, (f) Total expenditures for region. Includes rows for Middle East and North Africa and a Totals row.

Additional Data

Software ID:
Software Version:
EIN: 53-0243270
Name: AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Youth and Municipalities New Participatory Governance	14,913	Check			
		Middle East and North Africa	Ratification of UN Convention on the Rights of Persons with Disabilities	15,000	Check			
		Middle East and North Africa	Safe Work in Lebanese Bakeries From Policy to Practice	25,000	Check			
		Middle East and North Africa	Access to information, the cornerstone of Transparency & Accountability	24,900	Check			
		Middle East and North Africa	Promoting Public Consultation in Urban Policy	27,000	Check			
		Middle East and North Africa	Custodial Bank Accounts - End Gender Discrimination	16,950	Check			
		Middle East and North Africa	Disability ID Awareness and Enforcement Campaign	20,000	Check			
		Middle East and North Africa	Promoting Rights of Working Children	34,583	Check			
		Middle East and North Africa	Equal Under the Law Know Your Rights	20,000	Check			
		Middle East and North Africa	Public Procurement Transparency	30,000	Check			
		Middle East and North Africa	Empowering Lebanese Women E-Center for Lebanese Women	75,000	Check			
		Middle East and North Africa	Children Advocating Children Rights	46,707	Check			
		Middle East and North Africa	Addressing Mental Health Problems in Lebanese Schools	36,000	Check			
		Middle East and North Africa	Lebanese Laws vs Reality	49,707	Check			
		Middle East and North Africa	Shadow Youth Municipal Councils	37,000	Check			
		Middle East and North Africa	The Voice of Younine (Sawt Younine)	10,000	Check			
		Middle East and North Africa	Transparency in the Equivalence Process	20,000	Check			
		Middle East and North Africa	Justice Delayed is Justice Denied	40,000	Check			
		Middle East and North Africa	National Quality Assurance Body for Higher Education in Lebanon	20,000	Check			
		Middle East and North Africa	Improved Consumer Protection	50,000	Check			
		Middle East and North Africa	Equal Under the Law Know Your Rights 2	20,875	Check			
		Middle East and North Africa	Administrative Decentralization Law	40,000	Check			
		Middle East and North Africa	Capacity Building of Craftsmen Syndicate	15,000	Check			
		Middle East and North Africa	Model Cabinet of Ministers	36,000	Check			
		Middle East and North Africa	Consumer Protection Awareness Campaign	25,000	Check			
		Middle East and North Africa	Increasing Accountability of Government Spending	20,000	Check			
		Middle East and North Africa	Citizen Information Pamphlets	25,000	Check			
		Middle East and North Africa	A Culture of Road Safety -- Continued	25,000	Check			
		Middle East and North Africa	Accreditation Criteria for Lebanese NGOs	10,000	Check			
		Middle East and North Africa	Role of Media A Tool for Fighting Corruption	12,000	Check			

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Energy Efficiency Standards	12,000	Check			
		Middle East and North Africa	Standards for Arabic Bread	15,000	Check			
		Middle East and North Africa	Women's Rights Monitor	17,000	Check			
		Middle East and North Africa	Modern Public Healthcare Regulation	15,000	Check			
		Middle East and North Africa	E-waste Management	15,000	Check			
		Middle East and North Africa	Business Ethics Program	14,000	Check			

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICA-MIDEAST EDUCATIONAL & TRAINING SERVICES INC

Employer identification number

53-0243270

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)									
<p>1b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain</p>	Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	Yes									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</p>										
<p>4a Receive a severance payment or change-of-control payment?</p>	Yes									
<p>4b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		No								
<p>4c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>		No								
<p>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</p>										
<p>5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p>										
<p>5a The organization?</p>		No								
<p>5b Any related organization? If "Yes," to line 5a or 5b, describe in Part III</p>		No								
<p>6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p>										
<p>6a The organization?</p>		No								
<p>6b Any related organization? If "Yes," to line 6a or 6b, describe in Part III</p>		No								
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>		No								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III</p>		No								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</p>										

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
The Honorable Theodore H Kattouf	(i)	263,770	0	0	20,129	4,730	288,629	0
	(ii)	0	0	0	0	0	0	0
William Benz	(i)	151,339	0	38,365	16,651	3,736	210,091	0
	(ii)	0	0	0	0	0	0	0
Vincent DeSomma	(i)	153,700	18,000	0	12,071	13,993	197,764	0
	(ii)	0	0	0	0	0	0	0
Leslie Nucho	(i)	139,583	14,000	0	18,777	3,980	176,340	0
	(ii)	0	0	0	0	0	0	0
James Grabowski	(i)	134,423	16,000	0	10,508	13,777	174,708	0
	(ii)	0	0	0	0	0	0	0
Gregory Touma	(i)	127,222	10,000	0	8,381	13,762	159,365	0
	(ii)	0	0	0	0	0	0	0
Kathleen Archambault	(i)	126,182	10,000	0	17,621	5,527	159,330	0
	(ii)	0	0	0	0	0	0	0
Gary Collins	(i)	185,016	3,000	88,335	0	12,183	288,534	0
	(ii)	0	0	0	0	0	0	0
David Godsted	(i)	133,443	9,000	44,127	0	12,183	198,753	0
	(ii)	0	0	0	0	0	0	0
Chris Shinn	(i)	110,191	12,000	45,512	7,653	11,590	186,946	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	Part I, Line 1a	The following employees have received housing allowance, which are taxable: Gary Collins \$ 37,000; David Godsted \$ 25,875; Chris Shinn \$ 24,000; John McKissick \$ 11,800.
	Part I, Line 4a	William Benz received \$38,365 severance pay; the severance payment is related to One year continuation of salary and Outplacement services.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.**

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

AMERICA-MIDEAST EDUCATIONAL & TRAINING
SERVICES INC

Employer identification number

53-0243270

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		form 990 is review ed by the organization's controller The Form 990 w as not provided to the Board prior to filing, but it is made available upon request Beginning next year, the Audit Committee w ill receive a copy, prior to filing

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		As the Employee Handbook is updated, staff are asked to sign certifications, that include the conflict of interest statement

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		1 Reviewed job description to determine accuracy of individual responsibilities as well as level of organizational responsibilities, 2 Identified benchmark positions for comparison, 3 Obtained salary data from a variety of sources (local, type of organization, budget size, etc), 4 Identified appropriate benchmark salaries, 5 Slotted those into grade structure, 6 Positioned all other jobs in grade structure based on identified level of responsibility, 7 Compared actual salaries to grades and identified those which needed adjustment because they were not within grade spread, or were placed incorrectly within grade based on level of experience and education, 8 Recommended adjustments, which were implemented

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		upon request

Identifier	Return Reference	Explanation
Form 990, Part XI, line 2c		the process for overseeing the audit of the financial statements and selection of an independent accountant that audited the financial statements has been consistent with prior years